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A bill to be entitled

2 An act relating to the Asbestos and Silica Compensation 3 Fairness Act; amending s. 774.202, F.S.; revising purpose 4 of the act; amending s. 774.203, F.S.; revising 5 definitions; amending s. 774.204, F.S.; revising essential 6 elements of an asbestos or silica claim; revising persons 7 who may file or maintain certain civil actions alleging a 8 nonmalignant asbestos claim; revising and providing evidence requirements; deleting a provision prohibiting 9 10 smokers from filing or maintaining certain asbestos claims; deleting a provision prohibiting certain persons 11 from filing or maintaining a civil action alleging an 12 asbestos claim based on cancer of the colon, rectum, or 13 stomach; amending s. 774.205, F.S.; deleting a provision 14 15 requiring claimants to be domiciled in this state or claim 16 to have been exposed to asbestos or silica in this state; revising information to be included in claims; amending s. 17 774.206, F.S.; deleting a provision prohibiting damages 18 19 from being awarded for fear or risk of cancer in certain civil actions; amending s. 774.207, F.S.; revising 20 21 prohibition on punitive damages; amending s. 774.208, F.S.; deleting criteria a plaintiff must establish in 22 23 order to establish a product seller's liability; providing 24 an effective date.

25

26 WHEREAS, the crush of asbestos litigation has been costly 27 to employers, employees, litigants, and the court system, and

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28 WHEREAS, in 1982, the Johns-Manville Corporation, the 29 nation's largest single supplier of insulation products 30 containing asbestos, declared bankruptcy due to the burden of 31 the asbestos litigation, and

32 WHEREAS, since 1982, more than 70 other companies have 33 reorganized due to the burden of asbestos litigation, and

34 WHEREAS, silica is a naturally occurring mineral, and 35 WHEREAS, the Earth's crust is over 90 percent silica, and 36 crystalline silica dust is the primary component of sand, 37 quartz, and granite, and

38 WHEREAS, silica-related illness, including silicosis, can 39 occur when tiny silica particles are inhaled, and

40 WHEREAS, silicosis was recognized as an occupational
41 disease many years ago, and

42 WHEREAS, the American Foundrymen's Society has distributed 43 literature for more than 100 years to its members warning of the 44 dangers of silica exposure, and

45 WHEREAS, the number of new lawsuits alleging silica-related 46 disease being filed each year began to rise precipitously in 47 recent years, and

WHEREAS, silica claims, like asbestos claims, often arise when an individual is identified as having markings on his or her lungs that are possibly consistent with silica exposure but the individual has no functional or physical impairment from any silica-related disease, and

53 WHEREAS, the Legislature finds that an overpowering public 54 necessity requires it to act to prevent a silica-based 55 litigation crisis, and

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56 WHEREAS, concerns about statutes of limitations may prompt 57 claimants who have been exposed to asbestos or silica but who do 58 not have any current injury to bring premature lawsuits in order 59 to protect against losing their rights to future compensation 60 should they become impaired, and

61 WHEREAS, consolidations, joinders, and similar procedures 62 to which some courts have resorted in order to deal with the 63 mass of asbestos and silica cases can undermine the appropriate 64 functioning of the judicial process and further encourage the 65 filing of thousands of cases by exposed individuals who are not 66 sick and who may never become sick, and

WHEREAS, the Legislature finds that there is an 67 68 overpowering public necessity to defer the claims of exposed 69 individuals who are not sick in order to preserve, now and for the future, defendants' ability to compensate people who develop 70 71 cancer and other serious asbestos-related and silica-related 72 injuries and to safeguard the jobs, benefits, and savings of 73 workers in this state and the well-being of the economy of this 74 state, NOW THEREFORE,

75

77

76 Be It Enacted by the Legislature of the State of Florida:

78 Section 1. Section 774.202, Florida Statutes, is amended 79 to read:

80 774.202 Purpose.--It is the purpose of this act to:
 81 (1) Ensure that persons who have demonstrable injuries as
 82 a result of exposure to asbestos and silica are given their
 83 constitutional right to access the court system Give priority to

