

State Laws Chart I: Liability Reforms

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
Alabama	<p>None on pain and suffering.</p> <p>Punitive damages capped at 3x compensatory damages or \$500k (1.5mil if a physical injury) whichever is greater.</p> <p>Ala. Code 6-11-21.</p> <p>(\$400k) P+S Cap was found unconstitutional in <i>Moore v. Mobile Infirmary Assn's</i>, 592 So.2d 156 (Ala. 1991).</p>	<p>No. Each defendant is jointly and severally liable.</p> <p><i>Matkin v. Smith</i>, 643 So. 2d 949, 951 (Ala.1994).</p>	<p>Yes. The defendant may introduce evidence of collateral source payments (CSP).</p> <p>The plaintiff may introduce evidence of the cost of obtaining CSP.</p> <p>Subrogation/reimbursement obligation.</p> <p>The plaintiff can introduce evidence that he/she is obligated to repay CSP.</p> <p>Alabama Code § 6-5-545.</p>		<p>Yes for awards of future damages in excess of \$150,000. Alabama Code § 6-11-3(3)(c)(1).</p>
Alaska	<p>\$250,000 cap on non-economic damages; \$400,000 cap on non-economic damages for wrongful death or severe permanent physical impairment that is more than 70% disabling.</p> <p>Alaska Statutes section 09.55.549.</p>	<p>Yes. Defendants are responsible only for their proportionate share of negligence.</p> <p>Alaska Statutes § 09.17.080(d).</p>	<p>No. The statute was ruled unconstitutional for violating the Alaska constitution's Equal Protection Clause.</p> <p><i>Knolmayer v. McCollum</i>, 520 P.3d 634 (Alaska 2022).</p>		<p>Yes. Court may enter periodic payment award for future damages at plaintiff's request.</p> <p>Alaska Statutes § 09.17.040(d).</p>

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Arizona	None - Constitution prohibits limiting recoverable damages.	Yes. Defendants are responsible only for their proportionate share of negligence, except where co-defendants act in concert or a person is an agent or servant of a party, or violations of duties created under the Federal Employer's Liability Act. Arizona Statutes § 12-2506 (2001).	<p>Yes. The defendant may introduce evidence of CSP under the Social Security Act, workers' compensation, any disability, health, sickness, life, income-disability or accident insurance.</p> <p>The plaintiff may introduce evidence of any amount which the plaintiff had to pay to secure the CSP, or that the CS has a statutory right of recovery against the plaintiff or can subrogate.</p> <p>Subrogation/reimbursement prohibited. Unless otherwise expressly permitted to do so by statute, no CS cannot require reimbursement or subrogate.</p> <p>AZ Rev Stat § 12-565. <i>See Lopez v. Safeway Stores, Inc.</i>, 129 P.3d 487 (Ariz. 2006).</p>	No. But at the request of any party the court shall review the reasonableness of each party's attorney's fees. Arizona Statutes § 12-568.	Found unconstitutional <i>Smith v. Myers</i> , 887 P.2d 541 (Ariz. 1994).
Arkansas	<p>None.</p> <p>(a) Except as provided in subsection (b) of this section, a punitive damages award for each plaintiff shall not be more than the greater of the following:</p> <p>(1) Two hundred fifty thousand dollars (\$250,000); or</p> <p>(2) Three (3) times the amount of compensatory damages awarded in the action, not to</p>	Pure several liability, tortfeasor only liable for their proportion of the negligence. Arkansas Code § 16-55-201 (2003).	Yes. Recovery of damages for past necessary medical care, past necessary medical treatment, or past necessary medical services received includes only those costs actually paid by or on behalf of the plaintiff or that remain unpaid and for which the plaintiff or any third party is legally responsible. HB 1204 (2025).		<p>Yes. Mandatory, upon motion by either party, for future damages in excess of \$100,000.</p> <p>Arkansas Code § 16-114-208.</p>

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	<p>exceed one million dollars (\$1,000,000). (b) Subsection (a) of this section shall not apply when the finder of fact:</p> <p>(1) Determines by clear and convincing evidence that, at the time of the injury, the defendant intentionally pursued a course of conduct for the purpose of causing injury or damage; and</p> <p>(2) Determines that the defendant's conduct did, in fact, harm the plaintiff.</p> <p>(c) As to the punitive damages limitations established in subsection (a) of this section, the fixed sums of two hundred fifty thousand dollars (\$250,000) set forth in subdivision (a)(1) of this section and one million dollars (\$1,000,000) set forth in subdivision (a)(2) of this section shall be adjusted as of January 1, 2006, and at three-year intervals thereafter, in accordance with the Consumer Price Index</p>				

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	rate for the previous year as determined by the Administrative Office of the Courts. Arkansas Code § 16-55-208.				
California	In 2022, California enacted AB 35. Noneconomic damages in cases <u>not involving a patient death</u> are capped at \$350k starting January 1, 2023, with an incremental increase over the next 10 years to \$750k and a 2.0% annual inflationary adjustment after that. As of Jan. 1, 2025, the cap is \$430k. Cases <u>involving a patient death</u> will have a limit of \$500k on the effective date of January 1, 2023, with an incremental increase over the next 10 years to \$1 million and a 2.0% annual inflationary adjustment thereafter. As of Jan. 1, 2025, this cap is \$600k. Cal. Civ. Code 333.2.	Yes. Defendants are proportionately liable for non-economic damages. However, they are jointly and severally liable for economic damages. California Civil Code § 1431.2(a) (2015).	Yes. The defendant may introduce evidence of CSP under the United States Social Security Act, worker's compensation, and any health, income, or accident insurance. The plaintiff may introduce evidence of any amount which the plaintiff has paid to secure his/her right to CSP. Subrogation/reimbursement obligation prohibited. No CS may recover any amount against the plaintiff nor subrogate. California Civil Code § 3333.1.	Yes. (1) 25% contingency fee limit for claims resolved PRIOR to civil complaint being filed or arbitration demand being made; (2) 33% contingency fee limit for claims resolved AFTER civil complaint is filed or arbitration demand is made. California Business and Commerce Code § 6146.	Yes. Per AB 35 (2022) at the request of either party, periodic payments can be utilized for future economic damages starting at \$250,000. California Code of Civil Procedure § 667.7.
Colorado	Prior to Jan. 1, 2025, noneconomic damages in medical malpractice actions were limited to	Yes. Defendants are responsible only for their proportionate share of negligence unless persons	Yes. The court shall reduce the damages to be awarded any CSP and enter a judgment for that amount.		Yes. Mandatory for awards of future damages greater than \$150,000. Discretionary for damage awards \$150,000 or

