1	A bill to be entitled
2	An act relating to asbestos and silica claims;
3	providing a short title; providing purposes;
4	providing definitions; requiring physical
5	impairment as an essential element of a claim;
6	providing criteria for prima facie evidence of
7	physical impairment for claims and certain
8	actions; providing exceptions; providing
9	additional requirements for evidence relating
10	to physical impairment; specifying absence of
11	certain presumptions at trial; providing
12	procedures for claims and certain actions;
13	providing for venue; providing for preliminary
14	proceedings; requiring asbestos and silica
15	claims to include certain information;
16	specifying certain limitation periods for
17	certain claims; specifying distinct causes of
18	action for certain conditions; limiting damages
19	under certain circumstances; prohibiting a
20	general release from liability; prohibiting
21	award of punitive damages; providing for
22	collateral source payments; specifying
23	liability rules applicable to certain persons;
24	providing for construction; providing
25	severability; providing application to certain
26	civil actions; providing an effective date.
27	
28	WHEREAS, asbestos is a mineral that was widely used
29	before the mid 1970's for insulation, fireproofing, and other
30	purposes, and
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1	WHEREAS, millions of American workers and others were
2	exposed to asbestos, especially during and after World War II
3	and before the advent of regulation by the Occupational Safety
4	and Health Administration in the early 1970's, and
5	WHEREAS, long-term exposure to asbestos has been
6	associated with various types of cancer, including
7	mesothelioma and lung cancer, as well as such nonmalignant
8	conditions as asbestosis, pleural plaques, and diffuse pleural
9	thickening, and
10	WHEREAS, the diseases caused by asbestos often have
11	long latency periods, and
12	WHEREAS, although the use of asbestos has dramatically
13	declined since the 1970's and workplace exposures have been
14	regulated since 1971 by the Occupational Safety and Health
15	Administration, past exposures will continue to result in
16	significant claims of death and disability as a result of such
17	exposure, and
18	WHEREAS, exposure to asbestos has created a flood of
19	litigation in state and federal courts that the United States
20	Supreme Court in Ortiz v. Fibreboard Corporation, 119 S. Ct.
21	2295, 2302 (1999), has characterized as an "elephantine mass"
22	of cases that "defies customary judicial administration," and
23	WHEREAS, asbestos personal injury litigation can be
24	unfair and inefficient, imposing a severe burden on litigants
25	and taxpayers alike, and
26	WHEREAS, the inefficiencies and societal costs of
27	asbestos litigation have been well documented in reports such
28	as the RAND Institutes study on Asbestos Litigation Costs and
29	Compensation, the study of Joseph E. Stiglitz on The Impact of
30	Asbestos Liabilities on Workers in Bankrupt Firms, Dr. Joseph
31	Gitlin's report from Johns Hopkins Medical School on

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Comparison of B Readers' Interpretations of Chest Radiographs 1 2 for Asbestos Related Changes, and the Report to the House of Delegates from the American Bar Association Commission on 3 4 Asbestos Litigation, and 5 WHEREAS, the extraordinary volume of nonmalignant asbestos cases continues to strain state courts, and б 7 WHEREAS, the vast majority of asbestos claims are filed 8 by individuals who allege they have been exposed to asbestos 9 and who may have some physical sign of exposure but who suffer no present asbestos-related impairment, and 10 WHEREAS, the cost of compensating exposed individuals 11 who are not sick jeopardizes the ability of defendants to 12 13 compensate people with cancer and other serious 14 asbestos-related diseases, now and in the future, and WHEREAS, the cost of compensating exposed individuals 15 who are not sick threatens the savings, retirement benefits, 16 and jobs of defendants' current and retired employees and 17 18 adversely affects the communities in which these defendants 19 operate, and WHEREAS, the crush of asbestos litigation has been 20 costly to employers, employees, litigants, and the court 21 22 system, and 23 WHEREAS, in 1982, the Johns-Manville Corporation, the 24 nation's largest single supplier of insulation products containing asbestos, declared bankruptcy due to the burden of 25 the asbestos litigation, and 26 WHEREAS, since 1982, more than 70 other companies have 27 28 declared bankruptcy due to the burden of asbestos litigation, 29 and 30 WHEREAS, estimates show that between 60,000 and 128,000 31 American workers already have lost their jobs as a result of

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asbestos-related bankruptcies and that the total number of 1 2 jobs that will be lost due to asbestos-related bankruptcies will eventually reach 432,000, and 3 WHEREAS, each worker who loses his or her job due to an 4 asbestos-related bankruptcy loses between \$25,000 and \$50,000 5 in wages over his or her career and loses 25 percent or more 6 7 of the value of his or her retirement plan, and 8 WHEREAS, asbestos litigation is estimated to have cost 9 over \$54 billion, with well over half of this expense going to attorney's fees and other litigation costs, and 10 WHEREAS, the seriously ill too often find that the 11 value of their recovery is substantially reduced due to 12 13 defendant bankruptcies and the inefficiency of the litigation 14 process, and WHEREAS, silica is a naturally occurring mineral, and 15 WHEREAS, the Earth's crust is over 90 percent silica, 16 17 and crystalline silica dust is the primary component of sand, 18 quartz, and granite, and WHEREAS, silica-related illness, including silicosis, 19 can occur when tiny silica particles are inhaled, and 20 WHEREAS, silicosis was recognized as an occupational 21 22 disease many years ago, and 23 WHEREAS, the American Foundrymen's Society has 24 distributed literature for more than 100 years to its members warning of the dangers of silica exposure, and 25 WHEREAS, the number of new lawsuits alleging 26 silica-related disease being filed each year began to rise 27 28 precipitously in recent years, and 29 WHEREAS, silica claims, like asbestos claims, often arise when an individual is identified as having markings on 30 31 his or her lungs that are possibly consistent with silica

