



The Florida Justice Reform Institute Opposes HB 6017 and Expanding Medical Malpractice Liability

Escalating healthcare costs are a significant challenge in Florida. Exorbitant medical malpractice claim payouts contribute substantially to this problem. Not only do high medical malpractice claim payouts financially burden the state's healthcare system, but they also adversely affect the affordability and accessibility of healthcare for all Floridians, as more physicians retire and fewer physicians come to Florida, particularly in high-risk specialties, given the existing conditions of the state's medical malpractice regime.

Notwithstanding these challenges, HB 6017 would drastically expand survivor eligibility in medical malpractice actions, opening the door to even more medical malpractice litigation and even larger damages awards. More specifically, HB 6017 would repeal subsection (8) of section 768.21, which specifies that certain noneconomic damages recoverable by adult children and parents of an adult child in other actions may not be recovered in medical malpractice actions. Given the existing challenges in Florida, the Legislature should not expand the class of survivors that may recover noneconomic damages awards in medical malpractice actions. For all these reasons, the Florida Justice Reform Institute opposes HB 6017.

Florida's Longstanding Prohibition on Recovery of Noneconomic Damages by Certain Survivors

Under section 768.21, Florida Statutes, survivors in a wrongful death action may recover certain noneconomic damages, including for lost support and services, lost companionship, and mental pain and suffering. Generally, minor children of the "decedent"—i.e., the person who died as a result of another person's negligence or wrongful conduct—and all children (if the decedent had no surviving spouse) may recover for lost parental companionship, instruction, and guidance, and for certain mental pain and suffering. Further, each parent of an adult child decedent may recover for mental pain and suffering if their child has no other survivors. But, the case is different if the decedent was the victim of medical malpractice. Section 768.21(8) states that the damages just described are not recoverable if the survivor is an adult child of the decedent or the parent of an adult decedent where the wrongful death claim is based on medical negligence.

Importantly, any recovery of noneconomic damages by survivors in wrongful death actions is a matter of legislative grace. Before 1990 in Florida, parents had no common law or statutory right to recover noneconomic damages for pain and suffering, grief, or emotional loss associated with the wrongful death of their adult child. Likewise, adult children had no common law or statutory right to recover damages for pain and suffering, grief, or emotional loss for the wrongful death of their parent.

In 1990, the Florida Legislature elected to expand the Wrongful Death Act to allow recovery of noneconomic damages by parents and children as currently outlined in section 768.21.

At the same time, the Legislature chose to impose an exception, prohibiting such damages where the damages arise from a claim of medical negligence. This legislative decision to not apply the expansion to medical malpractice was appropriate, as Florida was and continues to be in a medical malpractice crisis, with Florida possessing the highest medical malpractice insurance premiums in the country for physicians and hospitals. The impact of expanded liability in the medical malpractice context would have disproportionately impacted the healthcare community because a higher percentage of these claims involve a death, as compared to automobile accidents. Hence, the Legislature’s approach was rational.

Florida Is Not an Outlier and Several States Limit Noneconomic Damages in Wrongful Death Actions

Florida has never been an outlier in barring the recovery of noneconomic damages by certain survivors, with several jurisdictions denying the recovery of noneconomic damages like mental pain and suffering in wrongful death actions by *any* survivors. The attached appendices illustrate that recovery by these classes of survivors is not necessarily the norm. *See* Appendix – Comparison of Jurisdictions on Recovery by Adult Children 9.5.2023; Appendix – Comparison of Jurisdictions on Recover by Parents for Pain and Suffering 11.8.23.

It is true that no other state has taken the exact approach that Florida has taken in section 768.21(8), Florida Statutes. But Florida is not alone in barring these types of damages. The laws vary by state quite a bit and can be complicated and nuanced, but generally speaking, there are at least 10 states where ultimately an adult child or parent of an adult child would not be able to recover noneconomic damages like mental distress, often because that state bars any type of mental distress recovery by survivors in wrongful death actions. Some states distinguish mental distress damages from loss of companionship/consortium damages, allowing recovery of typically the latter but not the former. Below are short summaries of the laws in these states:

Alabama – Only punitive damages—i.e., damages focused on the defendant’s culpability—are recoverable in wrongful death actions.

- *Sledge v. IC Corp.*, 47 So. 3d 243, 247 (Ala. 2010) (citing numerous cases as holding that the only recoverable damages in wrongful death actions are punitive damages).
- *Thibodeaux v. Paccar, Inc.*, 592 F. Supp. 2d 1377, 1380 (M.D. Ala. 2009) (the only damages recoverable under Alabama’s wrongful death statute relate to the defendant’s conduct and culpability, and do not relate to the value of the decedent’s life).

Connecticut – Only estate executor/administrator may bring wrongful death claim, and generally only loss of consortium claims are available to minor children.