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	\$300,000. Starting Jan. 1, 2025, the bill incrementally increases the noneconomic damages limitation to \$875,000 over the course of 5 years. Thereafter, the cap is adjusted biennially for inflation. Colorado Revised Statutes § 13-80-102.5. Beginning January 1, 2025, the cap on medical malpractice wrongful death damages limitation to \$1.575 million over the course of 5 years. Thereafter, the cap is adjusted biennially for inflation.	have consciously conspired and deliberately pursued a common plan or design to commit a tortious act. Colorado Revised Statutes § 13-21-111.5.	Damages shall not be reduced by the amount by which the plaintiff has been or will be wholly or partially indemnified or compensated by a benefit paid as a result of a contract entered into and paid for by or on behalf of such person. Colorado Revised Statutes § 13-21-111.6.		less. Colorado Revised Statutes § 13-64-203.
Connecticut	None.	Yes. Defendants are responsible only for their proportionate share of negligence. However, if within one year after the final judgment the court determines that all or part of a defendant's proportionate share is uncollectible, it shall reallocate the uncollectible non-economic damages among other defendants according to their percentages of negligence. The court may not reallocate to any such defendant an	Yes. The court shall reduce the amount of the award by an amount equal to CSP minus what the plaintiff had to pay to be entitled to those payments. Prohibition against subrogation/reimbursement obligation. Connecticut General Statutes § 52-225a(a)-(c).	Yes. Limited to 33 1/3% of the first \$300,000; 25% of the next \$300,000, 20% of the next \$300,000, 15% of the next \$300,000, and 10% of amounts exceeding \$1.2 million. Title 52 Civil Actions Chapter 901 Damages Costs and Fees Connecticut General Statutes § 52-251c.	For damages exceeding \$200,000, the court shall give the parties 60 days to negotiate an agreement on method of payment, either in lump sum, periodic payments, or a combination thereof. If they cannot agree, the judge must order payment in a lump sum. Connecticut General Statutes § 52-225d.

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		amount greater than that defendant's percentage of negligence multiplied by such uncollectible amount. Connecticut General Statutes § 52-572h(c).			
Delaware	None.	No. Each defendant is jointly and severally liable. 10 Delaware Code § 6301; <i>Blackshear v. Clark</i> , 391 A.2d 747 (Del. 1978).	Yes. The defendant can introduce evidence of any public CSP to the plaintiff. However, this does not apply to life insurance or private collateral sources of compensation. 18 section 6862 Delaware Revised Statutes. <i>See Mitchell v. Hunter</i> , 883 A.2d 32 (Del. 2005); <i>Onusko v. Kerr</i> , 880 A.2d 1022 (Del. 2005).	Yes. Fees are limited to 35% of the first \$100,000, 25% of the next \$100,000, and 10% of any remaining award. 18 Delaware Code § 6865.	Yes. Courts may order periodic payment. 18 Delaware Code § 6864.
District of Columbia	None.	No. Each defendant is jointly and severally liable. National Health Laboratories, Inc. v. Ahmadi, 596 A.2d 555 (D.C. 1991).	No. Collateral Source Rule applies. <i>See Hardi v. Mezzanotte</i> , 818 A.2d 974 (D.C. 2003).		Yes, but not mandated.
Florida	None. \$500,000 damage cap overturned, <i>North Broward Hosp. Dist. v. Kalitan</i> , 219 So.3d 49 (Fla. 2017).	Yes. Defendants are responsible only for their proportionate share of negligence. Florida Statutes § 768.81(2) (2015).	Yes. The court shall reduce the amount of the award by the total of all amounts of CSP which have been paid. “Collateral sources” means any payments made under the United States Social Security Act, income disability; public programs; health insurance; accident insurance; etc. However, Medicare, Medicaid, and life insurance benefits are not CS.	Patients receive 70% of the first \$250,000 awarded and 90% of the remainder of the award. Attorneys will still get payment for court and witness expenses. Patients may waive contingency fee limits. Fla. Const. Art. 1, § 26 (2021).	Yes. For future economic awards exceeding \$250,000, the court must order periodic payments at the request of any party unless the court determines that manifest injustice would result to any party. Florida Statutes § 768.78(1)(a).

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			<p>There shall be no reduction for CSP for which a subrogation or reimbursement right exists.</p> <p>Florida Statutes § 768.76(1).</p>		
Georgia	None for either wrongful death or non-wrongful death medical liability cases. Courts have thus far ruled that specific caps enacted by the legislature were unconstitutional.	Yes. Defendants are responsible only for their proportionate share of negligence. If the plaintiff is to some degree responsible for the injury or damages claimed, the judge must first decrease the damages based on the plaintiff's degree of fault. Georgia Code § 51-12-33 (2022).	<p>Yes. If the plaintiff has any form of public or private health insurance, including benefits under a governmental workers' compensation program, evidence relevant to the determination of the reasonable value of medically necessary shall include both the amounts charged for past, present, or future medical and healthcare expenses and the amounts actually necessary to satisfy such charges pursuant to the insurance contract or the applicable governmental workers' compensation program, regardless of whether the health insurance has been used, is used, or will be used to satisfy such charges.</p> <p>O.C.G.A. § 51-12-1.1. SB 68 (2025).</p>		Upon the request of either party, the court must establish a schedule of payments for future damages exceeding \$350,000. Georgia Code § 51-13-1(f).
Hawaii	\$375,000 cap on non-economic damages, with exceptions for certain types of damage, i.e., mental anguish. Hawaii Statutes § 663-8.7.	Yes. Defendants are responsible only for their proportionate share of negligence, with the following exceptions: recovery of economic damages in actions involving injury or death, and non-economic damages in such actions, where a tortfeasor's negligence is 25% or more; intentional torts; strict liability torts;	No. Follows the traditional collateral source rule. Provides for the recovery of "reasonable value" of medical expenses. See <i>Bynum v. Magno</i> , 101 P.3d 1149 (2004).	In all tort actions, fees shall be limited to a reasonable amount as approved by the court. Hawaii Statutes § 607-15.5.	

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		and product liability torts. HRS § 663-10.9.			
Idaho	\$250,000 cap on non-economic damages per claimant in all personal injury and wrongful death actions, effective in 2004. Cap has been adjusted annually starting on July 1, 2004, based on the average state wage increase. Cap does not apply to willful or reckless conduct or felonious acts. In 2024, the cap is \$490,512. Idaho Code § 6-1603.	Yes. Defendants are responsible only for their proportionate share of negligence, except where co-defendants were acting in concert, or a person is an agent or servant of a party. Idaho Code § 6-803; Jones v. HealthSouth Treasure Valley Hosp., 206 P.3d 473 (Idaho 2009).	Yes. Plaintiff may receive damages only for damages which exceed amounts received from private, group or governmental CS. The award shall be reduced by the court to the extent the award includes compensation for damages which have been compensated independently by CSP. CSP do not include payments paid under federal programs which by law must seek subrogation, life insurance payments, and payments which are recoverable under subrogation rights created under Idaho law or by contract. Idaho Code § 6-1606.	In actions for personal injury, where the amount of plaintiff's claim for damages does not exceed thirty-five thousand dollars (\$35,000), there shall be taxed and allowed to the claimant, as part of the costs of the action, a reasonable amount to be fixed by the court as attorney's fees. For the plaintiff to be awarded attorney's fees for the prosecution of the action, written demand for payment of the claim and a statement of claim must have been served on the defendant's insurer, if known, or if there is no known insurer, then on the defendant, not less than sixty (60) days before the attorney's shall be allowed to the plaintiff if the court finds that the defendant tendered to the plaintiff, prior to the commencement of the action, amount at least equal to 90% of the amount awarded to	Yes. Upon the request of either party, at the discretion of the court, and only in PI cases, where damages exceed \$100,000. May not be ordered for intentional torts, gross negligence or an extreme deviation from reasonable standard of conduct. Idaho Code § 6-1602.