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84 true victims of asbestos and silica, claimants who can 85 demonstrate actual physical impairment caused by exposure to 86 asbestos or silica; and 87 Ensure that the burden of medical monitoring and (2) 88 health care are not shifted from the asbestos and silica 89 companies to Florida patients, health insurance companies, 90 employers, and the State Treasury. Fully preserve the rights of 91 claimants who were exposed to asbestos or silica to pursue 92 compensation if they become impaired in the future as a result 93 of the exposure; 94 (3) Enhance the ability of the judicial system to 95 supervise and control asbestos and silica litigation; and 96 (4) Conserve the scarce resources of the defendants to 97 allow compensation to cancer victims and others who are 98 physically impaired by exposure to asbestos or silica while 99 securing the right to similar compensation for those who may 100 suffer physical impairment in the future. 101 Subsections (4), (18), (22), (23), (24), and Section 2. 102 (25) of section 774.203, Florida Statutes, are amended to read: 103 774.203 Definitions.--As used in this act, the term: 104 (4) "Asbestosis" means bilateral diffuse interstitial 105 pneumonitis and fibrosis caused by inhalation of the lungs 106 caused by inhalation of asbestos fibers. 107 "Mesothelioma" means a malignant tumor with a primary (18)108 site in the pleura, or the peritoneum, or the pericardium or tunica vaginalis testis, which has been diagnosed by a board-109 certified pathologist, using standardized and accepted criteria 110 of microscopic morphology or appropriate staining techniques. 111 Page 4 of 22

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(22) "Predicted lower limit of normal" for any test means below the reference values set by the American Thoracic Society the fifth percentile of healthy populations based on age, height, and gender, as referenced in the AMA Guides to the Evaluation of Permanent Impairment. (23) "Qualified physician" means a medical doctor, who:

(a) Is a board-certified pathologist licensed to practice
and actively practices in this country who performed services
requested or authorized by a physician who:

Has conducted <u>an evaluation of pathology materials</u>
 <u>obtained from surgical or postmortem specimens</u> a physical
 <del>examination</del> of the exposed person or, if the person is deceased,
 has reviewed all available records relating to the exposed
 person's medical condition;

126 2. Is actually treating or has treated the exposed person, 127 and has or had a doctor-patient relationship with the person; 128 and

129 2.3. Is licensed to practice and actively practices in 130 this country; or

(b) Is a board-certified oncologist, pulmonary specialist,
or specialist in occupational and environmental medicine who:

Has conducted a physical examination of the exposed
 person or, if the person is deceased, has reviewed all available
 records relating to the exposed person's medical condition;

136 2. Is actually treating or has treated the exposed person, 137 and has or had a doctor-patient relationship with the person; 138 and

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139 <u>2.3.</u> Is licensed to practice and actively practices in
140 this country.

"Radiological evidence of asbestosis" means a finding 141 (24)142 on a quality 1 chest X ray under the ILO System of 143 classification (in a death case where no pathology is available, 144 the necessary radiologic findings may be made with a quality 2 145 film if a quality 1 film is not available) showing small, irregular opacities (s, t, u) graded by a certified B-reader of 146 147 1/0 or higher as at least 1/1 on the ILO scale or such other competent evidence of asbestosis on computed tomography by a 148 149 licensed physician.

150 (25)"Radiological evidence of diffuse pleural disease 151 thickening" means a finding on a quality 1 chest X ray or 152 computer tomography showing pleural plaques or pleural 153 thickening by a licensed physician under the ILO System of 154 classification (in a death case where no pathology is available, 155 the necessary radiologic findings may be made with a quality 2 156 film if a quality 1 film is not available) showing bilateral 157 pleural thickening of at least B2 on the ILO scale and blunting 158 of at least one costophrenic angle.

Section 3. Section 774.204, Florida Statutes, is amended to read:

161

774.204 Physical impairment.--

(1) Physical impairment <u>or death</u> of the exposed person, to
which asbestos or silica exposure was a substantial contributing
factor, is an essential element of an asbestos or silica claim.

