1	A bill to be entitled
2	An act relating to civil liability for COVID-19-
3	related claims against certain health care providers;
4	creating s. 768.381, F.S.; providing legislative
5	findings and intent; defining terms; providing
6	requirements for a civil action based on a COVID-19-
7	related medical claim; providing requirements for a
8	civil action based on a COVID-19-related negligence
9	claim; specifying the timeframe within which a civil
10	action may be commenced; providing retroactive
11	application; providing for applicability; providing an
12	exception of the application of this act to certain
13	civil actions; providing for future repeal unless
14	reenacted; providing severability; providing an
15	effective date.
16	
17	Be It Enacted by the Legislature of the State of Florida:
18	
19	Section 1. Section 768.381, Florida Statutes, is created
20	to read:
21	768.381 Liability protections for COVID-19-related claims
22	against certain health care providers.—
23	(1) LEGISLATIVE FINDINGS AND INTENTThe Legislature finds
24	that the COVID-19 outbreak in this state threatens the continued
25	viability of certain health care institutions and other entities
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26 that contribute to the overall well-being of the state. The 27 threat of unknown and potentially unbounded liability to such 28 institutions and entities, in the wake of a pandemic that has 29 already left many of these institutions vulnerable, has created 30 an overpowering public necessity to provide an immediate and 31 remedial legislative solution. Therefore, the Legislature 32 intends for these institutions and entities to enjoy heightened 33 legal protections against liability as a result of the COVID-19 34 pandemic. The Legislature also finds that there are no 35 alternative means to meet this public necessity, especially in 36 light of the sudden, unprecedented nature of the COVID-19 37 pandemic. The Legislature finds the public interest as a whole 38 is best served by providing relief to these institutions and 39 entities so that they may remain viable and continue to 40 contribute to this state. 41 (2) DEFINITIONS.-As used in this section, the term: "COVID-19" means the novel coronavirus. The term 42 (a) 43 includes the disease caused by the novel coronavirus identified 44 as SARS-CoV-2 or any variants and mutations of that coronavirus. 45 (b) "COVID-19-related medical claim" means a civil 46 liability claim brought against a health care provider which is 47 based on a breach of the applicable standard of care or duty of 48 care owed to a patient or a resident related to: 49 1. Diagnosis or treatment of, or failure to diagnose or 50 treat, a person for COVID-19;

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51	2. Provision of a novel or experimental COVID-19
52	treatment;
53	3. Transmission of COVID-19;
54	4. Delay or cancellation of a surgery or a delay or
55	cancellation of a medical procedure, a test, or an appointment
56	based on a health care provider's interpretation or application
57	of government-issued health standards or guidance specifically
58	relating to the COVID-19 emergency; or
59	5. An act or omission with respect to an emergency medical
60	condition as defined in s. 395.002, which act or omission was
61	the result of a lack of resources directly caused by the COVID-
62	19 pandemic.
63	(c) "COVID-19-related negligence claim" means a civil
64	liability claim brought against a health care provider which is
65	based on a defendant's breach of the applicable duty of care
66	which caused a person who is not a patient or a resident to
67	contract COVID-19.
68	(d) "Health care provider" means:
69	1. A provider as defined in s. 408.803.
70	2. A clinical laboratory providing services in the state
71	or services to health care providers in the state, if the
72	clinical laboratory is certified by the Centers for Medicare and
73	Medicaid Services under the federal Clinical Laboratory
74	Improvement Amendments and the federal rules adopted thereunder.
75	3. A federally qualified health center as defined in 42
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76 U.S.C. s. 1396d(1)(2)(B), as that definition exists on the 77 effective date of this act. 78 4. Any site providing health care services which was 79 established for the purpose of responding to the COVID-19 80 pandemic pursuant to any federal or state order, declaration, or 81 waiver. 82 5. A health care practitioner as defined in s. 456.001. 6. A health care professional certified under part IV of 83 84 chapter 468. 85 7. A home health aide as defined in s. 400.462(15). A provider licensed under chapter 394 or chapter 397 86 8. 87 and its clinical and nonclinical staff providing inpatient or 88 outpatient services. 9. A continuing care facility licensed under chapter 651. 89 90 10. A pharmacy permitted under chapter 465. (e) "Resident" means a person residing in and receiving 91 92 care from a nursing facility licensed under chapter 400 or an 93 assisted living facility licensed under chapter 429. COVID-19-RELATED MEDICAL CLAIMS. - The provisions of 94 (3) 95 this subsection apply to a COVID-19-related medical claim. 96 (a) The complaint must be pled with particularity by 97 alleging facts in sufficient detail to support each element of the claim. 98 99 If the complaint is not pled with particularity, the (b) court must dismiss the action. 100