- Conn. Gen. Stat. § 52-555 (“In any action surviving to or brought by an executor or administrator for injuries resulting in death, whether instantaneous or otherwise, such executor or administrator may recover from the party legally at fault for such injuries just damages together with the cost of reasonably necessary medical, hospital and nursing services, and including funeral expenses . . .”).
- *Isaac v. Mt. Sinai Hosp.*, 3 Conn. App. 598, 490 A.2d 1024 (1985) (wrongful death action only maintainable by executor or administrator; “does not confer on anyone else, including the parents of a decedent, any right to bring such an action individually”).

- *See Campos v. Coleman*, 319 Conn. 36, 45, 123 A.3d 854, 860 (2015) (recognizing loss of parental consortium action for minor child but not adult child, observing: “We also disagree with the court’s conclusion in *Mendillo* that the distinction between minor children and adult children is arbitrary. Although we recognize that many adults continue to receive affection and guidance from their parents well past the age of majority, adults do not have the same legal entitlements with respect to their parents as minor children; and are presumptively fully autonomous and responsible for their own well-being.”).
- *L.L. v. Newell Brands*, --- A.3d ---, 2025 WL 479065, at *1 (Conn. Feb. 11, 2025) (refusing to recognize a parent’s claim for the loss of the consortium of an injured *minor* child).
- “There is clearly no recovery for sentimental or other loss to survivors as a result of the decedent’s death.” 6 Conn. Prac., Trial Practice § 5.10, Wrongful death actions—Generally (2d ed.).

Georgia – Noneconomic damages in wrongful death actions generally measurable from the perspective of the decedent and not the survivors’ perspective.

- O.C.G.A. § 19-7-1(c)(1), (c)(2) (“In every case of the homicide of a child, minor or sui juris, there shall be some party entitled to recover the full value of the life of the child, either as provided in this Code section or as provided in Chapter 4 of Title 51.”).
- O.C.G.A. § 51-4-2 (“The surviving spouse or, if there is no surviving spouse, a child or children, either minor or sui juris, may recover for the homicide of the spouse or parent the full value of the life of the decedent, as shown by the evidence.”).
- *Bibbs v. Toyota Motor Corp.*, 304 Ga. 68, 75, 815 S.E.2d 850, 854, 856 (2018) (“[T]he [wrongful death] statute confers a right of action on the survivors of a decedent, *but only to recover damages for injuries suffered by the decedent—as measured from her perspective—not damages for the separate-but-related loss sustained by the survivors themselves*. . . . [T]he sorts of damages recoverable in wrongful death actions are substantially the same as the kinds of damages that may be recovered in personal injury actions. These damages cover the losses suffered by the injured person and include economic components, such as lost earnings, and non-economic components, such as loss of enjoyment of life.”).

Indiana – Grief damages are not recoverable in wrongful death actions, although damages for the “loss of the adult person’s love and companionship” may be recovered.

- Ind. Code § 34-23-1-1 (“When the death of one is caused by the wrongful act or omission of another, the personal representative of the former may maintain an action therefor against the latter, if the former might have maintained an action had he or she, as the case may be, lived, against the latter for an injury for the same act or omission. . . .” Statute outlines various scenarios for who may recover depending upon decedent’s situation at death.)
- Ind. Code § 34-23-1-2 (damages may not include any damages for a person’s grief although they may include loss of the adult person’s love and companionship).

Kentucky – Parents of minor children decedents and adult children of parent decedents may not recover noneconomic damages in wrongful death actions.

- Ky. Rev. Stat. § 411.135 (“In a wrongful death action in which the decedent was a *minor child*, the surviving parent, or parents, may recover for loss of affection and companionship

that would have been derived from such child during its minority, in addition to all other elements of the damage usually recoverable in a wrongful death action.”); *see also In re Air Crash at Lexington, Ky., Aug. 27, 2006*, 556 F. Supp. 2d 665, 673 (E.D. Ky. 2008) (confirming that this statute does not allow for recovery by adult child).

- *Clements v. Moore*, 55 S.W.3d 838 (Ky. Ct. App. 2000) (court held that the surviving adult children of a parent who died in a motor vehicle accident were not entitled to bring claims for loss of parental consortium, stating it is not the proper function of the judiciary to further develop the common law in the area of loss of consortium claims in the context of wrongful death).

Minnesota – Wrongful death damages generally limited to “pecuniary loss” and do not include survivors’ mental anguish or suffering.

- Minn. Stat. § 573.02 (“The recovery in the action is the amount the jury deems fair and just for all damages suffered by the decedent resulting from the injury prior to the decedent's death and the pecuniary loss resulting from the death, and shall be for the exclusive benefit of the surviving spouse and next of kin, proportionate to the pecuniary loss severally suffered by the death.”).
- *Lundman v. McKown*, 530 N.W.2d 807, 829 (Minn. Ct. App. 1995) (“The next of kin of a decedent in a wrongful death case may not recover for emotional distress or suffering.”).
- *Fussner v. Anders*, 261 Minn. 347, 350-51, 113 N.W.2d 355, 357 (1961) (approving jury instructions that specifically said jury could not include any amount as compensation for father's grief, sorrow, or mental anguish).

