

FIRST REGULAR SESSION

[PERFECTED]

HOUSE BILL NO. 952

103RD GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE OVERCAST.

2249H.01P

JOSEPH ENGLER, Chief Clerk

AN ACT

To repeal section 490.715, RSMo, and to enact in lieu thereof one new section relating to payments for tort liability to insurers.

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

Section A. Section 490.715, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 490.715, to read as follows:

490.715. 1. No evidence of collateral sources, or payments rendered under subsection 2 of this section, shall be admissible other than such evidence provided for in this section.

2. If prior to trial a defendant or his or her insurer or authorized representative, or any combination of them, pays all or any part of a plaintiff's special damages, then any portion of a plaintiff's claims for special damages that are satisfied by a payment from a defendant or the defendant's insurer or authorized representative, or any combination of them, are not recoverable from that defendant.

3. **Whether or not a claim has been assigned or subrogated to an insurer, if prior to the filing of a claim of liability, predicated on possible tort liability, a defendant or his or her insurer or authorized representative, or any combination of them, reimburses to a plaintiff's insurer all or any part of the plaintiff's deductible and damages paid to such plaintiff by such insurer, then any portion of the plaintiff's claim for damages that are satisfied by the reimbursement from the defendant or the defendant's insurer or authorized representative, or any combination of them, are not recoverable from the defendant if the plaintiff would have a potential double recovery from his or her insurer**

EXPLANATION — Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

17 **and the defendant or the defendant's insurer or authorized representative, or any**
18 **combination of them.**

19 **4.** If such payments described in subsection 2 of this section are included in a
20 plaintiff's claim for special damages at trial, the defendant who made the payment, or on
21 whose behalf the payment was made, shall be entitled to deduct and receive a credit for such
22 payments from any judgment as provided for in section 490.710.

23 ~~[4:]~~ **5.** This section does not require the exclusion of evidence admissible for another
24 proper purpose.

25 ~~[5:]~~ **6.** (1) Except as provided in subsection 2 of this section, parties may introduce
26 evidence of the actual cost of the medical care or treatment rendered to a plaintiff or a patient
27 whose care is at issue. Actual cost of the medical care or treatment shall be reasonable,
28 necessary, and a proximate result of the negligence or fault of any party.

29 (2) For purposes of this subsection, the phrase "actual cost of the medical care or
30 treatment" shall be defined as a sum of money not to exceed the dollar amounts paid by or on
31 behalf of a plaintiff or a patient whose care is at issue plus any remaining dollar amount
32 necessary to satisfy the financial obligation for medical care or treatment by a health care
33 provider after adjustment for any contractual discounts, price reduction, or write-off by any
34 person or entity.

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