## SECOND REGULAR SESSION SENATE COMMITTEE SUBSTITUTE FOR

# **SENATE BILL NO. 589**

### 97TH GENERAL ASSEMBLY

Reported from the Committee on Small Business, Insurance and Industry, February 27, 2014, with recommendation that the Senate Committee Substitute do pass.

#### 4693S.02C

TERRY L. SPIELER, Secretary.

## AN ACT

To repeal sections 1.010, 379.200, 537.065, 537.067, and 538.210, RSMo, and to enact in lieu thereof eight new sections relating to civil actions for damages.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 1.010, 379.200, 537.065, 537.067, and 538.210, RSMo, 2 are repealed and eight new sections enacted in lieu thereof, to be known as 3 sections 1.010, 375.417, 375.418, 375.419, 379.200, 537.065, 537.067, and 538.210, 4 to read as follows:

1.010. 1. The common law of England and all statutes and acts of parliament made prior to the fourth year of the reign of James the First, of a  $\mathbf{2}$ 3 general nature, which are not local to that kingdom and not repugnant to or 4 inconsistent with the Constitution of the United States, the constitution of this 5 state, or the statute laws in force for the time being, are the rule of action and decision in this state, any custom or usage to the contrary notwithstanding, but 6 7 no act of the general assembly or law of this state shall be held to be invalid, or limited in its scope or effect by the courts of this state, for the reason that it is 8 in derogation of, or in conflict with, the common law, or with such statutes or acts 9 of parliament; but all acts of the general assembly, or laws, shall be liberally 10 construed, so as to effectuate the true intent and meaning thereof. 11

2. The general assembly expressly excludes from this section the common law of England as it relates to claims arising out of the rendering of or failure to render health care services by a health care provider, it being the intent of the general assembly to replace those claims with statutory causes of action. 375.417. 1. As used in sections 375.417 and 375.418, the following 2 terms mean:

3 (1) "Duty to defend", the duty arising under a contract of 4 insurance to provide a defense to the insured as required under the 5 insurance contract;

6 (2) "Duty to indemnify", the duty of an insurer to pay settlements 7 or judgments on account of the actual or potential liability of an 8 insured for damages as required under the insurance contract;

9 (3) "Insured", a person or entity who is or may be entitled to a 10 defense or indemnification under a contract of insurance;

(4) "Reservation of rights", a statement by or on behalf of an
insurer of the reasons which may relieve the insurer of its duty to
defend or duty to indemnify.

14 2. A reservation of rights shall:

(1) Be made in writing and be sent to the insured by mail, or
delivered to the insured either in person or by electronic means
pursuant to section 379.011;

18 (2) Be so provided to an insured no later than sixty days after19 the insurer has both:

20 (a) Received notice of the claim or suit against the insured; and

21 (b) Become aware of a basis for asserting its reservation of 22 rights; and

23 (3) State with reasonable specificity the basis for the reservation24 of rights.

3. When an insurer has communicated a reservation of rights, the
fact that the insurer has:

27 (1) Communicated the reservation of rights;

28 (2) Offered to defend subject to a reservation of rights;

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(3) Provided a defense subject to a reservation of rights;

30 (4) Initiated or participated in a declaratory judgment action or
 31 other action in which a judicial determination of coverage under a
 32 contract of insurance is sought or made or;

(5) Declined or refused to withdraw a reservation rights;
shall neither constitute, nor be evidence of, breach of any duty owed to
the insured, whether in tort, contract, or otherwise. In applying this
section, it is the intent of the general assembly to reject and abrogate
the holdings contained in *Butters v. City of Independence*, 513 S.W.2d

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418 (Mo. 1974), Whitehead v. Lakeside Hosp. Ass'n, 844 S.W.2d 475 (Mo.
App. W.O. 1992), State ex rel. Mid-Century Ins. Co. v. McKelvey, 666
S.W.2d 457 (Mo. App. 1984), and Truck Ins. Exch. v. Prairie Framing,
LLC, 162 S.W.3d 64 (Mo. App. W.D. 2005), and other decisions holding or
otherwise suggesting that an insurer may be found to have breached
the duty to defend under the circumstances listed in this subsection.

44 4. Where an insurer offers or provides a defense subject to a 45 reservation of rights, the insured remains bound by any and all 46 provisions in the insurance contract including but not limited to any 47 duty to cooperate.

5. Nothing in this section shall be construed to create any obligation to defend or indemnify which is not expressly set forth in the insurance contract.

51 6. Nothing in this section shall change the obligations an insurer 52 may have with regard to the payment of minimum limits under the 53 Missouri motor vehicle financial responsibility law prescribed in 54 section 303.190.

55 7. This section does not apply to any insurance contract which 56 does not contain an express duty to defend.

57 8. Notwithstanding the provisions set forth in this section, any 58 reservation of rights sent within sixty days of the effective date of this 59 section shall meet the requirements of subdivision (2) of subsection 2 60 of this section.