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exposure but the individual has no functional or physical 1 2 impairment from any silica-related disease, and 3 WHEREAS, the Legislature finds that an overpowering public necessity requires it to act to prevent a silica-based 4 litigation crisis, and 5 WHEREAS, concerns about statutes of limitations may б 7 prompt claimants who have been exposed to asbestos or silica 8 but who do not have any current injury to bring premature 9 lawsuits in order to protect against losing their rights to future compensation should they become impaired, and 10 WHEREAS, consolidations, joinders, and similar 11 procedures to which some courts have resorted in order to deal 12 13 with the mass of asbestos and silica cases can undermine the 14 appropriate functioning of the judicial process and further encourage the filing of thousands of cases by exposed 15 individuals who are not sick and who may never become sick, 16 17 and 18 WHEREAS, punitive damage awards unfairly divert the resources of defendants from compensating genuinely impaired 19 claimants and, given the lengthy history of asbestos and 20 silica litigation and the regulatory and other restrictions on 21 the use of asbestos and silica-containing products in the 2.2 23 workplace, the legal justification for such awards, 24 punishment, and deterrence is either inapplicable or inappropriate, and 25 WHEREAS, the Legislature finds that there is an 26 overpowering public necessity to defer the claims of exposed 27 28 individuals who are not sick in order to preserve, now and for 29 the future, defendants' ability to compensate people who develop cancer and other serious asbestos-related and 30 31 silica-related injuries and to safeguard the jobs, benefits,

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and savings of workers in this state and the well-being of the 1 2 economy of this state, NOW, THEREFORE, 3 Be It Enacted by the Legislature of the State of Florida: 4 5 6 Short title.--This act may be cited as the Section 1. 7 "Asbestos and Silica Compensation Fairness Act". 8 Section 2. Purpose.--It is the purpose of this act to: 9 (1) Give priority to true victims of asbestos and silica, claimants who can demonstrate actual physical 10 impairment caused by exposure to asbestos or silica; 11 (2) Fully preserve the rights of claimants who were 12 13 exposed to asbestos or silica to pursue compensation if they 14 become impaired in the future as a result of the exposure; (3) Enhance the ability of the judicial system to 15 supervise and control asbestos and silica litigation; and 16 (4) Conserve the scarce resources of the defendants to 17 18 allow compensation to cancer victims and others who are physically impaired by exposure to asbestos or silica while 19 securing the right to similar compensation for those who may 20 suffer physical impairment in the future. 21 22 Section 3. Definitions. -- As used in this act, the 23 term: 24 (1) "AMA Guides to the Evaluation of Permanent Impairment" means the American Medical Association's Guides to 25 the Evaluation of Permanent Impairment. 26 (2) "Asbestos" includes all minerals defined as 27 28 'asbestos' in 29 C.F.R. section 1910, as amended. 29 (3) "Asbestos claim" means a claim for damages or other civil or equitable relief presented in a civil action, 30 arising out of, based on, or related to the health effects of 31