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				the plaintiff. Idaho Code § 12-120(4).	
Illinois	<p>No Cap. \$500,000 cap on non-economic damages for awards against physicians. \$1 million cap on non-economic damages for awards against hospital. (2005).</p> <p>Ruled unconstitutional – <i>LeBron v. Gottlieb Memorial Hospital</i>, 930 N.E.2D 895 (Ill. 2010).</p>	<p>Several liability only when a defendant is 25 percent or more at fault. Exception: environmental polluters and negligent parties in medical malpractice actions are always joint and severally liable.</p> <p>735 Illinois Compiled Statutes § 5/2-1117.</p>	<p>No. Collateral source rule applies.</p> <p><i>Wills v. Foster</i>, 892 N.E.2d 1018 (Ill. 2008).</p>	<p>Yes. Fees are limited to one-third of a plaintiff's award. 735 Illinois Compiled Statutes § 5/2-1114.</p>	<p>Yes. Either party may elect or the court may order partial payment of future medical expenses through an annuity. The court must order the defendant to pay to the plaintiff 20% of the present cash value of future medical expenses and cost of life care. The remaining 80% shall be paid for through an annuity.</p> <p>Ruled unconstitutional – <i>LeBron v. Gottlieb Memorial Hospital</i>, 930 N.E.2D 895 (Ill. 2010).</p>
Indiana	<p>\$1.25 million total cap for any act of malpractice that occurs after 6/30/1999 and before 7/1/2017.</p> <p>\$1.65 million total cap for any act of malpractice that occurs after 6/30/2017 and before 7/1/2019.</p> <p>\$1.8 million total cap for any act of malpractice that occurs after 6/30/2019.</p> <p>Health care providers are not liable for more than:</p> <ul style="list-style-type: none"> • \$250,000 for an act of malpractice that occurs after 	<p>Several liability for all but governmental entities and health care providers.</p> <p>Indiana Code § 34-51-2-8.</p>	<p>Yes. The defendant may introduce evidence of CSP, except for: (1) life insurance payments; (2) insurance benefits that the plaintiff or members of the plaintiff's family have paid for directly; or (3) payments made by the state or the United States.</p> <p>The plaintiff may introduce evidence of the amount of money that the plaintiff is required to repay to collateral sources, including worker's compensation benefits.</p> <p>The plaintiff may introduce evidence of the cost to secure CSP.</p> <p>Indiana Code § 34-44-1-2.</p>	<p>Yes. The plaintiff's attorney's fees may not exceed, for an act of malpractice committed:</p> <p>(1) before July 1, 2017, fifteen percent (15%) of any recovery from the Patient Compensation Fund; and</p> <p>(2) after June 30, 2017, thirty-two percent (32%) of any recovery.</p> <p>Indiana Code § 34-18-18-1.</p>	<p>Yes. Law permits, but does not require. Indiana Code § 34-18-14-4.</p>

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	<p>6/30/1999 and before 7/1/2017;</p> <ul style="list-style-type: none"> • \$400,000 for an act of malpractice that occurs after 6/30/2017 and before 7/1/2019; and • \$500,000 for an act of malpractice that occurs after 6/30/2019. <p>Any amount awarded in excess of the total liability of a health care provider is paid through the Patient Compensation Fund. Indiana Code § 34-18-14-3.</p>				
Iowa	<p>In 2023, Iowa enacted HF 161.</p> <p>Noneconomic damages are limited to \$250,000 regardless of the number of plaintiffs, unless the jury determines that there is a substantial or permanent loss or impairment of a bodily function, substantial disfigurement, loss of pregnancy, or death, which warrants a finding that the cap would deprive the plaintiff of just compensation. In such</p>	<p>Yes. Defendants are responsible only for their proportionate share of negligence where a defendant is found to bear less than 50% of the total fault. If a defendant is 50% or more liable, he is jointly and severally liable for economic damages only. Iowa Code § 668.4.</p>	<p>Yes. 1. Except as otherwise provided in subsection 2, damages awarded shall not include:</p> <p>(a) actual economic losses incurred or to be incurred in the future, including but not limited to: the cost of reasonable and necessary medical care; rehabilitation services, and custodial care, and the loss of services and loss of earned income;</p> <p>(b) to the extent that those losses are replaced or are indemnified by insurance, or by governmental, employment, or service benefit programs or from any other source.</p>	<p>No. But courts determine reasonableness of fee arrangements. Iowa Code § 147.138.</p>	<p>Iowa Code §§ 682.1 through 682.7.</p>

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	cases, the cap cannot be more than \$1,000,000, or \$2,000,000 if the civil action includes a hospital. These caps increase by two and one-tenth percent on January 1, 2028, and each January 1 thereafter. Section 147.136A.		2. This section shall not bar recovery of economic losses replaced or indemnified by any of the following: (a) Benefits received under the medical assistance program under chapter 249A. b. The assets of the claimant or of the members of the claimant's immediate family. Iowa Code § 147.136.		
Kansas	In 2019, the Kansas Supreme Court in <i>Hilburn v. Enerpipe Ltd.</i> , 309 Kan. 1127, 1144, 442 P.3d 509 (2019) ruled that a \$350,000 on noneconomic damages was unconstitutional.	Yes. Defendants are responsible only for their proportionate share of negligence. Kansas Statutes § 60-258a (2010).	No. Held to be unconstitutional. <i>Martinez v. Milburn</i> , 233 P.3d 205 (Kan. 2010).		Not mandated.
Kentucky	None.	When court apportions percentage of fault, defendant is only liable for comparable share of damages. Kentucky Revised Statutes § 411.182.	No. Held to be unconstitutional. <i>Daugherty v. Daugherty</i> , 609 S.W.2d 127 (Ky. 1980); <i>O'Bryan v. Hedgespeth</i> , 892 S.W.2d 571 (Ky. 1995),		Not mandated.
Louisiana	\$500,000 cap on total damages, excluding damages recoverable for future medical care. A health care provider covered by the Patient's Compensation Fund shall not be liable for more than \$100,000. The Patient's	Damages may be several, joint, or solidary. Louisiana Revised Statutes § 1786.	No. Traditional collateral source rule. <i>See Bridges v. Baton Rouge Gen. Med. Ctr.</i> , 20-270 (La.App. 1 Cir. 12/30/20), 317 So.3d 662, writ denied, (La. 4/7/21) 313 So.3d 985.		Yes. For amounts paid by the state from the Patient Compensation Fund. Louisiana Revised Statutes § 40:1231.4.