Mississippi – Emotional distress damages generally not recoverable in wrongful death actions, although loss of companionship damages are recoverable.

- *Bridges v. Enter. Prods. Co.*, 551 F. Supp. 2d 549, 557 (S.D. Miss. 2008) (“Recovery of emotional distress damages, however, is not permitted under the Mississippi Wrongful Death Statute.”).
- *McGowan v. Estate of Wright*, 524 So. 2d 308, 311 (Miss. 1988) (finding that a plaintiff is permitted to recover “(1) the present net cash value of the life expectancy of the deceased, (2) the loss of the companionship and society of the decedent, (3) the pain and suffering of the decedent between the time of injury and death, and (4) punitive damages” under the Mississippi Wrongful Death Statute).

Missouri – Damages for grief not recoverable, although loss of companionship and value of lost services may be recoverable.

- Mo. Rev. Stat. § 537.090 (“[T]he trier of the facts may give to the party or parties entitled thereto such damages as the trier of the facts may deem fair and just for the death and loss thus occasioned, having regard to the pecuniary losses suffered by reason of the death, funeral expenses, and the reasonable value of the services, consortium, companionship, comfort, instruction, guidance, counsel, training, and support of which those on whose behalf suit may be brought have been deprived by reason of such death and without limiting such damages to those which would be sustained prior to attaining the age of majority by the deceased or by the person suffering any such loss. . . . The mitigating or aggravating circumstances attending the death may be considered by the trier of the facts, but damages for grief and bereavement by reason of the death shall not be recoverable.”).

Nebraska – Only pecuniary losses are recoverable; damages are not recoverable for mental suffering or anguish, bereavement, or solace.

- *Williams v. Monarch Transp., Inc.*, 470 N.W.2d 751 (Neb. 1991) (“In a wrongful death action, damages are not recoverable for mental suffering or anguish, bereavement, or solace.”).

New Hampshire – Parents of adult child decedent/adult child of parent decedent do not appear entitled to recover noneconomic damages in wrongful death actions.

- N.H. Rev. Stat. § 556.12 (generally loss of comfort and companionship damages recoverable by family members are limited to surviving spouse and minor children).
- *Kennett v. Delta Airlines, Inc.*, 560 F.2d 456 (1st Cir. 1977) (acknowledging jury instruction under New Hampshire law that no damages for grief, sorry, or emotional anguish suffered by decedent’s husband or parents should be awarded).

New Jersey – Heir’s wrongful death damages limited to calculable, pecuniary ones.

- N.J.S.A. § 2A:31-5 (“the jury may give such damages as they shall deem fair and just with reference to the pecuniary injuries resulting from such death, together with the hospital, medical and funeral expenses incurred for the deceased, to the persons entitled to any intestate personal property of the decedent in accordance with the provisions”).
- *See Aronberg v. Tolbert*, 25 A.3d 1121 (N.J. 2011) (decedent’s heirs have right to recover for “pecuniary damages for their direct losses” that are “calculable”).
- *See Beim v. Hulfish*, 83 A.3d 31 (N.J. 2014) (“From the Legislature’s use of the term ‘pecuniary injuries,’ two principles can be discerned. First, if the decedent’s survivors prove the defendant’s liability for wrongful death, they may be compensated for the economic contributions of which they have been deprived by virtue of the death. . . . A second principle guiding our courts in assessing pecuniary losses in a wrongful death action under N.J.S.A. 2A:31–5 is that ‘[t]he Act permits recovery only of a survivor’s calculable economic loss.’ The law abhors damages that are based on mere speculation.”).

Thus, although the laws are nuanced, Florida is certainly not an outlier with regard to limiting damages in these circumstances, and many states have even harsher bars on the recovery of noneconomic damages by certain survivors.

Florida Continues to Experience Nuclear Verdicts

Florida’s medical malpractice law as it stands today—which does not allow adult children and parents of adult children decedents to recover noneconomic damages in medical malpractice actions—has already led to a significant number of exorbitant verdicts, often propelled by large noneconomic damages awards. Below is a selection of these verdicts and arbitration awards:

Stewart v. Mohamed Abdel-Aziz, M.D., Case No. 17-CA-000187 (Fla. 13th Cir. Ct. 2018). In this case, a jury awarded parents of an injured patient **\$30 million** for mental anguish resulting from the medical malpractice experienced by their child.

Vargas-Chavez v. Gonzalez-Garcia, Case No. CACE18001011 (Fla. 17th Cir. Ct. 2019). In a medical malpractice action following a mother's death, a jury awarded **\$3.675 million** to the patient's husband, **\$4.9 million each to three** of the patient's children, and **\$6.125 million** to the child who was born shortly before her mother's death, for a total of **\$24.5 million** in noneconomic damages.