165 (2) A person may not file or maintain a civil action 166 alleging a nonmalignant asbestos claim in the absence of a prima Page 6 of 22

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167 facie showing of physical impairment <u>or death</u> as a result of a 168 medical condition to which exposure to asbestos was a 169 substantial contributing factor. The prima facie showing must 170 include all of the following requirements:

(a) Evidence verifying that a qualified physician, or someone working under the direct supervision and control of a qualified physician, has taken a detailed occupational and exposure history of the exposed person or, if the person is deceased, from a person who is knowledgeable about the exposures that form the basis of the nonmalignant asbestos claim, including:

Identification of all of the exposed person's pertinent
 principal places of employment and exposures to airborne
 contaminants; and

2. Whether each place of employment involved exposures to airborne contaminants, including but not limited to asbestos fibers or other disease-causing dusts, that can cause pulmonary impairment and the nature, duration, and level of any such exposure, if known.

(b) Evidence verifying that a qualified physician, or
someone working under the direct supervision and control of a
qualified physician, has taken a detailed medical and smoking
history, including a thorough review of the exposed person's
past and present medical problems and their most probable cause.

(c) Evidence sufficient to demonstrate that at least 10
years have elapsed between the date of first exposure to
asbestos and the date the diagnosis is made.

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194 In the case of a living person, a determination by a (d) 195 qualified physician that the exposed person is impaired as 196 defined by Official Statements of the American Thoracic Society, 197 on the basis of a medical examination and pulmonary function 198 testing, that the exposed person has a permanent respiratory 199 impairment rating of at least Class 2 as defined by and 200 evaluated pursuant to the AMA Guides to the Evaluation of 201 Permanent Impairment.

(e) A diagnosis by a qualified physician of asbestosis or
 asbestos-related diffuse pleural disease thickening, based at a
 minimum on radiological or pathological evidence of asbestosis
 or radiological evidence of <u>asbestos-related</u> diffuse pleural
 disease thickening.

(f) <u>In the case of a living person</u>, a determination by a qualified physician that asbestosis or <u>asbestos-related</u> <del>diffuse</del> pleural <u>disease</u> thickening, rather than chronic obstructive pulmonary disease, is a substantial contributing factor to the exposed person's physical impairment, <u>as defined by Official</u> <u>Statements of the American Thoracic Society</u>. <u>based at a minimum</u> on a determination that the exposed person has:

214 1. Total lung capacity, by plethysmography or timed gas 215 dilution, below the predicted lower limit of normal;

216 2. Forced vital capacity below the lower limit of normal 217 and a ratio of FEV1 to FVC that is equal to or greater than the 218 predicted lower limit of normal; or

219 3. A chest X ray showing small, irregular opacities (s, t, 220 u) graded by a certified B-reader as at least 2/1 on the ILO 221 scale.

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222 If the exposed person meets the requirements of 223 paragraphs (a), (b), and (c), and if a qualified physician 224 determines that the exposed person has a physical impairment, as 225 demonstrated by meeting the criteria set forth in paragraph (d) 226 and subparagraph (f)1. or subparagraph (f)2., but the exposed 227 person's chest X ray does not demonstrate radiological evidence 228 of asbestosis, the exposed person may meet the criteria of 229 paragraph (c) if his or her chest X ray is graded by a certified 230 B-reader as at least 1/0 and a qualified physician, relying on 231 high-resolution computed tomography, determines to a reasonable 232 degree of medical certainty that the exposed person has 233 asbestosis and forms the conclusion set forth in paragraph (h). 234 (g) (h) A conclusion by a qualified physician that the 235 exposed person's exposure to asbestos was a substantial 236 contributing cause of the exposed person's medical findings, and impairment, or death were not more probably the result of causes 237 238 other than the asbestos exposure revealed by the exposed 239 person's employment and medical history. A diagnosis that states 240 that the medical findings and impairment are "consistent with"

241 or "compatible with" exposure to asbestos does not meet the 242 requirements of this subsection.

(h) (i) If a plaintiff files a civil action alleging a nonmalignant asbestos claim, and that plaintiff alleges that his or her exposure to asbestos was the result of extended contact with another exposed person who, if the civil action had been filed by the other exposed person, would have met the requirements of paragraph (a), and the plaintiff alleges that he or she had extended contact with the exposed person during the

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time period in which that exposed person met the requirements of paragraph (a), the plaintiff has satisfied the requirements of paragraph (a). The plaintiff in such a civil action must individually satisfy the requirements of paragraphs (b), (c), (d), (e), (f), and (g), and (h).