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	Compensation Fund will cover the excess amount awarded up to the cap. Louisiana Revised Statutes § 40:1231.2				
Maine	In 2023, Maine expanded the previous \$750,000 cap on non-economic damages in wrongful death actions to \$100,000,000. Maine Revised Statutes Title 18-C, § 2-807.	No. Each defendant is jointly and severally liable except in cases where the plaintiff's degree of fault is greater than the defendant's. Paine v. Spottiswoode, 612 A.2d 235 (Me. 1992). 14 M.R.S. § 156.	<p>Yes. (1) The defendant may introduce evidence of CSP. If the court determines that the plaintiff's loss is payable by a CS and the CS does not notify the court within 30 days of its right to subrogate, the court shall reduce damages by CSP. If a lienholder does not meet the 30 days deadline, the right to subrogate is lost.</p> <p>(2) "Collateral source" means a benefit paid by health insurance, income disability insurance, workers' compensation insurance, accident insurance, and other insurance, except life insurance benefits.</p> <p>(3) The court shall also reduce the judgment by the amount of Medicare, Medicaid or Social Security disability, provided that the court requires the defendant to indemnify the plaintiff for any subrogation claim.</p> <p>(4) The court may reduce the reduction in (3) by: (a) the claimant's payments over the 2-year period immediately predating injury to the CS; (2) costs incurred by the plaintiff including discovery, witness fees, exhibit expenses and attorney's fees. The reduction may not exceed the amount of the judgment for economic</p>	<p>Yes. Fees are limited to 33 1/3% of the first \$100,000; 25% of the next \$100,000; and 20% of amounts over \$200,000. Maine Revised Statutes Title 24, § 2961.</p>	<p>Yes. If damages exceed \$250,000, either party may request periodic payment. Maine Revised Statutes Title 24, § 2951.</p>

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			<p>loss or that portion of the verdict that represents CSP.</p> <p>Maine Statutes, Title 24, § 2906.</p>		
Maryland	<p>The limit on non-economic damages is frozen at \$650,000 until January 1, 2009, after which time the cap will increase annually by \$15,000 per year. For 2025, the cap is \$905k.</p> <p>This cap applies in aggregate to all claims and defendants arising from the same medical injury beneficiary.</p> <p>This cap applies in wrongful death actions if the claim involves only one claimant.</p> <p>If the wrongful death action involves two or more claimants or beneficiaries, the total cap on non-economic damages is 125% of the current year's cap. Maryland Courts & Judicial Proceedings Code § 3-2A-09.</p>	<p>No. Each defendant is jointly and severally liable except when a plaintiff contributes to their own injuries. Maryland Code § 3-1401.</p>	<p>Yes. A verdict for past medical expenses shall be limited to: (i) the total amount of past medical expenses paid by or on behalf of the plaintiff; and (ii) the total amount of past medical expenses incurred but not paid by or on behalf of the plaintiff for which the plaintiff or another person on behalf of the plaintiff is obligated to pay.</p> <p>Md. Courts and Judicial Proceedings Code Ann. § 3-2A-09. <i>Lockshin v. Semsker</i>, 412 Md. 257 (2010).</p>	<p>a) Action maintained in bad faith. If the arbitration panel finds that the conduct of any party in maintaining or defending any action is in bad faith or without substantial justification, the panel may require the offending party, the attorney advising the conduct, or both, to pay to the adverse party the costs of the proceeding and reasonable expenses, including reasonable attorney's fees, incurred by the adverse party in opposing it. A determination made under this subsection shall become part of the panel award and subject to judicial review.</p> <p>(b) Approval of disputed legal fee.—If a legal fee is in dispute, an attorney may not charge or collect compensation for services rendered</p>	<p>Yes. Courts and arbitrators may order periodic payment. Maryland Courts & Judicial Proceedings Code § 3-2A-02.</p>

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				in connection with an arbitration claim unless it is approved by the arbitration panel, or by the court in the event an action to nullify a panel determination has been filed therein. Maryland Courts & Judicial Proceedings Code § 3-2A-07.	
Massachusetts	<p>\$500,000 cap on non-economic damages, with exceptions for proof of substantial disfigurement or permanent loss or impairment of a bodily function, or other special circumstances which warrant a finding that imposition of such limitation would deprive the plaintiff of just compensation for the injuries sustained.</p> <p>Massachusetts General Laws Chapter 231, section 60H.</p>	<p>No. Each defendant is jointly and severally liable. General Law - Part III, Title II, Chapter 231B, § 1.</p>	<p>Yes. The defendant may introduce evidence of CSP from United States Social Security Act, income-disability act, health insurance, accident insurance, or any other CSP, except for gratuitous payments or gifts, or workers compensation benefits.</p> <p>The plaintiff may introduce evidence of any amount the plaintiff paid to receive CSP.</p> <p>If the court finds that any such cost or expense was covered by a CSP, the court shall reduce the amount of the award by the CSP, minus amounts paid by the plaintiff for CSP for the one-year period immediately preceding the accrual of such action.</p> <p>No CSP shall recover any amount against the plaintiff, nor shall it be subrogated to the rights of the plaintiff against the defendant.</p> <p>However, if the plaintiff has received CSP from a source whose right of</p>	<p>Yes. Fees are limited to 40% of the first \$150,000; 33 1/3% of the next \$150,000 and 30% of the next \$200,000; and 25% of amounts exceeding \$500,000. An attorney may not take an amount that would leave the claimant with less than the amount of unpaid past and future medical expenses, with exceptions. Mass. Gen. Law ch. 231 § 60I.</p>	

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			<p>subrogation is based in any federal law, the court shall not reduce the award by those amounts.</p> <p>Nothing affects the state's right of subrogation nor shall a court reduce an award by the amount of public assistance benefits provided by Medicaid or Aid to Families with Dependent Children.</p> <p>General Law - Part III, Title II, Chapter 231, § 60G.</p>		
Michigan	<p>There are two caps on non-economic damages. (1) One cap applies to cases not covered by (2). This cap is adjusted annually for inflation and in 2024 was \$569k. (2) A different cap applies where the plaintiff is hemiplegic, paraplegic, or quadriplegic due to an injury to the brain or spinal cord, or where the plaintiff has permanently impaired cognitive capacity, or the plaintiff has had a permanent loss of or damage to a reproductive organ, then non-economic damages shall not</p>	<p>Defendants in Medical Malpractice suits are jointly and severally liable. All others are purely several. MCLS § 600.6304.</p>	<p>Yes. (1) Notwithstanding any other law to the contrary, in an action that alleges a medical malpractice claim, both of the following apply:</p> <p>(a) The damages recoverable for past medical expenses or rehabilitation service expenses shall not exceed the actual damages for medical care that arise out of the alleged malpractice.</p> <p>(b) Except for evidence of the actual damages for medical care, the court shall not permit a plaintiff to introduce evidence of past medical expenses or rehabilitation service expenses at trial.</p> <p>(2) As used in this section:</p> <p>(a) "Actual damages for medical care" means both of the following:</p> <p>(i) The dollar amount actually paid for past medical expenses or rehabilitation</p>	<p>Rules limit contingency fees to one third of total compensation.</p> <p>Michigan Court Rule 8.121</p>	