Hayes v. Hialeah Medical Center, Case No. 2015-024325-CA-01 (Fla. 11th Cir. Ct. 2019). In this wrongful death action, a jury awarded the decedent's children **\$15 million** in noneconomic damages.

Standley v. Rech, Case No. CACE16019088 (Fla. Cir. Ct. 2019). In this medical malpractice action arising after an amputation, a jury awarded the plaintiff **\$7 million** and the plaintiff's wife **\$1.1 million** in pain and suffering damages.

Zumoza-Garci v. Kendall Regional Medical Center, Case No. 19-000167MA (DOAH Arbitration Award 2019). In this medical malpractice action arising from a maternal stroke, the plaintiff was awarded more than \$13 million in damages, including **\$1.25 million** in noneconomic damages awarded to the patient's family members.

Fernandez v. Baptist Health Medical Group Orthopedics, LLC, Case No. 18-013104 (Fla. 11th Cir. Ct. 2020). A pulmonary embolism following alleged medical malpractice led to an eye-popping **\$30 million noneconomic damages verdict** for the decedent's wife.

Carter v. Board of Trustees of the University of South Florida, Case No. 12-CA-9942 (Fla. 13 Cir. Ct. 2021). A jury awarded a medical malpractice plaintiff **\$5 million** in noneconomic damages, on top of \$16 million in economic damages. This was after an appellate court had reversed and remanded for a new trial as a result of a number of errors made by the trial court following a staggering \$109 million verdict in the plaintiff's favor.

Hamby v. Glauser, Case No. 2021-CA-002579 (Fla. 15th Cir. Ct. 2021). Claims that a doctor was negligent in his treatment of a patient's bout of pancreatitis resulted in an award of more than \$20 million, including **\$9 million** for the patient's widow and **\$11 million** for his son in noneconomic damages.

Crohan v. Furman, Case No. 2019-CA-009248 (Fla. 13th Cir. Ct. 2022). In this medical malpractice action, a jury awarded a staggering **\$50 million** in noneconomic damages, on top of \$18 million in economic damages.

Magloire v. Health First Inc., Case No. 05-2015-CA-049372 (Fla. 18th Cir. Ct. 2022). A jury awarded an injured plaintiff **\$10 million** in noneconomic damages and awarded his wife **\$3.5 million** in noneconomic damages.

Reed v. Life Care Centers of America, Case No. 2018-CA-013297-O (Fla. 9th Cir. Ct. 2022). A jury awarded the medical malpractice plaintiff more than **\$10.6 million** for her pain and suffering.

Hawkins v. Amed Reza Nematbkaksh, D.O., Case No. 2017-000526-CI (Fla. 6th Cir. Ct. 2023). Claims that a physician mistreated the patients' leg and back pain led to a verdict including

\$11.5 million in pain and suffering damages for the plaintiff, as well as **\$3.75 million** in noneconomic damages for the patient’s wife.

Payas v. Plantation General Hospital Limited Partnership, Case No. CACE 2014 005325 (Fla. 16th Cir. Ct. 2023). A medical malpractice claim against a hospital relating to prenatal care resulted in a whopping **\$18 million** noneconomic damages award to the injured child and **\$12.6 million** in noneconomic damages for her plaintiff mother.

Santos v. A Place to Grow, LLC, Case No. 29-2022-CA-000927-A001HC (Fla. 13th Cir. Ct. 2023). In possibly one of the largest verdicts awarded in a case involving a Florida assisted living facility, a jury awarded a plaintiff whose mother died as a result of sepsis **\$12.5 million** in noneconomic damages.

Belanger v. Key West HMA, LLC, Case No. 22-1981MA (DOAH Arbitration Award Feb. 16, 2023). Before ultimately settling, an arbitration panel awarded the plaintiff in a medical malpractice case concerning neonatal care \$750,000 in noneconomic damages, on top of more than \$21 million in economic damages.

Florida Leads the Country in Medical Malpractice Costs, Leading to an Impending Physician Supply-and-Demand Problem