375.418. If an insurer breaches its duty to defend, in the absence  $\mathbf{2}$ of a final adjudication of bad faith, the insurer shall be liable for any 3 judgment against the insured or any reasonable settlement made by the insured, but only up to the applicable limits of liability of the insurance 4 contract. The insurer shall be liable for reasonable attorney fees and  $\mathbf{5}$ statutory court costs incurred by the insured in conducting the defense 6 of the suit. In applying this section, it is the intent of the general 7 assembly to reject and abrogate any previous case law which holds or 8 otherwise suggests that a breach of the duty to defend, without a final 9 adjudication of bad faith, allows for an award of damages in excess of 10 the applicable limits of liability stated in the insurance contract, 11 12including but not limited to, the holding contained in Columbia Cas. Co. v. HIAR Holding, LLC, 411 S.W. 3d 258 (Mo. 2013). This section shall 13apply to all causes of actions, suits, and claims unless there has been 14

a final judgment entered against the insurer before the effective date
of this section, holding that the insurer breached its duty to defend the
insured.

375.419. When an insurer offers or provides a defense to a lawsuit filed against its insured, the insurer shall have the  $\mathbf{2}$ unconditional right to intervene in any such lawsuit. It is the intent of 3 the general assembly to reject and abrogate any holding or suggestion 4 contained in State ex rel. Mid-Century Ins. Co. v. McKelvey, 666 S.W.2d 5 457 (Mo. App. 1984), State ex rel. Rimco, Inc. v. Dowd, 858 S.W.2d 307 6 (Mo. App. 1993), and all other decisions which hold or suggest 7 otherwise. Nothing in this section shall be construed to require an 8 9 insurer to intervene in any such lawsuit.

379.200. 1. Upon the recovery of a final judgment against any person, firm or corporation by any person, including administrators or executors, for loss 2or damage on account of bodily injury or death, or damage to property if the 3 defendant in such action was insured against said loss or damage at the time 4 5 when the right of action arose, the judgment creditor shall be entitled to have the insurance money, provided for in the contract of insurance between the insurance 6 company, person, firm or association as described in section 379.195, and the 7 defendant, applied to the satisfaction of the judgment, and if the judgment is not 8 satisfied within thirty days after the date when it is rendered, the judgment 9 creditor may proceed in equity against the defendant and the insurance company 10 11 to reach and apply the insurance money to the satisfaction of the judgment. This section shall not apply to any insurance company in liquidation. 12

2. No party shall add or join any other or different cause of
action to a claim brought pursuant to this section, whether in the
petition or by way of any counterclaim, cross-claim, or third-party
claim.

17 3. In any proceeding brought to garnish on an insurance contract
18 under this section or any other rule or provision of law:

19 (1) The judgment creditor shall have the burden of showing that 20 the judgment was the result of a contested adversarial proceeding. If 21 the judgment on which the garnishment was initiated was entered 22 without trial by jury, the judge who entered that judgment shall not 23 make the determination called for by this subdivision. As used in this 24 section, a "contested adversarial proceeding" means a proceeding in 25 which all parties have the opportunity to conduct discovery, present 26 evidence, and cross-examine witnesses and the judgment debtor's27 insurer defended, or expressly declined to defend, its insured;

(2) If it is determined that coverage is provided for the loss, but
the evidence does not show that the judgment resulted from a contested
adversarial proceeding, the insurer shall have the right to trial by jury
on the issue of the damages to be assessed against the judgment debtor
as in the case of default judgments.

4. Nothing in this section shall be construed to create any obligation to defend or indemnify which is not expressly set forth in the insurance contract.

537.065. 1. Any person having an unliquidated claim for damages against a tort-feasor, on account of bodily injuries or death, may enter into a contract  $\mathbf{2}$ with such tort-feasor or any insurer in his behalf or both, whereby, in 3 consideration of the payment of a specified amount, the person asserting the 4 5claim agrees that in the event of a judgment against the tort-feasor, neither he nor any person, firm or corporation claiming by or through him will levy 6 7 execution, by garnishment or as otherwise provided by law, except against the 8 specific assets listed in the contract and except against any insurer which insures the legal liability of the tort-feasor for such damage and which insurer is not 9 excepted from execution, garnishment or other legal procedure by such 10 contract. Execution or garnishment proceedings in aid thereof shall lie only as 11 12to assets of the tort-feasor specifically mentioned in the contract or the insurer or insurers not excluded in such contract. Such contract, when properly 13 14acknowledged by the parties thereto, may be recorded in the office of the recorder of deeds in any county where a judgment may be rendered, or in the county of the 1516 residence of the tort-feasor, or in both such counties, and if the same is so 17recorded then such tort-feasor's property, except as to the assets specifically listed in the contract, shall not be subject to any judgment lien as the result of any 18 19judgment rendered against the tort-feasor, arising out of the transaction for 20which the contract is entered into.

2. No agreement under this section shall condition the protection
 of the assets of the alleged tort-feasor on the performance of any future
 act.