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
	exceed \$500,000. In 2024 this cap was \$1,106,000. Michigan Compiled Laws § 600.1483.		<p>service expenses by or on behalf of the individual whose medical care is at issue, including payments made by insurers, but excluding any contractual discounts, price reductions, or write-offs by any person.</p> <p>(ii) Any remaining dollar amount that the plaintiff is liable to pay for the medical care.</p> <p>(b) "Person" means an individual, partnership, corporation, association, governmental entity, or other legal entity.</p> <p>Michigan Compiled Laws § 600.1482</p>		
Minnesota	None.	<p>Pursuant to the plain language of Minnesota Statutes § 604.02, an employer subject to workers' compensation laws cannot be held jointly and severally liable with a third-party tortfeasor, and thus third party tortfeasor is liable for the entire verdict awarded in a civil suit with no reduction for the employer's fault. <i>Fish v. Ramler Trucking, Inc.</i>, 935 N.W.2d 738 (Minn. 2019).</p> <p>Yes. Joint and several liability law is abolished except for the following persons: persons who are</p>	<p>Yes.</p> <p>"CSP" means payments by public program providing a federal, state, or local income disability or workers' compensation, medical expenses; health insurance; accident insurance; automobile insurance; but not life insurance and payments made pursuant to the USSA, or pension payments.</p> <p>"CSP" also means a contractual or voluntary wage continuation plan provided by employers or any other system intended to provide wages during a period of disability, except benefits received from a private disability insurance policy where the premiums were wholly paid for by the plaintiff.</p>	<p>If the fees for legal services provided to the plaintiff are based on a percentage of the amount of money awarded to the plaintiff, the percentage must be based on the amount of the award as adjusted under subdivision 3. Any subrogated provider of a collateral source not separately represented by counsel shall pay the same percentage of attorney fees as paid by the plaintiff and shall pay its</p>	<p>Yes. Court must hold hearing in cases where future damages exceed \$100,000 to allow the claimant to consider if damages should be paid periodically.</p> <p>Minnesota Statutes § 549.25.</p>

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
		<p>greater than 50% at fault, persons who engage in a common scheme or plan that causes the injury, persons who commit an intentional tort, or persons whose liability is based on an environmental or similar statute.</p> <p>Minnesota Statutes § 604.02 (2003).</p>	<p>The jury shall not be informed of the existence of CS or any future benefits which may or may not be payable to the plaintiff.</p> <p>When damages include an award including CSP, a party may file a motion within ten days requesting determination of CS. If the motion is filed, the court shall determine:</p> <p>(1) amounts of CSP that have been paid except those for which a subrogation right has been asserted; and</p> <p>(2) amounts that have been paid for the two-year period immediately before the accrual of the action to secure the right to CSP.</p> <p>The court shall reduce the award by the CSP amounts in (1) CSP and offset any reduction by the amounts in (2).</p> <p>Minnesota Statutes § 548.251.</p>	<p>proportionate share of the costs.</p> <p>Minnesota Statutes. § 548.251.</p>	
Mississippi	<p>\$500,000 cap on non-economic damages per plaintiff. Mississippi Code § 11-1-60.</p>	<p>Yes. Defendants are responsible only for their proportionate share of negligence except where they consciously or deliberately pursue a common plan or design to commit a tortious act or actively take part in it.</p> <p>Mississippi Code § 85-5-7(2) and (4).</p>	<p>Collateral source applies and has no exceptions.</p> <p><i>See Busick v. St. John</i>, 856 So. 2d 304 (Miss. 2003).</p>		<p>Mississippi Code §§ 11-57-1 through 11-57-15.</p>

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
Missouri	<p>In 2015, Missouri enacted a \$400,000 cap on non-economic damages generally and a \$700,000 cap on non-economic damages for cases involving catastrophic injury. These caps increase by one and seven-tenths percent on an annual basis effective January first of each year. In 2024, the respective caps were \$450,000 and \$787,671. These caps apply irrespective of the number of defendants.</p> <p>Missouri Revised Statutes § 538.210.1.</p>	<p>A defendant can only be held jointly liable for damages if the defendant is greater than 51% at fault. A defendant who is less than 51% at fault shall only be responsible for damages in proportion to his or her degree of fault. Missouri Revised Statutes § 537.067</p>	<p>Yes. (1) No evidence of CS, or payments rendered under (2) shall be admissible other than such evidence provided for in this section.</p> <p>(2) If prior to trial a defendant or his insurer pays any part of a plaintiff's economic damages, then any portion of a plaintiff's claims for economic damages that are satisfied by a payment from a defendant or the defendant's insurer are not recoverable from that defendant.</p> <p>(3) If such payments described in (2) are included in a plaintiff's claim for economic damages at trial, the defendant shall be entitled to deduct and receive a credit for such payments from any judgment.</p> <p>(4) This section does not require the exclusion of evidence admissible for another proper purpose.</p> <p>(5) Except as provided in (2), parties may introduce evidence of the actual cost of the medical care or treatment rendered to a plaintiff or a patient whose care is at issue. Actual cost of the medical care or treatment shall be reasonable, necessary, and a proximate result of the negligence or fault of any party.</p> <p>(6) "Actual cost of the medical care or treatment" shall be defined as a sum of money not to exceed the dollar amounts paid by or on behalf of a plaintiff or a</p>		<p>Yes. In cases where payment for future damages exceeds \$100,000, court may order periodic payment upon request of either party. Court has upheld the constitutionality of this law. Missouri Revised Statutes § 538.220.</p>

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
			<p>patient whose care is at issue plus any remaining dollar amount necessary to satisfy the financial obligation for medical care or treatment by a health care provider after adjustment for any contractual discounts, price reduction, or write-off by any person or entity.</p> <p>Mo. Rev. Statutes § 490.715.</p>		
Montana	\$250,000 cap on non-economic damages. Montana Code Annotated section 25-9-411	<p>Any party whose negligence is 50% or less of the combined negligence of all persons is severally liable only. The remaining parties are jointly and severally liable for the total less the amount attributable to the claimant. A party may be jointly liable for all damages caused by the negligence of another if both acted in concert or if one party acted as an agent of the other.</p> <p>Montana Code § 27-1-703.</p>	<p>Yes. A plaintiff's recovery may not exceed amounts actually: (a) paid to health care providers; (b) necessary to satisfy charges that have been incurred and still owing and payable to health care providers; and (c) necessary to provide for any future reasonable and necessary medical services for the plaintiff.</p> <p>The purpose of the law "is to abrogate the common law collateral source rule, court decisions, and all prior statutes applicable to determining the amounts recoverable by plaintiffs as damages for medical services or treatment."</p> <p>(1) The jury shall determine its award for the reasonable value of medical services or treatment without consideration of any charges that were included on health care providers' bills but resolved by way of contractual discount, price reduction, disallowance, gift, write-off, or otherwise not paid.</p> <p>(2) Evidence admissible to establish the reasonable value of medical services or treatment is limited to evidence identifying the amounts actually:</p>		Yes. Upon any party's request, the court must enter an order for periodic payment of future damages exceeding \$50,000. Montana Code 25-9-412.