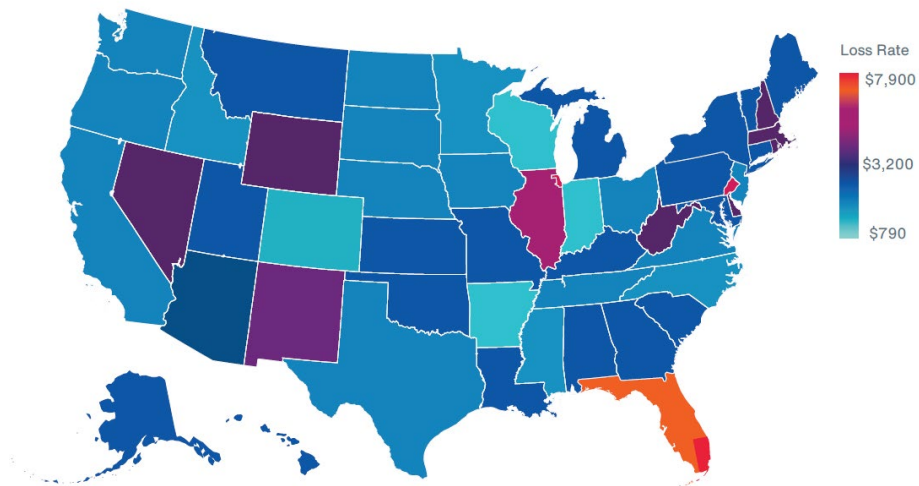
In addition to nuclear verdicts, medical and hospital professional liability claims costs have been increasing, particularly in South Florida. A key finding of a recent benchmark study conducted by Aon and the American Society for Health Care Risk Management (“ASHRM”) determined that, although the frequency of hospital and physician professional liability or medical professional liability claims has remained relatively stable in recent years, the *severity* of claims—including indemnity and defense costs per claim—is steadily increasing.¹ When focused on hospital professional liability claims in particular, Florida stands alone based on projected 2025 loss rates (limited to \$1 million per occurrence),² with South Florida (Broward, Miami-Dade, and Palm Beach counties) likely to produce projected loss rates exceeding \$7,500 per occupied bed equivalent,³ the highest in the nation, with the remainder of Florida not far behind.⁴

¹ Aon/ASHRM Hospital and Physician Professional Liability Benchmark Analysis at 10 (Oct. 2024) [hereinafter AON/ASHRM Study].

² Per the AON/ASHRM Study, “Loss Rate” is defined as the “annual ultimate loss dollars per [occupied bed equivalent] or per Class 1 physician equivalent.” “Occupied Bed Equivalent” is a “standard measure of the overall hospital professional liability risk comprising a weighted contribution from twelve hospital volume metrics.” A “Class 1 Physician Equivalent” is a “standard measure of the physician professional liability risk based on the exposure represented by one full-time Family Practice (no surgery) physician over the course of one year.” Aon/ASHRM Study at 5.

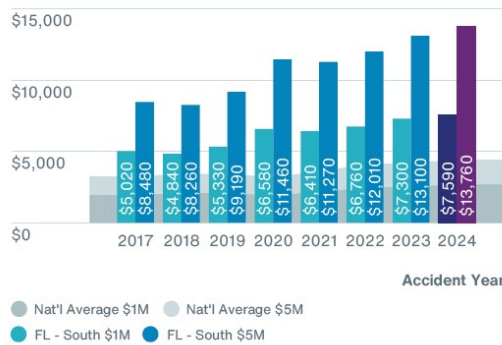
³ Again, “Occupied Bed Equivalent” is a “standard measure of the overall hospital professional liability risk comprising a weighted contribution from twelve hospital volume metrics.” Aon/ASHRM Study at 5.

⁴ Aon/ASHRM Study at 14. This analysis is also further limited to loss rate per occupied bed equivalent of up to \$1 million per occurrence in order to reduce the influence of outlier claims.

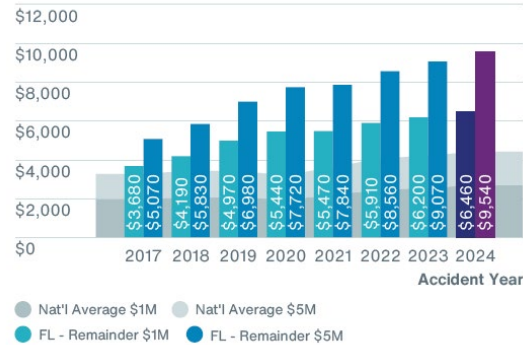


As the next two graphs show, while the national average loss rate per occupied bed equivalent (“OBE”) has remained relatively steady, the same loss rates in Florida have continued to climb each year, with the average loss rate in 2024 doubling or even tripling the national average.⁵

Florida – South Florida Loss Rate per OBE Limited to \$1M and \$5M per Occurrence



Florida – Remainder of State Loss Rate per OBE Limited to \$1M and \$5M per Occurrence



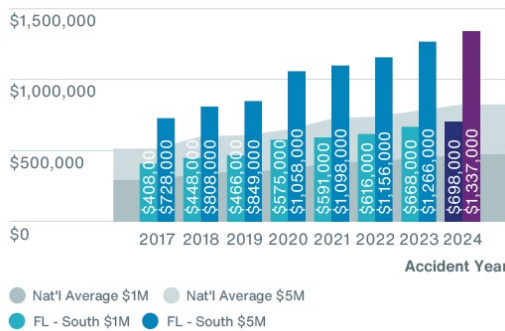
The average severity of such claims in Florida—i.e., the ultimate dollar loss associated with the claim⁶—also outpaces the national average by a wide margin. The severity of indemnity claims made in South Florida is more than \$300,000 higher per occurrence as compared to the national average, and the severity of indemnity claims made in the rest of the state is also higher than the national average, as the next two graphs demonstrate.⁷

⁵ Aon/ASHRM Study at 67-68.