255 (3) A person who is a smoker may not file or maintain a 256 civil action alleging an asbestos claim which is based upon 257 cancer of the lung, larynx, pharynx, or esophagus in the absence 258 of a prima facie showing that includes all of the following 259 requirements:

260 (a) A diagnosis by a qualified physician who is board 261 certified in pathology, pulmonary medicine, or oncology, as 262 appropriate for the type of cancer claimed, of a primary cancer 263 of the lung, larynx, pharynx, or esophagus, and that exposure to 264 asbestos was a substantial contributing factor to the condition. 265 (b) Evidence sufficient to demonstrate that at least 10 266 years have elapsed between the date of first exposure to 267 asbestos and the date of diagnosis of the cancer.

268 (c) Radiological or pathological evidence of asbestosis or 269 diffuse pleural thickening or a qualified physician's diagnosis 270 of asbestosis based on a chest X ray graded by a certified B-271 reader as at least 1/0 on the ILO scale and high-resolution 272 computed tomography supporting the diagnosis of asbestosis to a 273 reasonable degree of medical certainty.

274 (d) Evidence of the exposed person's substantial 275 occupational exposure to asbestos. If a plaintiff files a civil 276 action alleging an asbestos-related claim based on cancer of the 277 lung, larynx, pharynx, or esophagus, and that plaintiff alleges Page 10 of 22

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278 that his or her exposure to asbestos was the result of extended 279 contact with another exposed person who, if the civil action had 280 been filed by the other exposed person, would have met the 281 substantial occupational exposure requirement of this 282 subsection, and the plaintiff alleges that he or she had 283 extended contact with the exposed person during the time period 284 in which that exposed person met the substantial occupational 285 exposure requirement of this subsection, the plaintiff has 286 satisfied the requirements of this paragraph. The plaintiff in 287 such a civil action must individually satisfy the requirements 288 of this subsection. 289 If the exposed person is deceased, the qualified (e)290 physician, or someone working under the direct supervision and 291 control of a qualified physician, may obtain the evidence 292 required in paragraphs (b) and (d) from the person most 293 knowledgeable about the alleged exposures that form the basis of

294 the asbestos claim.

(f) A conclusion by a qualified physician that the exposed person's medical findings and impairment were not more probably the result of causes other than the asbestos exposure revealed by the exposed person's employment and medical history. A conclusion that the medical findings and impairment are "consistent with" or "compatible with" exposure to asbestos does not meet the requirements of this subsection.

302 <u>(3)(4)</u> In a civil action alleging an asbestos claim by a 303 nonsmoker based on cancer of the lung, larynx, <u>colon, rectum</u>, 304 <u>stomach</u>, pharynx, or esophagus, a prima facie showing of an 305 impairment due to asbestos exposure is not required.

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306 A person may not file or maintain a civil action (5)307 alleging an asbestos claim which is based on cancer of the 308 colon, rectum, or stomach in the absence of a prima facie 309 showing that includes all of the following requirements: 310 (a) A diagnosis by a qualified physician who is board 311 certified in pathology, pulmonary medicine, or oncology, 312 appropriate for the type of cancer claimed, of cancer 313 colon, rectum, or stomach, and that exposure to asbestos was a 314 substantial contributing factor to the condition. 315 (b) Evidence sufficient to demonstrate that at least 10 316 years have elapsed between the date of first exposure to 317 asbestos and the date of diagnosis of the cancer. 318 (c)1.a. Radiological or pathological evidence of 319 asbestosis or diffuse pleural thickening or a qualified 320 physician's diagnosis of asbestosis based on a chest X ray 321 graded by a certified B-reader as at least 1/0 on the ILO scale 322 and high-resolution computed tomography supporting the diagnosis 323 of asbestosis to a reasonable degree of medical certainty; or 324 b. Evidence of the exposed person's substantial 325 occupational exposure to asbestos. If a plaintiff files a civil 326 action alleging an asbestos-related claim based on cancer of the 327 colon, rectum, or stomach, and that plaintiff alleges that his 328 or her exposure to asbestos was the result of extended contact 329 with another exposed person who, if the civil action had been 330 filed by the other exposed person, would have met the 331 substantial occupational exposure requirement of this subsection, and the plaintiff alleges that he or she had 332 333 extended contact with the exposed person during the time period Page 12 of 22

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in which that exposed person met the substantial occupational exposure requirement of this subsection, the plaintiff has satisfied the requirements of this sub-subparagraph. The plaintiff in such a civil action must individually satisfy the requirements of this subsection.