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101 (c) A plaintiff must prove by the greater weight of the 102 evidence that the health care provider was grossly negligent or 103 engaged in intentional misconduct. 104 The affirmative defenses that apply to a COVID-19-(d) 105 related claim against a health care provider include, in 106 addition to any other affirmative defenses recognized by law, 107 the health care provider's: 108 1. Substantial compliance with government-issued health 109 standards specifically relating to COVID-19 or other relevant standards, including standards relating to the preservation or 110 111 prioritization of supplies, materials, or equipment; 112 2. Substantial compliance with government-issued health 113 standards specific to infectious diseases in the absence of 114 standards specifically applicable to COVID-19; 115 3. Substantial compliance with government-issued health 116 standards relating to COVID-19 or other relevant standards was 117 not possible due to the widespread shortages of necessary 118 supplies, materials, equipment, or personnel; 4. Substantial compliance with any applicable government-119 120 issued health standards relating to COVID-19 or other relevant 121 standards if the applicable standards were in conflict; or 122 5. Substantial compliance with government-issued health standards relating to COVID-19 or other relevant standards was 123 124 not possible because there was insufficient time to implement 125 the standards.

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126	(4) COVID-19-RELATED NEGLIGENCE CLAIMS The provisions of
127	this subsection apply to a COVID-19-related negligence claim.
128	(a) The complaint must be pled with particularity.
129	(b) At the same time that the complaint is filed, the
130	plaintiff must submit an affidavit signed by a physician
131	actively licensed in the state which attests to the physician's
132	belief, within a reasonable degree of medical certainty, that
133	the COVID-19-related damages, injury, or death alleged in the
134	complaint occurred as a result of the defendant's acts or
135	omissions.
136	(c) The court must determine, as a matter of law, whether:
137	1. The plaintiff complied with paragraphs (a) and (b). If
138	the plaintiff did not comply with paragraphs (a) and (b), the
139	court must dismiss the action without prejudice.
140	2. The defendant made a good faith effort to substantially
141	comply with any authoritative or controlling government-issued
142	health standards or guidance in effect at the time the cause of
143	action accrued.
144	a. During this stage of the proceeding, admissible
145	evidence is limited to evidence tending to demonstrate whether
146	the defendant made such a good faith effort.
147	b. If the court determines that the defendant made such a
148	good faith effort, the defendant is immune from civil liability.
149	c. If the court determines that the defendant did not make
150	such a good faith effort, the plaintiff may proceed with the

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151 action. However, absent at least gross negligence proven by 152 clear and convincing evidence, the defendant is not liable for 153 any act or omission relating to a COVID-19-related negligence 154 claim. 155 The plaintiff has the burden of proof to demonstrate (d) 156 that the defendant did not make a good faith effort under 157 subparagraph (c)2. 158 (5) COMMENCEMENT OF ACTION.-A plaintiff must commence a 159 civil action for a COVID-19-related medical claim or a COVID-19-160 related negligence claim within 1 year after the cause of action 161 accrued or within 1 year after the effective date of this act if 162 the cause of action accrued before the effective date of this 163 act. 164 (6) INTERACTION WITH OTHER LAWS.-165 This section does not create a new cause of action but (a) 166 instead applies in addition to any other applicable provisions 167 of law, including, but not limited to, chapters 400, 429, 766, 168 and 768. This section controls over any conflicting provision of 169 law, but only to the extent of the conflict. 170 (b) This section does not apply to claims governed by 171 chapter 440. 172 (7) APPLICABILITY AND REPEAL.-The provisions of this act 173 apply retroactively but do not apply in a civil action against a 174 particularly named defendant that is commenced before the 175 effective date of this act. This act is repealed 1 year and 1

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176	day after the date this act becomes a law unless reenacted by
177	the Legislature.
178	Section 2. If any provision of this act or its application
179	to any person or circumstance is held invalid, the invalidity
180	does not affect other provisions or applications of the act
181	which can be given effect without the invalid provision or
182	application, and to this end the provisions of this act are
183	severable.
184	Section 3. This act shall take effect upon becoming a law.

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