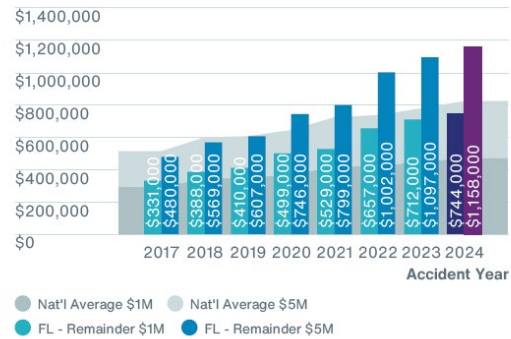
⁶ The Aon/ASHRM Study defines severity to mean “average loss per claim, where loss comprises indemnity and defense costs.” AON/ASHRM Study at 5.

⁷ AON/ASHRM Study at 67-68.

Florida – South Florida Indemnity Claim Severity Limited to \$1M and \$5M per Occurrence

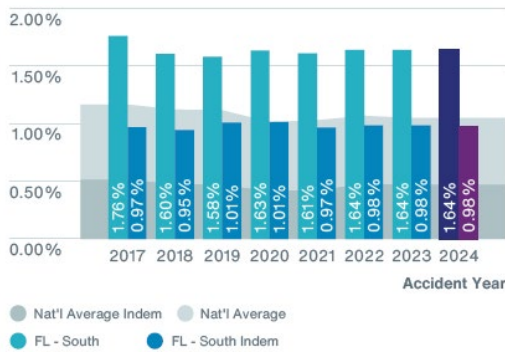


Florida – Remainder of State Indemnity Claim Severity Limited to \$1M and \$5M per Occurrence

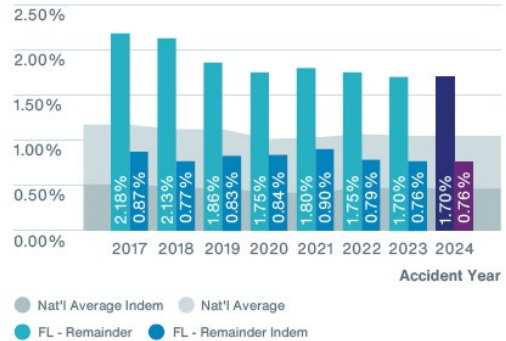


The frequency of total claims per OBE in Florida—both in South Florida and in the remainder of the state—remains much higher than the national average, although indemnity claims are within the average:

Florida – South Florida Claim Frequency per OBE



Florida – Remainder of State Claim Frequency per OBE



This hospital professional liability data is particularly important to consider as hospitals are often the target for medical malpractice claims. Most physicians have relatively low insurance limits; hospitals, however, have higher coverages—often in the tens of millions of dollars—with additional assets. As a result, medical malpractice lawsuits are often filed not just against the physician or other healthcare provider that directly rendered the allegedly negligent care, but the hospital at which the care was provided, as the hospital is perceived to be—and often is—the deeper pocket.

At the same time overall claims costs are increasing, so too are medical malpractice insurance premiums. The Medical Liability Monitor publishes an annual rate survey issue, which

reflects survey responses by the major writers of professional liability insurance for physicians. According to the Medical Liability Monitor’s October 2024 survey, Florida has experienced a notable 4.7% increase in premiums, surpassing the regional average increase of 2.1%.⁸ This surge in premiums, coupled with the rising costs of claims, presents a significant challenge.

The Medical Liability Monitor also catalogues examples of manual rates from the major insurers for specific mature, claims-made specialties with limits of \$1 million per claim with a \$3 million aggregate, by far the most common limits, across three specialties, general surgery, obstetrics/gynecology, and internal medicine. As one example, the Doctors Company’s⁹ manual rates are astronomically higher in Florida than they are in other states—particularly when compared against municipalities in states that are larger than Florida, like California and Texas.¹⁰