339 2. In the case of an exposed person who is a smoker, the 340 criteria in sub-subparagraph 1.a. and b. must be met.

341 3. If the exposed person is deceased, the qualified 342 physician, or someone working under the direct supervision and 343 control of a qualified physician, may obtain the evidence 344 required in sub-subparagraph 1.b. and paragraph (b) from the 345 person most knowledgeable about the alleged exposures that form 346 the basis of the asbestos claim.

347 (d) A conclusion by a qualified physician that the exposed 348 person's medical findings and impairment were not more probably 349 the result of causes other than the asbestos exposure revealed 350 by the exposed person's employment and medical history. A 351 conclusion that the medical findings and impairment are 352 "consistent with" or "compatible with" exposure to asbestos does 353 not meet the requirements of this subsection.

354 <u>(4)(6)</u> In a civil action alleging an asbestos claim based 355 upon mesothelioma a prima facie showing of an impairment due to 356 asbestos exposure is not required.

357 <u>(5)(7)</u> A person may not file or maintain a civil action 358 alleging a silicosis claim in the absence of a prima facie 359 showing of physical impairment as a result of a medical 360 condition to which exposure to silica was a substantial

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361 contributing factor. The prima facie showing must include all of 362 the following requirements:

(a) Evidence verifying that a qualified physician, or
someone working under the direct supervision and control of a
qualified physician, has taken a detailed occupational and
exposure history of the exposed person or, if the person is
deceased, from a person who is knowledgeable about the exposures
that form the basis of the nonmalignant silica claim, including:

369 1. All of the exposed person's principal places of370 employment and exposures to airborne contaminants; and

2. Whether each place of employment involved exposures to airborne contaminants, including, but not limited to, silica particles or other disease-causing dusts, that can cause pulmonary impairment and the nature, duration, and level of any such exposure.

(b) Evidence verifying that a qualified physician, or someone working under the direct supervision and control of a qualified physician, has taken detailed medical and smoking history, including a thorough review of the exposed person's past and present medical problems and their most probable cause, and verifying a sufficient latency period for the applicable stage of silicosis.

(c) A determination by a qualified physician, on the basis of a medical examination and pulmonary function testing, that the exposed person has a permanent respiratory impairment rating of at least Class 2 as defined by and evaluated pursuant to the AMA Guides to the Evaluation of Permanent Impairment.

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388 (d) A determination by a qualified physician that the389 exposed person has:

390 1. A quality 1 chest X ray under the ILO System of 391 classification and that the X ray has been read by a certified 392 B-reader as showing, according to the ILO System of 393 classification, bilateral nodular opacities (p, q, or r) 394 occurring primarily in the upper lung fields, graded 1/1 or 395 higher; or

396 2. Pathological demonstration of classic silicotic nodules
397 exceeding one centimeter in diameter as published in 112 Archive
398 of Pathology and Laboratory Medicine 7 (July 1988).

400 In a death case where no pathology is available, the necessary 401 radiologic findings may be made with a quality 2 film if a 402 quality 1 film is not available.

(e) A conclusion by a qualified physician that the exposed person's medical findings and impairment were not more probably the result of causes other than silica exposure revealed by the exposed person's employment and medical history. A conclusion that the medical findings and impairment are "consistent with" or "compatible with" exposure to silica does not meet the requirements of this subsection.

410 (6) (8) A person may not file or maintain a civil action 411 alleging a silica claim other than as provided in subsection (5) 412 (7), in the absence of a prima facie showing that includes all 413 of the following requirements:

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(a) A report by a qualified physician who is:

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1. Board certified in pulmonary medicine, internal medicine, oncology, or pathology stating a diagnosis of the exposed person of silica-related lung cancer and stating that, to a reasonable degree of medical probability, exposure to silica was a substantial contributing factor to the diagnosed lung cancer; or

421 2. Board certified in pulmonary medicine, internal 422 medicine, or pathology stating a diagnosis of the exposed person 423 of silica-related progressive massive fibrosis or acute 424 silicoproteinosis, or silicosis complicated by documented 425 tuberculosis.