1	exposure to asbestos, including loss of consortium, wrongful
2	death, and any other derivative claim made by or on behalf of
3	an exposed person or a representative, spouse, parent, child,
4	or other relative of an exposed person. The term does not
5	include claims for benefits under a workers' compensation law
б	or veterans' benefits program, or claims brought by a person
7	as a subrogee by virtue of the payment of benefits under a
8	workers' compensation law.
9	(4) "Asbestosis" means bilateral diffuse interstitial
10	fibrosis of the lungs caused by inhalation of asbestos fibers.
11	(5) "Board-certified in internal medicine" means a
12	physician who is certified by the American Board of Internal
13	Medicine or the American Osteopathic Board of Internal
14	Medicine.
15	(6) "Board-certified in occupational medicine" means a
16	physician who is certified in the subspecialty of occupational
17	medicine by the American Board of Preventive Medicine or the
18	American Osteopathic Board of Preventive Medicine.
19	(7) "Board-certified in oncology" means a physician
20	who is certified in the subspecialty of medical oncology by
21	the American Board of Internal Medicine or the American
22	Osteopathic Board of Internal Medicine.
23	(8) "Board-certified in pathology" means a physician
24	who holds primary certification in anatomic pathology or
25	clinical pathology from the American Board of Pathology or the
26	American Osteopathic Board of Internal Medicine and whose
27	professional practice:
28	(a) Is principally in the field of pathology; and
29	(b) Involves regular evaluation of pathology materials
30	obtained from surgical or postmortem specimens.
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1	(9) "Board-certified in pulmonary medicine" means a
2	physician who is certified in the subspecialty of pulmonary
3	medicine by the American Board of Internal Medicine or the
4	American Osteopathic Board of Internal Medicine.
5	(10) "Bankruptcy proceeding" means a case brought
6	under Title 11, United State Code, or any related proceeding
7	as provided in section 157 of Title 28, United States Code.
8	(11) "Certified B-reader" means an individual
9	gualified as a "final" or "B-reader" under 42 C.F.R. section
10	<u>37.51(b), as amended.</u>
11	(12) "Civil action" means all suits or claims of a
12	civil nature in court, whether cognizable as cases at law or
13	in equity or in admiralty. The term does not include an action
14	relating to a workers' compensation law, or a proceeding for
15	<u>benefits under a veterans' benefits program.</u>
16	(13) "Exposed person" means a person whose exposure to
17	asbestos or to asbestos-containing products is the basis for
18	<u>an asbestos claim.</u>
19	(14) "FEV1" means forced expiratory volume in the
20	first second, which is the maximal volume of air expelled in
21	one second during performance of simple spirometric tests.
22	(15) "FVC" means forced vital capacity, which is the
23	maximal volume of air expired with maximum effort from a
24	position of full inspiration.
25	(16) "ILO Scale" means the system for the
26	classification of chest x-rays set forth in the International
27	Labour Office's Guidelines for the Use of ILO International
28	Classification of Radiographs of Pneumoconioses.
29	(17) "Lung cancer" means a malignant tumor in which
30	the primary site of origin of the cancer is inside of the
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1	lungs, but the term does not include an asbestos claim based
2	upon mesothelioma.
3	(18) "Mesothelioma" means a malignant tumor with a
4	primary site in the pleura or the peritoneum, which has been
5	diagnosed by a board-certified pathologist, using standardized
6	and accepted criteria of microscopic morphology or appropriate
7	staining techniques.
8	(19) "Nonmalignant condition" means any condition that
9	can be caused by asbestos or silica other than a diagnosed
10	cancer.
11	(20) "Nonsmoker" means the exposed person has not
12	smoked cigarettes or used other tobacco products on a
13	consistent and frequent basis within the last 15 years.
14	(21) "Pathological evidence of asbestosis" means a
15	statement by a board-certified pathologist that more than one
16	representative section of lung tissue uninvolved with any
17	other disease process demonstrates a pattern of
18	peribronchiolar or parenchymal scarring in the presence of
19	characteristic asbestos bodies and that there is no other more
20	likely explanation for the presence of the fibrosis.
21	(22) "Predicted lower limit of normal" for any test
22	means the fifth percentile of healthy populations based on
23	age, height, and gender, as referenced in the AMA Guides to
24	the Evaluation of Permanent Impairment.
25	(23) "Qualified physician" means a medical doctor,
26	who:
27	(a) Is currently a board-certified oncologist,
28	pathologist, pulmonary specialist, or specialist in
29	occupational and environmental medicine;
30	(b) Has conducted a physical examination of the
31	exposed person, or if the person is deceased, has reviewed all

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available records relating to the exposed person's medical 1 2 condition; 3 (c) Is actually treating or treated the exposed person, and has or had a doctor-patient relationship with the 4 5 person; and б (d) Is currently licensed to practice and actively 7 practices in this country. 8 (24) "Radiological evidence of asbestosis" means a 9 quality 1 chest x-ray under the ILO System of classification (in a death case where no pathology is available, the 10 necessary radiologic findings may be made with a quality 2 11 film if a quality 1 film is not available) showing small, 12 irregular opacities (s, t, u) graded by a certified B-reader 13 14 as at least 1/1 on the ILO scale. (25) "Radiological evidence of diffuse pleural 15 thickening" means a quality 1 chest x-ray under the ILO System 16 of classification (in a death case where no pathology is 17 18 available, the necessary radiologic findings may be made with a quality 2 film if a quality 1 film is not available) showing 19 bilateral pleural thickening of at least B2 on the ILO scale 20 and blunting of at least one costophrenic angle. 21 22 (26) "Silica" means a respirable crystalline form of silicon dioxide, including, but not limited to, alpha, quartz, 23 24 cristobalite, and trydmite. (27) "Silica claim" means a claim for damages or other 25 26 civil or equitable relief presented in a civil action, arising 27 out of, based on, or related to the health effects of exposure 2.8 to silica, including loss of consortium, wrongful death, and 29 any other derivative claim made by or on behalf of an exposed person or a representative, spouse, parent, child, or other 30 relative of an exposed person. The term does not include 31

claims for benefits under a workers' compensation law or 1 2 veterans' benefits program, or claims brought by a person as a subroqee by virtue of the payment of benefits under a workers' 3 4 compensation law. 5 (28) "Silicosis" means nodular interstitial fibrosis of the lungs caused by inhalation of silica. б 7 (29) "Smoker" means a person who has smoked cigarettes 8 or used other tobacco products on a consistent and frequent 9 basis within the last 15 years. (30) "Substantial occupational exposure" means 10 employment for an extended period of time in industries and 11 occupations in which, for a substantial portion of a normal 12 13 work year for that occupation, the exposed person did any of 14 the following: (a) Handled raw asbestos fibers; 15 (b) Fabricated asbestos-containing products so that 16 17 the person was exposed to raw asbestos fibers in the 18 fabrication process; 19 (c) Altered, repaired, or otherwise worked with an asbestos-containing product in a manner that exposed the 20 person on a regular basis to asbestos fibers; or 21 22 (d) Worked in close proximity to other persons engaged 23 in any of the activities described in paragraphs (a)-(c) in a 24 manner that exposed the person on a regular basis to asbestos 25 fibers. 26 (31) "Veterans benefits program" means a program for benefits in connection with military service administered by 27 28 the Veterans' Administration under Title 38, United States 29 Code. (32) "Workers' compensation law" means a law 30 respecting a program administered by this state or the United 31

