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A bill to be entitled

An act relating to evidence of damages to prove medical expenses in personal injury or wrongful death actions; amending s. 768.0427, F.S.; providing evidence that is admissible to demonstrate past and future medical expenses in personal injury and wrongful death actions; providing an effective date.

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

Section 1. Paragraphs (b) and (c) of subsection (2) of section 768.0427, Florida Statutes, are amended to read:

768.0427 Admissibility of evidence to prove medical expenses in personal injury or wrongful death actions; disclosure of letters of protection; recovery of past and future medical expenses damages.—

- (2) ADMISSIBLE EVIDENCE OF MEDICAL TREATMENT OR SERVICE EXPENSES.—Evidence offered to prove the amount of damages for past or future medical treatment or services in a personal injury or wrongful death action is admissible as provided in this subsection.
- (b) Evidence offered to prove the amount necessary to satisfy unpaid charges for incurred medical treatment or services <u>may shall</u> include <u>any evidence allowed by the court</u> that tends to demonstrate the actual value of medical treatment

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CODING: Words stricken are deletions; words underlined are additions.

or services rendered, including, but is not limited to, evidence as provided in this paragraph.

- 1. If the claimant has health care coverage other than Medicare or Medicaid, Evidence of the amount the claimant's which such health care coverage is, or otherwise would be, obligated to pay the health care provider to satisfy the charges for the claimant's incurred medical treatment or services, plus the claimant's share of medical expenses under the insurance contract or regulation.
- 2. Evidence of the reasonable and customary rates for such treatment or services rendered by a qualified provider If the claimant has health care coverage but obtains treatment under a letter of protection or otherwise does not submit charges for any health care provider's medical treatment or services to health care coverage, evidence of the amount the claimant's health care coverage would pay the health care provider to satisfy the past unpaid medical charges under the insurance contract or regulation, plus the claimant's share of medical expenses under the insurance contract or regulation, had the claimant obtained medical services or treatment pursuant to the health care coverage.
- 3. If the claimant does not have health care coverage or has health care coverage through Medicare or Medicaid, evidence of 120 percent of the Medicare reimbursement rate in effect on the date of the claimant's incurred medical treatment or

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services, or, if there is no applicable Medicare rate for a service, 170 percent of the applicable state Medicaid rate.

- 3.4. If the claimant obtains medical treatment or services under a letter of protection and the health care provider subsequently transfers the right to receive payment under the letter of protection to a third party, evidence of the amount the third party paid or agreed to pay the health care provider in exchange for the right to receive payment pursuant to the letter of protection.
- $\underline{4.5.}$ Any evidence of reasonable amounts billed to the claimant for medically necessary treatment or medically necessary services provided to the claimant.
- (c) Evidence offered to prove the amount of damages for any future medical treatment or services the claimant will receive may shall include any evidence allowed by the court that tends to demonstrate the actual value of medical treatment or services to be rendered, including, but is not limited to, evidence as provided in this paragraph.
- 1. If the claimant has health care coverage other than Medicare or Medicaid, or is eligible for any such health care coverage, evidence of the amount for which the future charges of health care providers could be satisfied if submitted to such health care coverage, plus the claimant's share of medical expenses under the insurance contract or regulation.
 - 2. If the claimant does not have health care coverage or

has health care coverage through Medicare or Medicaid, or is eligible for such health care coverage, evidence of the reasonable and customary rates for such treatment or services rendered by a qualified provider 120 percent of the Medicare reimbursement rate in effect at the time of trial for the medical treatment or services the claimant will receive, or, if there is no applicable Medicare rate for a service, 170 percent of the applicable state Medicaid rate.

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- 3. Any evidence of reasonable future amounts to be billed to the claimant for medically necessary treatment or medically necessary services.
 - Section 2. This act shall take effect July 1, 2025.