(b) Evidence verifying that a qualified physician, or someone working under the direct supervision and control of a qualified physician, has taken a detailed occupational and exposure history of the exposed person or, if the person is deceased, from a person who is knowledgeable about the exposures that form the basis of the nonmalignant silica claim, including:

432 1. All of the exposed person's principal places of433 employment and exposures to airborne contaminants; and

434 2. Whether each place of employment involved exposures to 435 airborne contaminants, including, but not limited to, silica 436 particles or other disease-causing dusts, that can cause 437 pulmonary impairment and the nature, duration, and level of any 438 such exposure.

439 (c) Evidence verifying that a qualified physician, or
440 someone working under the direct supervision and control of a
441 qualified physician, has taken a detailed medical and smoking

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442 history, including a thorough review of the exposed person's 443 past and present medical problems and their most probable cause;

444 (d) A determination by a qualified physician that the445 exposed person has:

1. A quality 1 chest X ray under the ILO System of classification and that the X ray has been read by a certified B-reader as showing, according to the ILO System of classification, bilateral nodular opacities (p, q, or r) occurring primarily in the upper lung fields, graded 1/1 or higher; or

452 2. Pathological demonstration of classic silicotic nodules
453 exceeding one centimeter in diameter as published in 112 Archive
454 of Pathology and Laboratory Medicine 7 (July 1988).

In a death case where no pathology is available, the necessary radiologic findings may be made with a quality 2 film if a quality 1 film is not available.

(e) A conclusion by a qualified physician that the exposed person's medical findings and impairment were not more probably the result of causes other than silica exposure revealed by the exposed person's employment and medical history. A conclusion that the medical findings and impairment are "consistent with" or "compatible with" exposure to silica does not meet the requirements of this subsection.

466 <u>(7) (9)</u> Evidence relating to physical impairment under this 467 section, including pulmonary function testing and diffusing 468 studies, must:

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469 Comply with the Official Statements of the American (a) 470 Thoracic Society technical recommendations for examinations, 471 testing procedures, quality assurance, quality control, and 472 equipment of the AMA Guides to the Evaluation of Permanent 473 Impairment, as set forth in 20 C.F.R. part 404, Subpart P. App. 474 1. Part A, s. 3.00 E. and F., and the interpretive standards, 475 set forth in the official statement of the American Thoracic 476 Society entitled "lung function testing: selection of reference 477 values and interpretive strategies" as published in American 478 Review of Respiratory Disease. 1991: 144:1202-1218; 479 Not be obtained through testing or examinations that (b) 480 violate any applicable law, regulation, licensing requirement, 481 or medical code of practice; and 482 Not be obtained under the condition that the exposed (C) 483 person retain legal services in exchange for the examination, 484 test, or screening. 485 (8) (10) Presentation of prima facie evidence meeting the 486 requirements of subsection (2), subsection (3), subsection (5), 487 or subsection (4) (6) of this section may not: 488 Result in any presumption at trial that the exposed (a) 489 person is impaired by an asbestos-related or silica-related 490 condition; 491 Be conclusive as to the liability of any defendant; (b) 492 and 493 Be admissible at trial. (C) Section 4. Section 774.205, Florida Statutes, is amended 494 495 to read: 496 774.205 Claimant proceedings.--Page 18 of 22

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497 (1) A civil action alleging an asbestos or silica claim 498 may be brought in the courts of this state if the plaintiff is 499 domiciled in this state or the exposure to asbestos or silica 500 that is a substantial contributing factor to the physical 501 impairment of the plaintiff on which the claim is based occurred 502 in this state.