1	States to provide benefits, funded by a responsible employer
2	or its insurance carrier, for occupational diseases or
3	injuries or for disability or death caused by occupational
4	diseases or injuries. The term includes the Longshore and
5	Harbor Workers' Compensation Act, 33 U.S.C. sections 901-944,
6	948-950, and the Federal Employees Compensation Act, chapter
7	81 of Title 5, United States Code, but does not include the
8	Act of April 22, 1908, the Federal Employers Liability Act, 45
9	<u>U.S.C. 51 et seq.</u>
10	Section 4. <u>Physical impairment</u>
11	(1) Physical impairment of the exposed person, to
12	which asbestos or silica exposure was a substantial
13	contributing factor, is an essential element of an asbestos or
14	<u>silica claim.</u>
15	(2) A person may not file or maintain a civil action
16	alleging a nonmalignant asbestos claim in the absence of a
17	prima facie showing of physical impairment as a result of a
18	medical condition to which exposure to asbestos was a
19	substantial contributing factor. The prima facie showing must
20	include all of the following requirements:
21	(a) Evidence verifying that a qualified physician, or
22	someone working under the direct supervision and control of a
23	qualified physician, has taken a detailed occupational and
24	exposure history of the exposed person or, if the person is
25	deceased, from a person who is knowledgeable about the
26	exposures that form the basis of the nonmalignant asbestos
27	<u>claim, including:</u>
28	1. Identification of all of the exposed person's
29	principal places of employment and exposures to airborne
30	contaminants; and
31	

1	2. Whether each place of employment involved exposures
2	to airborne contaminants, including but not limited to
3	asbestos fibers or other disease causing dusts, that can cause
4	pulmonary impairment and the nature, duration and level of any
5	such exposure.
б	(b) Evidence verifying that a qualified physician, or
7	someone working under the direct supervision and control of a
8	qualified physician, has taken detailed medical and smoking
9	history, including a thorough review of the exposed person's
10	past and present medical problems and their most probable
11	cause.
12	(c) Evidence sufficient to demonstrate that at least
13	10 years have elapsed between the date of first exposure to
14	asbestos and the date the diagnosis is made.
15	(d) A determination by a qualified physician, on the
16	basis of a medical examination and pulmonary function testing,
17	that the exposed person has a permanent respiratory impairment
18	rating of at least Class 2 as defined by and evaluated
19	pursuant to the AMA Guides to the Evaluation of Permanent
20	Impairment.
21	(e) A diagnosis by a qualified physician of asbestosis
22	or diffuse pleural thickening, based at a minimum on
23	radiological or pathological evidence of asbestosis or
24	radiological evidence of diffuse pleural thickening.
25	(f) A determination by a qualified physician that
26	asbestosis or diffuse pleural thickening, rather than chronic
27	obstructive pulmonary disease, is a substantial contributing
28	factor to the exposed person's physical impairment, based at a
29	minimum on a determination that the exposed person has:
30	1. Total lung capacity, by plethysmography or timed
31	gas dilution, below the predicted lower limit of normal;

1	2. Forced vital capacity below the lower limit of
2	normal and a ratio of FEV1 to FVC that is equal to or greater
3	than the predicted lower limit of normal; or
4	3. A chest x-ray showing small, irregular opacities
5	(s, t, u) graded by a certified B-reader at least 2/1 on the
6	ILO scale.
7	(q) If the exposed person meets the requirements of
8	paragraphs (a), (b), and (c), and if a qualified physician
9	determines that the exposed person has a physical impairment,
10	as demonstrated by meeting the criteria set forth in
11	paragraphs (d) and (f)1. or 2., but the exposed person's chest
12	x-ray does not demonstrate radiological evidence of
13	asbestosis, the exposed person may meet the criteria of
14	paragraph (e) if his or her chest x-ray is graded by a
15	certified B-reader as at least 1/0 and a qualified physician,
16	relying on high-resolution computed tomography, determines to
17	a reasonable degree of medical certainty that the exposed
18	person has asbestosis and forms the conclusion set forth in
19	paragraph (h).
20	(h) A conclusion by a qualified physician that the
21	exposed person's medical findings and impairment were not more
22	probably the result of causes other than the asbestos exposure
23	revealed by the exposed person's employment and medical
24	history. A diagnosis that states that the medical findings and
25	impairment are "consistent with" or "compatible with" exposure
26	to asbestos does not meet the requirements of this subsection.
27	(i) If a plaintiff files a civil action alleging a
28	nonmalignant asbestos claim, and that plaintiff alleges that
29	his or her exposure to asbestos was the result of extended
30	contact with another exposed person who, if the civil action
31	had been filed by the other exposed person, would have met the