3. No insurer shall be required to enter into an agreement under this section. The fact that an insurer has not entered into an agreement under this section shall not be evidence of the commission

#### 27 of a tort or breach of contract.

537.067. 1. In all tort actions for damages[, if a defendant is found to bear fifty-one percent or more of fault, then such defendant shall be jointly and severally liable for the amount of the judgment rendered against the defendants. If a defendant is found to bear less than fifty-one percent of fault, then the defendant shall only be responsible for the percentage of the judgment for which the defendant is determined to be responsible by the trier of fact; except that, a party is responsible for the fault of another defendant or for payment of the proportionate share of another defendant if any of the following applies:

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- (1) The other defendant was acting as an employee of the party;

10 (2) The party's liability for the fault of another person arises out of a duty
11 created by the federal Employers' Liability Act, 45 U.S.C. Section 51.

122. The defendants shall only be severally liable for the percentage of punitive damages for which fault is attributed to such defendant by the trier of 13 14 fact.] the liability of each defendant for compensatory or punitive damages shall be several only and shall not be joint. Each defendant 1516 shall be liable only for the amount of damages allocated to that defendant in direct proportion to that defendant's percentage of fault. 17A separate several judgment shall be rendered against that defendant 18 for that amount. 19

20 2. To determine the amount of judgment to be entered against 21 each defendant, the court shall multiply the total amount of damages 22 recoverable by the plaintiff with regard to each defendant by the 23 percentage of each defendant's fault. That amount shall be the 24 maximum recoverable against that defendant.

25 3. In assessing percentages of fault the trier of fact shall 26 consider the fault of all persons or entities who contributed to the 27 alleged injury or damages, regardless of whether the person or entity 28 was, or could have been, named as a party to the suit.

4. Negligence or fault of a nonparty may be considered if the plaintiff entered into a settlement agreement with the nonparty or if the defending party gives notice before trial, in accordance with requirements established by court rule, that a nonparty was wholly or partially at fault. Assessments of percentage of fault of nonparties shall be used only in the determination of the percentage of fault of named parties. Where fault is assessed against nonparties under this section,

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36 finding of fact shall not subject any nonparty to liability in any action or be introduced as evidence of liability in any action. 37

38 [3.] 5. In all tort actions, no party may disclose to the trier of fact the 39 impact of this section. In any action for damages, no attorney shall contract for, charge, or collect a contingent fee in excess of the 40 following amounts: 41

42(1) Thirty-three percent of the first fifty thousand dollars of damages; 43

44 (2) Twenty-five percent of the next fifty thousand dollars of damages; 45

(3) Fifteen percent of the next five hundred thousand dollar of 46 47damages; and

48(4) Ten percent of any amount of damages exceeding six hundred 49 thousand dollars.

In no case shall an attorney collect fees, charges, or any other costs 50which in the aggregate total more than thirty-three percent of the total 51damages. 52

538.210. 1. A statutory cause of action for damages against a health care provider for personal injury or death arising out of the  $\mathbf{2}$ 3 rendering of or failure to render health care services is hereby created, replacing any such common law cause of action. The elements of such 4  $\mathbf{5}$ cause of action are that the health care provider failed to use that degree of skill and learning ordinarily used under the same or similar 6 circumstances by similarly situated health care providers and that such 7 failure proximately caused injury or death. 8

9 2. In any action against a health care provider for damages for personal 10 injury or death arising out of the rendering of or the failure to render health care services, no plaintiff shall recover more than three hundred fifty thousand dollars 11 for noneconomic damages irrespective of the number of defendants. 12

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[2.] 3. (1) Such limitation shall also apply to any individual or entity, or their employees or agents that provide, refer, coordinate, consult upon, or arrange 14for the delivery of health care services to the plaintiff; and 15

(2) Who is a defendant in a lawsuit brought against a health care provider 16 17under this chapter, or who is a defendant in any lawsuit that arises out of the rendering of or the failure to render health care services. 18

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(3) No individual or entity whose liability is limited by the provisions of

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20 this chapter shall be liable to any plaintiff based on the actions or omissions of 21 any other entity or person who is not an employee of such individual or entity

22 whose liability is limited by the provisions of this chapter.

23 Such limitation shall apply to all claims for contribution.

[3.] 4. In any action against a health care provider for damages for personal injury or death arising out of the rendering of or the failure to render health care services, where the trier of fact is a jury, such jury shall not be instructed by the court with respect to the limitation on an award of noneconomic damages, nor shall counsel for any party or any person providing testimony during such proceeding in any way inform the jury or potential jurors of such limitation.

[4.] 5. For purposes of sections 538.205 to 538.230, any spouse claiming
damages for loss of consortium of their spouse shall be considered to be the same
plaintiff as their spouse.

[5.] 6. Any provision of law or court rule to the contrary notwithstanding, an award of punitive damages against a health care provider governed by the provisions of sections 538.205 to 538.230 shall be made only upon a showing by a plaintiff that the health care provider demonstrated willful, wanton or malicious misconduct with respect to his actions which are found to have injured or caused or contributed to cause the damages claimed in the petition.

40 [6.] 7. For purposes of sections 538.205 to 538.230, all individuals and 41 entities asserting a claim for a wrongful death under section 537.080 shall be 42 considered to be one plaintiff.