503 (1) (1) (2) A plaintiff in a civil action alleging an asbestos 504 or silica claim must include with the complaint or other initial 505 pleading a written report and supporting test results 506 constituting prima facie evidence of the exposed person's 507 asbestos-related or silica-related physical impairment meeting 508 the requirements of s.  $774.204(2)_{7}$  (3), (5), or (4)(6). For any asbestos or silica claim pending on the effective date of this 509 510 act, the plaintiff must file the report and supporting test results at least 30 days before setting a date for trial. The 511 512 defendant must be afforded a reasonable opportunity to challenge 513 the adequacy of the proffered prima facie evidence of asbestos-514 related impairment. The claim of the plaintiff shall be 515 dismissed without prejudice upon a finding of failure to make 516 the required prima facie showing.

517 (2)(3) All asbestos claims and silica claims filed in this 518 state on or after the effective date of this act must include, 519 in addition to the written report described in subsection (1) 520 (2) and the information required by s. 774.207(2), a sworn 521 information form containing the following information:

(a) The claimant's name, address, date of birth, andmarital status;

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524 (b) If the claimant alleges exposure to asbestos or silica 525 through the testimony of another person or alleges other than 526 direct or bystander exposure to a product, the name, address, 527 date of birth, and marital status for each person by which the 528 claimant alleges exposure, hereinafter the "index person," and 529 the claimant's relationship to each such person; 530 The specific location of each alleged exposure; (c)531 (d) The beginning and ending dates of each alleged 532 exposure as to each asbestos product or silica product for each 533 location at which exposure allegedly took place for the 534 plaintiff and each index person; 535 The occupation and name of the employer of the exposed (e)person at the time of each alleged exposure; 536 537 (b) (f) The specific condition related to asbestos or 538 silica claimed to exist; and 539 (c) (g) Any supporting documentation of the condition 540 claimed to exist. 541 Section 5. Subsection (2) of section 774.206, Florida 542 Statutes, is amended to read: 543 774.206 Statute of limitations; two-disease rule.--544 An asbestos or silica claim arising out of a (2) 545 nonmalignant condition shall be a distinct cause of action from 546 an asbestos or silica claim relating to the same exposed person 547 arising out of asbestos-related or silica-related cancer. Damages may not be awarded for fear or risk of cancer in a civil 548 action asserting an asbestos or silica claim. 549 550 Section 6. Subsection (1) of section 774.207, Florida 551 Statutes, is amended to read:

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552 774.207 Scope of liability; damages.--553 (1)Punitive damages may not be awarded in any civil 554 action alleging an asbestos or silica claim in accordance with the laws of the state. 555 556 Section 7. Section 774.208, Florida Statutes, is amended 557 to read: 558 774.208 Liability rules applicable to protect sellers, 559 renters, and lessors. --560 (1) (a) In a civil action alleging an asbestos or silica claim, a product seller other than a manufacturer is liable to a 561 562 plaintiff only if the plaintiff establishes that: 563 The product that allegedly caused the harm that is <del>1.a.</del> the subject of the complaint was sold, rented, or leased by the 564 565 product seller; 566 b. The product seller failed to exercise reasonable care 567 with respect to the product; and 568 c. The failure to exercise reasonable care was a proximate 569 cause of the harm to the exposed person; 570 2.a. The product seller made an express warranty 571 applicable to the product that allegedly caused the harm that is 572 the subject of the complaint, independent of any express 573 warranty made by the manufacturer as to the same product; 574 b. The product failed to conform to the warranty; and 575 c. The failure of the product to conform to the warranty caused the harm to the exposed person; or 576 577 3.a. The product seller engaged in intentional wrongdoing, 578 as determined under the law of this state; and

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579 b. The intentional wrongdoing caused the harm that is the 580 subject of the complaint. 581 (b) For the purpose of sub-subparagraph (a)1.b., a product 582 seller may not be considered to have failed to exercise 583 reasonable care with respect to a product based upon an alleged 584 failure to inspect the product, if: 585 1. The failure occurred because there was no reasonable 586 opportunity to inspect the product; or 587 2. The inspection, in the exercise of reasonable care, 588 would not have revealed the aspect of the product which 589 allegedly caused the exposed person's impairment. 590 (2) In a civil action alleging an asbestos or silica 591 claim, a person engaged in the business of renting or leasing a 592 product is not liable for the tortious act of another solely by 593 reason of ownership of that product.

594 Section 8. This act shall take effect July 1, 2009.

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