requirements of paragraph (a) and the plaintiff alleges that 1 2 he or she had extended contact with the exposed person during the time period in which that exposed person met the 3 requirements of paragraph (a), the plaintiff has satisfied the 4 5 requirements of paragraph (a). The plaintiff in such a civil action must individually satisfy the requirements of б paragraphs (b), (c), (d), (e), (f), (g), and (h). 7 8 (3) A person who is a smoker may not file or maintain 9 a civil action alleging an asbestos claim which is based upon cancer of the lung, larynx, pharynx, or esophagus in the 10 absence of a prima facie showing that includes all of the 11 following requirements: 12 13 (a) A diagnosis by a gualified physician who is 14 board-certified in pathology, pulmonary medicine, or oncology, as appropriate for the type of cancer claimed, of a primary 15 cancer of the lung, larynx, pharynx, or esophagus, and that 16 exposure to asbestos was a substantial contributing factor to 17 18 the condition. 19 (b) Evidence sufficient to demonstrate that at least 10 years have elapsed between the date of first exposure to 20 asbestos and the date of diagnosis of the cancer. 21 22 (c) Radiological or pathological evidence of asbestosis or diffuse pleural thickening or a qualified 23 24 physician's diagnosis of asbestosis based on a chest x-ray graded by a certified B-reader as at least 1/0 on the ILO 25 scale and high-resolution computed tomography supporting the 26 diagnosis of asbestosis to a reasonable degree of medical 27 28 certainty. 29 (d) Evidence of the exposed person's substantial occupational exposure to asbestos. If a plaintiff files a 30 civil action alleging an asbestos-related claim based on 31

1	cancer of the lung, larynx, pharynx, or esophagus, and that
2	plaintiff alleges that his or her exposure to asbestos was the
3	result of extended contact with another exposed person who, if
4	the civil action had been filed by the other exposed person,
5	would have met the substantial occupational exposure
6	requirement of this subsection, and the plaintiff alleges that
7	he or she had extended contact with the exposed person during
8	the time period in which that exposed person met the
9	substantial occupational exposure requirement of this
10	subsection, the plaintiff has satisfied the requirements of
11	this paragraph. The plaintiff in such a civil action must
12	individually satisfy the requirements of this subsection.
13	(e) If the exposed person is deceased, the qualified
14	physician, or someone working under the direct supervision and
15	control of a qualified physician, may obtain the evidence
16	required in paragraph (b) and paragraph (d) from the person
17	most knowledgeable about the alleged exposures that form the
18	basis of the asbestos claim.
19	(f) A conclusion by a qualified physician that the
20	exposed person's medical findings and impairment were not more
21	probably the result of causes other than the asbestos exposure
22	revealed by the exposed person's employment and medical
23	history. A conclusion that the medical findings and impairment
24	are "consistent with" or "compatible with" exposure to
25	asbestos does not meet the requirements of this subsection.
26	(4) In a civil action alleging an asbestos claim by a
27	nonsmoker based on cancer of the lung, larynx, pharynx, or
28	esophaqus, a prima facie showing of an impairment due to
29	asbestos exposure is not required.
30	(5) A person may not file or maintain a civil action
31	alleging an asbestos claim which is based on cancer of the

1	<u>colon, rectum, or stomach in the absence of a prima facie</u>
2	showing that includes all of the following requirements:
3	(a) A diagnosis by a gualified physician who is
4	board-certified in pathology, pulmonary medicine, or oncology,
5	as appropriate for the type of cancer claimed, of cancer of
6	
	the colon, rectum, or stomach, and that exposure to asbestos
7	was a substantial contributing factor to the condition.
8	(b) Evidence sufficient to demonstrate that at least
9	10 years have elapsed between the date of first exposure to
10	asbestos and the date of diagnosis of the cancer.
11	<u>(c)1.a. Radiological or pathological evidence of</u>
12	asbestosis or diffuse pleural thickening or a qualified
13	physician's diagnosis of asbestosis based on a chest x-ray
14	graded by a certified B-reader as at least 1/0 on the ILO
15	scale and high-resolution computed tomography supporting the
16	diagnosis of asbestosis to a reasonable degree of medical
17	<u>certainty; or</u>
18	b. Evidence of the exposed person's substantial
19	occupational exposure to asbestos. If a plaintiff files a
20	civil action alleging an asbestos-related claim based on
21	cancer of the colon, rectum, or stomach, and that plaintiff
22	alleges that his or her exposure to asbestos was the result of
23	extended contact with another exposed person who, if the civil
24	action had been filed by the other exposed person, would have
25	met the substantial occupational exposure requirement of this
26	subsection, and the plaintiff alleges that he or she had
27	extended contact with the exposed person during the time
28	period in which that exposed person met the substantial
29	occupational exposure requirement of this subsection, the
30	plaintiff has satisfied the requirements of this
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1	sub-subparagraph. The plaintiff in such a civil action must
2	individually satisfy the requirements of this subsection.
3	2. In the case of an exposed person who is a smoker,
4	the criteria in sub-subparagraphs 1.a. and b. must be met.
5	3. If the exposed person is deceased, the qualified
6	physician, or someone working under the direct supervision and
7	control of a qualified physician, may obtain the evidence
8	required in sub-subparagraph 1.b. and paragraph (b) from the
9	person most knowledgeable about the alleged exposures that
10	form the basis of the asbestos claim.
11	(d) A conclusion by a qualified physician that the
12	exposed person's medical findings and impairment were not more
13	probably the result of causes other than the asbestos exposure
14	revealed by the exposed person's employment and medical
15	history. A conclusion that the medical findings and impairment
16	are "consistent with" or "compatible with" exposure to
17	asbestos does not meet the requirements of this subsection.
18	(6) In a civil action alleging an asbestos claim based
19	upon mesothelioma a prima facie showing of an impairment due
20	to asbestos exposure is not required.
21	(7) A person may not file or maintain a civil action
22	alleging a silicosis claim in the absence of a prima facie
23	showing of physical impairment as a result of a medical
24	condition to which exposure to silica was a substantial
25	contributing factor. The prima facie showing must include all
26	of the following requirements:
27	(a) Evidence verifying that a qualified physician, or
28	someone working under the direct supervision and control of a
29	qualified physician, has taken a detailed occupational and
30	exposure history of the exposed person or, if the person is
31	deceased, from a person who is knowledgeable about the