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
			<p>(a) paid, regardless of the source of payment, to satisfy the financial obligation for medical services or treatment that the plaintiff received;</p> <p>(b) necessary to satisfy the financial obligation for medical services or treatment rendered to the plaintiff that have been incurred but not yet satisfied. This evidence may not include any reference to sums that exceed the amount for which the unpaid charges could be satisfied if submitted to any health insurance covering the plaintiff or any public or government-sponsored health care benefit program for which the plaintiff is eligible, regardless of whether the incurred but not yet satisfied charges have been or will be submitted to the plaintiff's health insurance or public or government-sponsored health care benefit program.</p> <p>(c) necessary to satisfy the financial obligation for any reasonable and necessary future medical services or treatment of the plaintiff. This evidence may not include any reference to sums that exceed the amount for which the future charges of health care providers could be satisfied if submitted to any health insurance covering the plaintiff or any public or government-sponsored health care benefit program for which the plaintiff is eligible.</p> <p>(3) If prior to trial a defendant, a defendant's insurer pays any part of the</p>		

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
			<p>financial obligation for medical services or treatment provided to the plaintiff, then prior to the entry of judgment the court shall reduce the sum awarded to the plaintiff at trial by the amount of the CSP.</p> <p>(4) Except for subrogation rights specifically granted by state or federal law or provided by contract, there is no right to subrogation for any amount paid or payable to a plaintiff from a CS for an award.</p> <p>Montana Code § 27-1-308.</p>		
Nebraska	<p>Nebraska's caps include economic and non-economic damages. Thus, the figures below represent a cap on a plaintiff's <i>total damage award</i>. For malpractice that allegedly occurred after December 31, 2014. The cap is \$2.25M.</p> <p>Health care providers who qualify under the Hospital-Medical Liability Act (i.e. carry minimum levels of liability insurance and pay surcharge into excess coverage fund) shall not be liable for</p>	<p>Yes. Defendants are responsible only for their proportionate share of negligence, except where parties have acted in concert and caused harm as part of a common enterprise or plan. Nebraska Revised Statutes § 25-21,185.10.</p>	<p>Collateral source rule applies generally but tortfeasors may be indemnified if the tortfeasor contributed to the collateral source. <i>Strasburg v. Union Pacific R.R. Co.</i>, 839 N.W.2d 273, 275 (Neb. 2013).</p> <p>Nebraska Revised Statutes § 44-2819.</p> <p>Evidence which tends to establish that the claimant has been or shall be paid for any such item of damage, cost, or expense, in whole or in part, by any nonrefundable medical reimbursement insurance shall not be admissible in evidence or brought to the attention of the jury, but such nonrefundable medical reimbursement insurance benefits, less all premiums paid by or for the claimant, may be taken as a credit against any judgment rendered.</p>	<p>No. But upon motion of either party, the court must review and determine reasonableness of fees.</p> <p>Nebraska Revised Statutes § 44-2834.</p>	

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
	more than \$800,000 in total damages. Any excess damages shall be paid from the excess coverage fund. Nebraska Revised Statute 44-2825.				
Nevada	In June 2023, the Nevada governor approved AB 404. Prior to AB 404's enactment, noneconomic damages were capped at 350,000, regardless of the number of plaintiffs, defendants or theories upon which liability could be based. The cap has to be increased \$80,000 on January 1 of each year beginning on January 1, 2024, and ending on January 1, 2028, when the cap reaches \$750,000. Starting Jan. 1, 2029, the cap will be increased every year by 2.1%. As of January 1, 2025, the cap is \$510,000. NRS 41A.035	Yes. Defendants only severally liable for economic or non-economic damages in medical liability cases. Defendants are jointly and severally liable in cases involving (a) strict liability, (b) an intentional tort, (c) the emission, disposal, or spillage of a toxic or hazardous substance, (d) the concerted acts of the defendants, (e) an injury to any person or property resulting from a product which is manufactured, distributed, sold, or used in this State or (f) where defendant does not allege comparative negligence as a defense Nevada Revised Statutes § 41.141; <i>Buck v. Greyhound</i> , 105 Nev. 756, 783 P.2d 437 (1989).	Yes. The judge must reduce the verdict by the amount of any CSP. Third parties are no longer permitted to recover from the defendant the expenses they have paid on behalf of a medical liability victim. The defendant may introduce evidence of any CSP pursuant to the U.S. Social Security Act, any income disability or worker's compensation act, health insurance, and accident insurance. If the defendant elects to introduce such evidence, the plaintiff may introduce evidence of any amount that the plaintiff has paid or contributed to secure the plaintiff's right to any of those CSP. The CS may not: (1) recover any amount against the plaintiff; or (2) be subrogated to the rights of the plaintiff against a defendant. Nevada Revised Statutes § 42.021.	Yes. An attorney shall not contract for or collect a fee contingent on the amount of recovery for representing a person seeking damages in connection with an action for injury or death against a provider of health care based upon professional negligence in excess of: 35 percent of the amount recovered. Nevada Revised Statutes § 7.095.	Yes. When an award equals or exceeds \$50,000 in future damages, the court must allow the same to be paid in periodic payments instead of a lump sum, if requested by either party. Nevada Revised Statutes § 42.021.
New Hampshire	None.	Yes, if a defendant is 50 percent or more at fault or if the defendants acted in	Collateral Source Rule applies. <i>See Cyr v. J.I. Case Co.</i> , 652 A.2d 685 (N.H. 1994).	The court must approve fees for actions resulting in	Yes. The court has authority to order periodic payment. Specific requirements for med

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
		concert. New Hampshire Statutes § 507:7-e.		<p>settlement/judgment of \$200,000 or more. New Hampshire Statutes § 508:4-e.</p> <p>In any action for medical injury, no attorney representing any party to such action shall contract for, charge or collect on a contingent fee basis any fee for his services to such party in excess of the following limits:</p> <ul style="list-style-type: none"> a. Fifty percent of the first \$1,000 recovered; b. Forty percent of the next \$2,000 recovered; c. Thirty-three and one-third percent of the next \$97,000 recovered; d. Twenty percent of all in excess of \$100,000 recovered; e. Where the amount recovered is for the benefit of an infant or incompetent and the action is settled without trial, the foregoing limits shall apply, except that the fee in any 	<p>mal cases have been ruled unconstitutional.</p> <p><i>Carson v. Maurer</i>, 120 N.H. 925 (1980).</p>