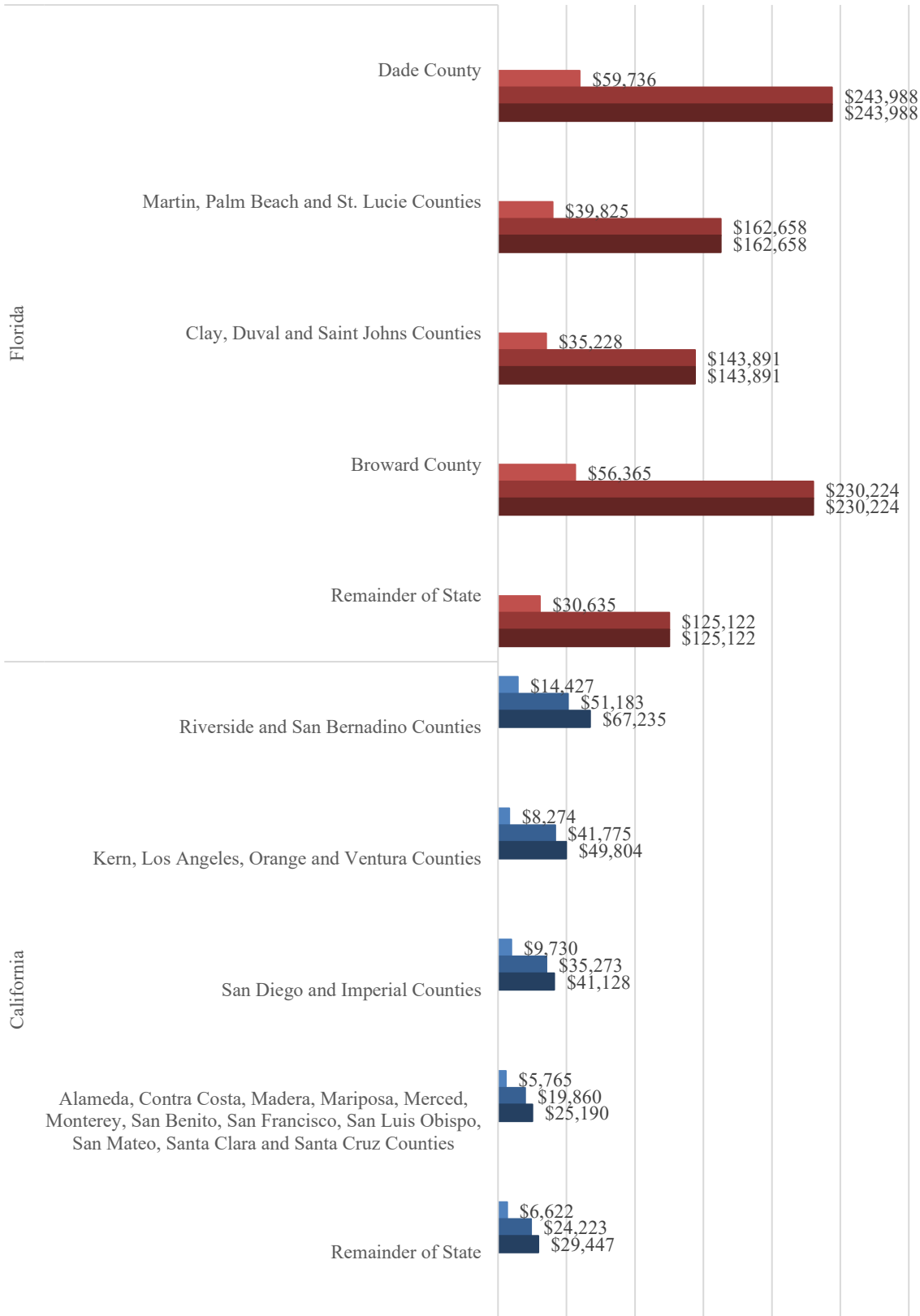
⁸ Medical Liability Monitor, Vol. 49, No. 10, at 3 (Oct. 2024).

⁹ The Doctors Company is the “nation’s largest physician-owned medical malpractice insurer.” See The Doctors Company, <https://www.thedoctors.com/about-the-doctors-company/>.

¹⁰ The charts that follow are sourced from information provided in the Medical Liability Monitor, Vol. 49, No. 10 at 1-2, 6-48 (Oct. 2024).