1	exposures that form the basis of the nonmalignant silica
2	<u>claim, including:</u>
3	1. All of the exposed person's principal places of
4	employment and exposures to airborne contaminants; and
5	2. Whether each place of employment involved exposures
6	to airborne contaminants, including but not limited to silica
7	particles or other disease causing dusts, that can cause
8	pulmonary impairment and the nature, duration, and level of
9	any such exposure.
10	(b) Evidence verifying that a qualified physician, or
11	someone working under the direct supervision and control of a
12	qualified physician, has taken detailed medical and smoking
13	history, including a thorough review of the exposed person's
14	past and present medical problems and their most probable
15	cause, and verifying a sufficient latency period for the
16	applicable stage of silicosis.
17	(c) A determination by a qualified physician, on the
18	basis of a medical examination and pulmonary function testing,
19	that the exposed person has a permanent respiratory impairment
20	rating of at least Class 2 as defined by and evaluated
21	pursuant to the AMA Guides to the Evaluation of Permanent
22	Impairment.
23	(d) A determination by a qualified physician that the
24	exposed person has:
25	1. A quality 1 chest x-ray under the ILO System of
26	classification and that the x-ray has been read by a certified
27	B-reader as showing, according to the ILO System of
28	<u>classification, bilateral nodular opacities (p, q, or r)</u>
29	occurring primarily in the upper lung fields, graded 1/1 or
30	higher; or
31	

1	2. Pathological demonstration of classic silicotic
2	nodules exceeding one centimeter in diameter as published in
3	<u>112 Archive of Pathology and Laboratory Medicine 7 (July</u>
4	<u>1988).</u>
5	
6	In a death case where no pathology is available, the necessary
7	radiologic findings may be made with a quality 2 film if a
8	<u>quality 1 film is not available.</u>
9	(e) A conclusion by a qualified physician that the
10	exposed person's medical findings and impairment were not more
11	probably the result of causes other than silica exposure
12	revealed by the exposed person's employment and medical
13	history. A conclusion that the medical findings and impairment
14	are "consistent with" or "compatible with" exposure to silica
15	does not meet the requirements of this subsection.
16	(8) A person may not file or maintain a civil action
17	alleging a silica claim other than as provided in subsection
18	(5), in the absence of a prima facie showing that includes all
19	of the following requirements:
20	(a) A report by a qualified physician who is:
21	1. Board-certified in pulmonary medicine, internal
22	medicine, oncology, or pathology stating a diagnosis of the
23	exposed person of silica-related lung cancer and stating that,
24	to a reasonable degree of medical probability, exposure to
25	silica was a substantial contributing factor to the diagnosed
26	lung cancer; or
27	2. Board-certified in pulmonary medicine, internal
28	medicine, or pathology stating a diagnosis of the exposed
29	person of silica-related progressive massive fibrosis or acute
30	silicoproteinosis, or silicosis complicated by documented
31	tuberculosis.