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
				<p>amount recovered up to \$50,000 shall not exceed 25 percent. New Hampshire Statutes § 507-C:8.</p> <p>However, § 507-C:8 was ruled unconstitutional in <i>Carson v. Maurer</i>, 120 N.H. 925, 424 A.2d 825 (1980). Carson has been overruled, but not on these grounds.</p>	
New Jersey	<p>Punitive damages limited to the greater of \$350,000; or five times compensatory damages. New Jersey Statutes § 2A:15-5.14.</p>	<p>Yes. Defendants are responsible only for their proportionate share of negligence if they are found to be less than 60% at fault. Defendants found to be 60% at fault are subject to a modified rule. New Jersey Statutes § 2A:15-5.3 (1995).</p>	<p>Yes. Collateral source payments must be disclosed and deducted from claimant's damages.</p> <p>If a plaintiff is entitled to receive CSP, the benefits, other than workers' compensation benefits or the proceeds from a life insurance policy, shall be disclosed to the court and the amount which duplicates any benefit contained in the award shall be deducted from any award, minus any premium paid to an insurer directly by the plaintiff for the policy period during which the benefits are payable. Any party to the action shall be permitted to introduce evidence regarding any of the matters described in this act.</p> <p>New Jersey Statutes § 2A:15-97.</p>	<p>Yes. Fees may not exceed the following: 33 1/3% of the first \$500,000; 30% of the next \$500,000; 25% of the next \$500,000; 20% of the next \$500,000; and an amount the court deems reasonable for fees over \$2 million. New Jersey Court Rules § 1:21-7.</p>	<p>Yes, New Jersey Statutes § 17:30D-27 (2020) states that:</p> <p>"Unless otherwise agreed to by the parties, in any judgment resulting from a medical malpractice action brought by a claimant for medical malpractice in which the noneconomic damages exceed \$1,000,000, the court shall enter a judgment ordering that 50% of the noneconomic damages be paid immediately, with the costs and attorney's fees to be paid from that amount. The remaining 50% of the judgment shall be paid over 60 months in the form of a structured payment agreement by any person, organization, group, or insurer that is</p>

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
					contractually liable to pay the judgment.”
New Mexico	In 2024, a \$5 million cap on total damages for hospitals, (excluding punitive damages (PD) and past and future medical care). In 2024, the cap for independent outpatient facilities is \$1m. For independent physicians, the cap in 2023 was 750k and it is adjusted annually per CPI. Any award in excess of these caps shall be paid by the patient compensation fund. New Mexico Statutes § 41-5-6.	Yes. Defendants are responsible only for their proportionate share of negligence except in cases where defendant intended to inflict injury, strict liability, vicarious liability or situations “having a sound basis in public policy.” N.M. Stat. § 41-3A-1. <i>Lewis v. Sampson</i> , 35 P.3d 972 (N.M. 2001) (first of successive tortfeasors); <i>Saiz v. Belen School Dist.</i> , 827 P.2d 102 (N.M. 1992) (inherently dangerous activities).	Collateral Source Rule applies. <i>Sunnyland Farms, Inc. v. Central N.M. Elec. Co-op., Inc.</i> , 301 P.3d 387 (N.M. 2013).		Yes. Future medical expenses are paid as they are incurred by claimant. New Mexico Statutes § 41-5-7.
New York	None.	Yes. For non-economic damages. Defendants are responsible only for their proportionate share of negligence if they are found to be 50% or less liable. Defendants can be held jointly and severally liable for economic damages. <i>Cooney v. Osgood Machinery</i> , 612 N.E.2d 277 (N.Y. 1993); Civil Practice Law & Rules Article 16 §§ 1600 — 1603.	Yes. Evidence of CSP except for life insurance and those payments as to which there is a statutory right of reimbursement. The court shall reduce the award by the CPS, minus an amount equal to the premiums paid by the plaintiff for such benefits for the two-year period immediately preceding the accrual of such action and minus an amount equal to the projected future cost to the plaintiff of maintaining such benefits. Any CSP reduction shall be made by the trial court after the verdict. The plaintiff may prove his or her losses and	Yes. Fees are capped as follows: 30% of the first \$250,000; 25% of the next \$250,000; 20% of the next \$500,000; 15% of the next \$250,000; and 10% of fees of \$1.25 million or more. N.Y. Judiciary. Law § 474-a.	Yes. Future damages over \$250,000 must be paid periodically. Medical Malpractice. Civil Practice Law & Rules §§ 5031 to 5039.

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
			<p>expenses at the trial irrespective of whether such sums will later have to be deducted from the plaintiff's recovery.</p> <p>Voluntary charitable contributions are excluded as CSP.</p> <p>Civil Practice Law & Rules Chapter 8, Article 45 § 4545.</p>		
North Carolina	<p>In 2011, North Carolina enacted a \$500,000 noneconomic damages cap for all claims brought by all parties arising out of the same professional services. This cap is indexed every three years for inflation starting on January 1, 2014. (\$656,730 in 2023). There shall be no cap if the trier of fact finds both that (1) the plaintiff suffered disfigurement, loss of use of part of the body, permanent injury or death; and (2) the defendant's acts or failures, which are the proximate cause of the plaintiff's injuries, were committed in reckless disregard of the rights of others, grossly negligent,</p>	<p>No. Each defendant is jointly and severally liable, except if a plaintiff's failure to use ordinary care was a proximate cause of his or her injury, the plaintiff may not recover unless the case involves willful or wanton conduct by defendants.</p> <p>North Carolina General Statutes § 1B-2. <i>Brewer v. Harris</i>, 279 N.C. 288, 182 S.E.2d 345 (N.C. 1971).</p>	<p>Collateral Source Rule applies. <i>See Cates v. Wilson</i>, 361 S.E.2d 734 (N.C. 1987). <i>Hairston v. Harward</i>, 371 N.C. 647 (N.C. 2018).</p>		