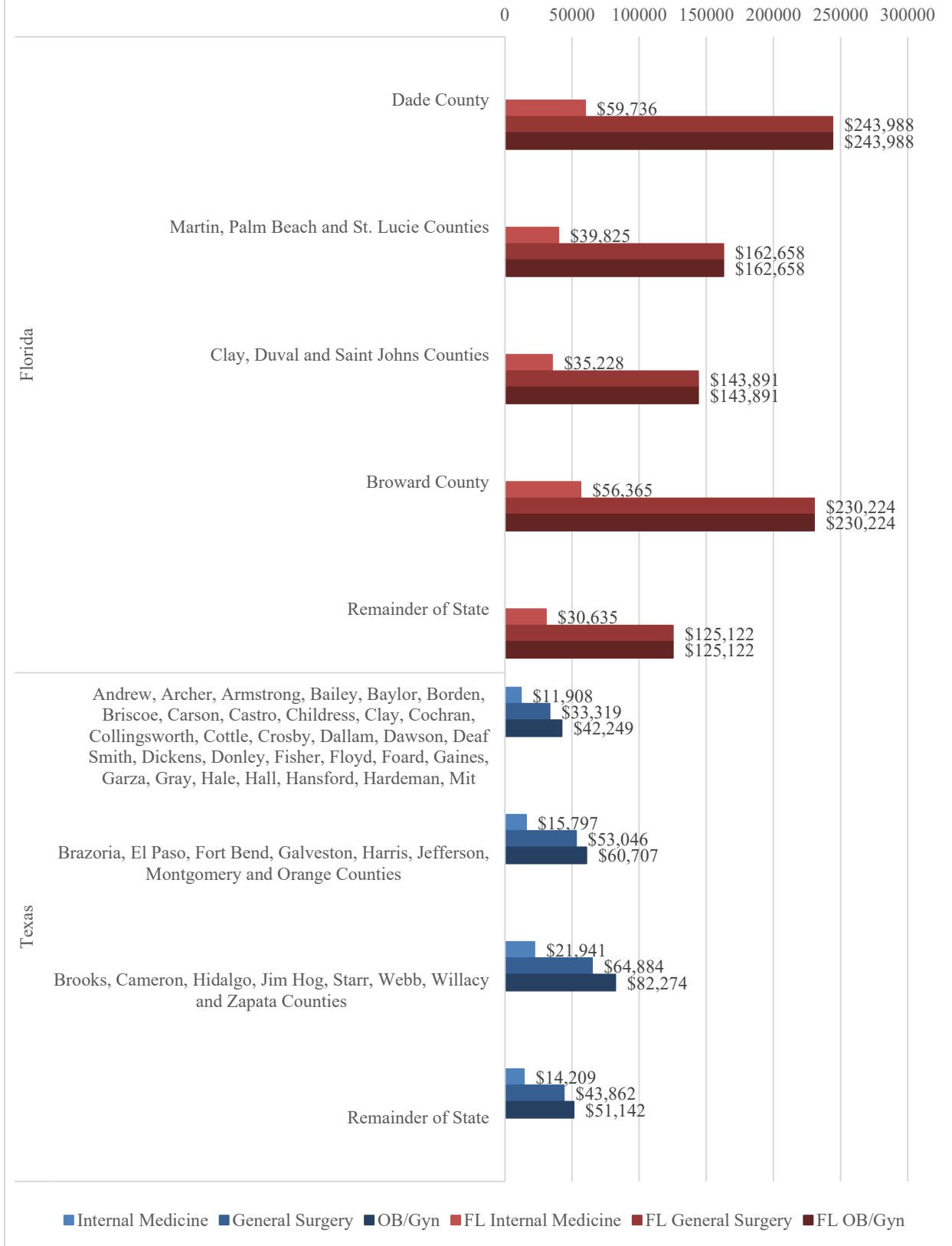
Florida vs. California

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■ Internal Medicine ■ General Surgery ■ OB/Gyn ■ FL Internal Medicine ■ FL General Surgery ■ FL OB/Gyn

Florida vs. Texas



Increased claims costs and increased premiums have very real and significant implications for physicians' decisions with regard to their ongoing practice of medicine in Florida, particularly for physicians in high-risk specialties like obstetrics and gynecology who face greater liability.

As the Florida Department of Health reported in 2023, *over 21 percent* (512) of the 2,340 OB/GYNs in Florida who responded to specialty survey questions plan to *discontinue* providing obstetric care within two years, with “[t]he most frequently selected reasons pertain[ing] to retirement, liability exposure, [and] high medical malpractice litigation,” among others.¹¹

Even in 2023, only about 59.95% percent (1,494) of the state's 2,492 OB/GYNs surveyed were still performing deliveries.¹² If the 512 OB/GYNs followed through with their plans to leave the market as expressed in the survey, that may mean there are now less than 1,000 OB/GYNs in the state delivering babies going forward, assuming there are no new entrants.

While the supply of practicing OB/GYNs decreases, demand will only increase, with one report finding that Florida needs *500 more* obstetricians by 2035 to keep up with the growing population¹³—a staggering statistic that does not account for the fact that approximately *512* obstetricians already indicated their intent in 2023 to leave their practice within two years. But OB/GYNs are only one example. As an IHS Markit report forecasted, “[s]igns indicate that a significant shortage [of physicians] is looming,” despite efforts to increase programs designed to incentivize the creation of new residency slots.¹⁴

Now Is Not the Time to Set the Stage for More Medical Malpractice Lawsuits

Florida remains in the midst of a medical malpractice crisis, with little relief on the horizon. Given the hurdles the state already faces, now is not the time to vastly expand the class of survivors that may recover in medical malpractice actions, as HB 6017 proposes to do. For all these reasons, the Institute opposes HB 6017.

¹¹ Florida Department of Health, *2023 Florida Physician Workforce Annual Report* at 43-44 (Nov. 1, 2023), <https://www.floridahealth.gov/provider-and-partner-resources/community-health-workers/HealthResourcesandAccess/physician-workforce-development-and-recruitment/2023DOHPhysicianWorkforceAnnualReport-FINAL1.pdf>. A total of 2,556 physicians reported their primary specialty as obstetrics and gynecology, so 97.5% of the OB/GYNs to respond to the survey responded on these particular questions. *Id.* at 42.

¹² *Id.* at 42.

¹³ IHS Markit, *Florida Statewide and Regional Physician Workforce Analysis: 2019 to 2035* at 10 (Dec. 2021), <https://fha.org/common/Uploaded%20files/FHA/Florida-Physician-Workforce-Analysis.pdf>.

¹⁴ *Id.* at 1.