1	(b) Evidence verifying that a qualified physician, or
2	someone working under the direct supervision and control of a
3	qualified physician, has taken a detailed occupational and
4	exposure history of the exposed person or, if the person is
5	deceased, from a person who is knowledgeable about the
6	exposures that form the basis of the nonmalignant silica
7	<u>claim, including:</u>
8	1. All of the exposed person's principal places of
9	employment and exposures to airborne contaminants; and
10	2. Whether each place of employment involved exposures
11	to airborne contaminants, including but not limited to, silica
12	particles or other disease causing dusts, that can cause
13	pulmonary impairment and the nature, duration and level of any
14	such exposure.
15	(c) Evidence verifying that a qualified physician, or
16	someone working under the direct supervision and control of a
17	qualified physician, has taken detailed medical and smoking
18	history, including a thorough review of the exposed person's
19	past and present medical problems and their most probable
20	cause;
21	(d) A determination by a qualified physician that the
22	exposed person has:
23	1. A quality 1 chest x-ray under the ILO System of
24	classification and that the x-ray has been read by a certified
25	B-reader as showing, according to the ILO System of
26	<u>classification, bilateral nodular opacities (p, q, or r)</u>
27	occurring primarily in the upper lung fields, graded 1/1 or
28	higher; or
29	2. Pathological demonstration of classic silicotic
30	nodules exceeding one centimeter in diameter as published in
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1	112 Archive of Pathology and Laboratory Medicine 7 (July
2	<u>1988).</u>
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4	In a death case where no pathology is available, the necessary
5	radiologic findings may be made with a quality 2 film if a
6	<u>quality 1 film is not available.</u>
7	(e) A conclusion by a qualified physician that the
8	exposed person's medical findings and impairment were not more
9	probably the result of causes other than silica exposure
10	revealed by the exposed person's employment and medical
11	history. A conclusion that the medical findings and impairment
12	are "consistent with" or "compatible with" exposure to silica
13	does not meet the requirements of this subsection.
14	(9) Evidence relating to physical impairment under
15	this section, including pulmonary function testing and
16	diffusing studies, must:
17	(a) Comply with the technical recommendations for
18	examinations, testing procedures, quality assurance, quality
19	control, and equipment of the AMA Guides to the Evaluation of
20	<u>Permanent Impairment, as set forth in 2d C.F.R. Part 404,</u>
21	subpart. P. Appl., part A, section 3.00 E. and F., and the
22	interpretive standards, set forth in the official statement of
23	the American Thoracic Society entitled "lung function testing:
24	selection of reference values and interpretive strategies" as
25	published in American Review of Respiratory Disease. 1991:
26	<u>144:1202-1218;</u>
27	(b) Not be obtained through testing or examinations
28	that violate any applicable law, regulation, licensing
29	requirement, or medical code of practice; and
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1	(c) Not be obtained under the condition that the
2	exposed person retain legal services in exchange for the
3	<u>examination, test, or screening.</u>
4	(10) Presentation of prima facie evidence meeting the
5	requirements of subsection (2), (3), (5), or (6) of this
6	section may not:
7	(a) Result in any presumption at trial that the
8	exposed person is impaired by an asbestos-related or
9	silica-related condition;
10	(b) Be conclusive as to the liability of any
11	defendant; and
12	(c) Be admissible at trial.
13	Section 5. <u>Claimant proceedings</u>
14	(1) A civil action alleging an asbestos or silica
15	claim may be brought in the courts of this state if the
16	plaintiff is domiciled in this state or the exposure to
17	asbestos or silica that is a substantial contributing factor
18	to the physical impairment of the plaintiff on which the claim
19	is based occurred in this state.
20	(2) A plaintiff in a civil action alleging an asbestos
21	or silica claim must include with the complaint or other
22	initial pleading a written report and supporting test results
23	constituting prima facie evidence of the exposed person's
24	asbestos-related or silica-related physical impairment meeting
25	the requirements of subsection (2), subsection (3), subsection
26	(5), or subsection (6) of section 4. For any asbestos or
27	silica claim pending on the effective date of this act, the
28	plaintiff must file the report and supporting test results at
29	least 30 days before setting a date for trial. The defendant
30	must be afforded a reasonable opportunity to challenge the
31	adequacy of the proffered prima facie evidence of

1	asbestos-related impairment. The claim of the plaintiff shall
2	be dismissed without prejudice upon a finding of failure to
3	make the required prima facie showing.
4	(3) All asbestos claims and silica claims filed in
5	this state on or after the effective date of this act must
6	include, in addition to the written report described in
7	subsection (3) of section 5 and the information required by
8	subsection (2) of section 7, a sworn information form
9	containing the following information:
10	(a) The claimant's name, address, date of birth,
11	social security number, and marital status;
12	(b) If the claimant alleges exposure to asbestos or
13	silica through the testimony of another person or alleges
14	other than direct or bystander exposure to a product, the
15	name, address, date of birth, social security number, marital
16	status, for each person by which the claimant alleges
17	exposure, hereinafter the "index person," and the claimant's
18	relationship to each such person;
19	(c) The specific location of each alleged exposure;
20	(d) The beginning and ending dates of each alleged
21	exposure as to each asbestos product or silica product for
22	each location at which exposure allegedly took place for the
23	plaintiff and each index person;
24	(e) The occupation and name of the employer of the
25	exposed person at the time of each alleged exposure;
26	(f) The specific condition related to asbestos or
27	silica claimed to exist; and
28	(q) Any supporting documentation of the condition
29	claimed to exist.
30	Section 6. <u>Statute of limitations; two-disease rule</u>
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1	(1) Notwithstanding any other law, with respect to any
2	asbestos or silica claim not barred as of the effective date
3	of this act, the limitations period does not begin to run
4	until the exposed person discovers, or through the exercise of
5	reasonable diligence should have discovered, that he or she is
6	physically impaired by an asbestos-related or silica-related
7	condition.
8	(2) An asbestos or silica claim arising out of a
9	nonmalignant condition shall be a distinct cause of action
10	from an asbestos or silica claim relating to the same exposed
11	person arising out of asbestos-related or silica-related
12	cancer. Damages may not be awarded for fear or risk of cancer
13	<u>in a civil action asserting an asbestos or silica claim.</u>
14	(3) A settlement of a nonmalignant asbestos or silica
15	claim concluded after the effective date of this act may not
16	require, as a condition of settlement, the release of any
17	future claim for asbestos-related or silica-related cancer.
18	Section 7. <u>Scope of liability; damages</u>
19	(1) Punitive damages may not be awarded in any civil
20	<u>action alleging an asbestos or silica claim.</u>
21	(2) At the time a complaint is filed in a civil action
22	alleging an asbestos or silica claim, the plaintiff must file
23	a verified written report with the court which discloses the
24	total amount of any collateral source payments received,
25	including payments that the plaintiff will receive in the
26	future, as a result of settlements or judgments based upon the
27	same claim. For any asbestos or silica claim pending on the
28	effective date of this act, the plaintiff shall file a
29	verified written report within 60 days after the effective
30	date of this act, or at least 30 days before trial. Further,
31	the plaintiff must update the reports on a regular basis

1	during the course of the proceeding until a final judgment is
2	entered in the case. The court shall permit setoff, based on
3	the collateral source payment information provided, in
4	accordance with the laws of this state as of the effective
5	date of this act.
6	Section 8. Liability rules applicable to protect
7	sellers, renters, and lessors
8	<u>(1)(a) In a civil action alleging an asbestos or</u>
9	silica claim, a product seller other than a manufacturer is
10	liable to a plaintiff only if the plaintiff establishes that:
11	1.a. The product that allegedly caused the harm that
12	is the subject of the complaint was sold, rented, or leased by
13	the product seller;
14	b. The product seller failed to exercise reasonable
15	care with respect to the product; and
16	c. The failure to exercise reasonable care was a
17	proximate cause of the harm to the exposed person;
18	2.a. The product seller made an express warranty
19	applicable to the product that allegedly caused the harm that
20	is the subject of the complaint, independent of any express
21	warranty made by the manufacturer as to the same product;
22	b. The product failed to conform to the warranty; and
23	c. The failure of the product to conform to the
24	warranty caused the harm to the exposed person; or
25	3.a. The product seller engaged in intentional
26	wrongdoing, as determined under the law of this state; and
27	b. The intentional wrongdoing caused the harm that is
28	the subject of the complaint.
29	(b) For the purpose of sub-subparagraph 1.b., a
30	product seller may not be considered to have failed to
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1	exercise reasonable care with respect to a product based upon
2	an alleged failure to inspect the product, if:
3	1. The failure occurred because there was no
4	reasonable opportunity to inspect the product; or
5	2. The inspection, in the exercise of reasonable care,
6	would not have revealed the aspect of the product which
7	allegedly caused the exposed person's impairment.
8	(2) In a civil action alleging an asbestos or silica
9	claim, a person engaged in the business of renting or leasing
10	a product is not liable for the tortious act of another solely
11	by reason of ownership of that product.
12	Section 9. <u>Miscellaneous provisions</u>
13	(1) This act does not affect the scope or operation of
14	any workers' compensation law or veterans' benefit program,
15	affect the exclusive remedy or subrogation provisions of the
16	law, or authorize any lawsuit which is barred by law.
17	(2) Nothing in this act is intended to, and nothing in
18	this act shall be interpreted to:
19	(a) Affect the rights of any party in bankruptcy
20	proceedings; or
21	(b) Affect the ability of any person who is able to
22	make a showing that the person satisfies the claim criteria
23	for compensable claims or demands under a trust established
24	under a plan of reorganization under Chapter 11 of the United
25	<u>States Bankruptcy Code, 11 U.S.C. Chapter 11, to make a claim</u>
26	or demand against that trust.
27	(3) It is the intent of the Legislature that this law
28	render the utmost comity and respect to the constitutional
29	prerogatives of the judiciary of this state, and nothing in
30	this act should be construed as any effort to impinge upon
31	those prerogatives. To that end, if the Florida Supreme Court

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1	enters a final judgment concluding or declaring that any
2	provision of this act improperly encroaches on the authority
3	of the court to adopt the rules of practice and procedure in
4	the courts of this state, the Legislature intends that any
5	such provision be construed as a request for a rule change
б	under Section 2, Article V, of the State Constitution and not
7	as a mandatory legislative directive.
8	(4) This act may not be interpreted to prevent any
9	person from bringing or maintaining an asbestos claim based on
10	nonoccupational exposure where such person would be otherwise
11	able to bring or maintain a claim under this act.
12	(5) If any provision of this act or the application
13	thereof to any person or circumstance is held invalid, the
14	invalidity does not affect other provisions or application of
15	the act which can be given effect without the invalid
16	provision or application, and to this end the provisions of
17	this act are declared severable.
18	Section 10. This act shall take effect July 1, 2005.
19	Because the act expressly preserves the right of all injured
20	persons to recover full compensatory damages for their loss,
21	it does not impair vested rights. In addition, because it
22	enhances the ability of the most seriously ill to receive a
23	prompt recovery, it is remedial in nature. Therefore, the act
24	shall apply to any civil action asserting an asbestos claim in
25	which trial has not commenced as of the effective date of this
26	act.
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