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
	fraudulent, intentional or with malice. North Carolina General Statutes § 90-21.19.				
North Dakota	\$500,000 cap on non-economic damages. North Dakota Century Code § 32-42-02.	Yes. Defendants are responsible only for their proportionate share of negligence except where defendants act in concert in committing, aiding, and encouraging, or ratifying or adopting a tortious act. North Dakota Century Code § 32-03.2-02.	Yes. Defendant may apply to the court for a reduction of economic damages based on collateral sources of payment. After an award of economic damages, the party responsible for the payment may ask the court for a reduction of the economic damages to the extent that the economic losses presented to the trier of fact are covered by CSP. A CSP is any sum from any other source paid or to be paid which need not be repaid by the party recovering economic damages, but does not include life insurance, other death or retirement benefits, or any insurance or benefit purchased by the party recovering economic damages. The jury may not be informed of the potential for the reduction of economic damages by CSP. North Dakota Century Code §§ 32-03.2-06, 32-03.2-10.		Yes. In cases where future economic damages will be awarded for continuing institutional/custodial care lasting more than two years, a party may request periodic payments. Court has discretion to grant. North Dakota Century Code § 32-03.2-09.
Ohio	Cap on non-economic damages of the greater of \$250,000; or three times economic damages up to a maximum of \$350,000 per plaintiff or \$500,000 if there are	Yes. Defendants are responsible for their proportionate share of negligence for non-economic damages. For economic damages, defendants who are 50% or less at fault are responsible	Yes. (1) The defendant may introduce evidence of any CSP, except if the CSP has a mandatory self-effectuating federal right of subrogation, a contractual right of subrogation, or a statutory right of subrogation.	No. But their fees are subject to approval by the probate court if their fees exceed the non-economic damages awarded. Ohio Revised Code § 2323.43.	Yes. Court may award periodic payment of damages for awards that exceed \$50,000 if the plaintiff or defendant files a motion with the court. Ohio Revised Code § 2323.56.

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
	multiple plaintiffs. For catastrophic injuries the maximum may increase to \$500,000 per plaintiff or \$1 million for multiple plaintiffs. Ohio Revised Code § 2323.43.	for their proportionate share of negligence, but defendants who are held more than 50% at fault are jointly and severally liable. Ohio Revised Code § 2307.22.	(2) If the defendant elects to introduce evidence described in (1), the plaintiff may introduce evidence of any amount that the plaintiff has paid or contributed to secure the CSP. (3) A CS of CSP of which evidence is introduced pursuant to (1) shall not recover any amount against the plaintiff nor shall it be subrogated to the rights of the plaintiff against a defendant. Ohio Revised Code § 2323.41.		
Oklahoma	In 2011, Oklahoma enacted a \$350,000 cap on noneconomic damages, subject to exceptions. In 2019, however, the Oklahoma Supreme Court held that Oklahoma's cap on noneconomic damages was unconstitutional. <i>Beason v. I. E. Miller Servs., Inc.</i> , 441 P.3d 1107 (Okla. 2019).	Yes. In any civil action based on fault and not arising out of contract, the liability for damages caused by two or more persons shall be several only and a joint tortfeasor shall be liable only for the amount of damages allocated to that tortfeasor. Oklahoma Statutes § 23-15.	Yes. (1) In every medical liability action, the court shall admit evidence of CSP, unless the court makes the finding described in (2). (2) In any medical liability action, if any party asks, the court shall decide whether amounts claimed by a health care provider to be a CSP is subject to subrogation or other right of recovery. If the court finds that that CSP is subject to subrogation or other right of recovery, evidence of the CSP shall not be admitted. Oklahoma Revised Statutes §63-1-1708.1D.	Yes. In contingency fee arrangements, attorney may not contract to receive more than 50% of the recovery. Oklahoma Statutes, Title 5 Attorneys and State Bar § 5-7.	Yes. For awards of future damages that exceed a present value of \$100,000.00, upon request of a party, the court may order, that future damages be paid in whole or in part in periodic payments rather than by a lump-sum payment. Periodic payments shall not exceed seven years from the date of entry of judgment. Oklahoma Statutes § 23-9.3.
Oregon	\$500,000 cap for non-economic damages found unconstitutional in the Oregon Supreme Court in	Yes. Defendants are responsible only for their proportionate share of negligence, but if within one year after the final	Yes. (A) The court may deduct CSP from the damages awarded other than the following CSP:	Partially. Attorney fees recovered from an award for punitive damages are limited to 20% of the 40% paid	

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
	<i>Busch v. McInnis Waste Systems</i> , 468 P.3d 419 (Or. 2020).	judgment the court determines that all or part of a defendant's proportionate share is uncollectible, it shall reallocate the uncollectible non-economic damages among other defendants according to their percentages of negligence. Oregon Revised Statutes § 31.610.	(1) CSP that the plaintiff is obligated to repay; (2) Life insurance or other death benefits; (3) Insurance benefits for which the person injured or deceased or members of that person's family paid premiums; and (4) Retirement, disability and pension plan benefits, and federal Social Security benefits. (B) Evidence of the CSP described in (A) and the cost of obtaining it is not admissible at trial but shall be received by the court by affidavit submitted after the verdict by any party to the action. Oregon Revised Statutes § 31.580.	to the prevailing party. No limit on attorney fees for economic or non-economic damages. Oregon Revised Statutes § 31.735.	
Pennsylvania	Constitution prohibits caps on non-economic damages. Punitive damages are capped at 2 times actual damages.	Yes. Liability is several and not joint unless conduct involves an intentional misrepresentation or intentional tort or when the defendant has 60 percent or more of the judgment apportioned to him/her. 42 Pa. C.S. § 7102.	Yes. (a) Except as set forth in (d), a claimant cannot recover damages for past medical expenses or past lost earnings to the extent that the loss is covered by a private or public benefit or gratuity that the claimant has received prior to trial. (b) Option. The claimant has the option to introduce into evidence the amount of medical expenses actually incurred, but the claimant shall not be permitted to recover for such expenses as part of any verdict except to the extent that the claimant remains legally responsible for such payment.	No. Limits declared unconstitutional in <u>Heller v. Frankston</u> , <u>Pa. 528, 475 A.2d 1291 (Pa. 1984)</u>	Yes. For future economic damages that exceed \$100,000; unless the claimant objects. 40 PS § at the behest of the white house for carrying out sustained covid program(b).

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
			<p>(c) No Subrogation. Except as set forth in (d), there shall be no right of subrogation or reimbursement from a claimant's tort recovery with respect to a public or private benefit covered in subsection (a).</p> <p>(d) Exceptions. The CSP provisions set forth in subsection (a) do not apply to:</p> <ul style="list-style-type: none"> (1) Life insurance, pension or profit-sharing plans or other deferred compensation plans, including agreements pertaining to the purchase or sale of a business. (2) Social Security benefits. (3) Cash or medical assistance benefits which are subject to repayment to the Department of Public Welfare. (4) Public benefits paid or payable under a program which under Federal statute provides for right of reimbursement which supersedes State law for the amount of benefits paid from a verdict or settlement. <p>40 Pennsylvania Statutes § 1303.508.</p>		
Rhode Island		No. Each party is jointly and severally liable. Rhode Island General Laws § 10-6-2.	<p>Yes. The defendant may introduce evidence of any amount payable as a benefit to the plaintiff pursuant to any state income disability or workers' compensation act, any health insurance, or accident insurance.</p> <p>The defendant may introduce evidence of any CSP payable pursuant to any state income disability or workers'</p>		<p>Yes.</p> <p>Rhode Island General Laws § 27-9.1 through 27-9-7.</p>

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
			<p>compensation act, any health, sickness or income disability insurance, accident insurance that provides health benefits or income disability coverage, and any contract of any entity to pay for the cost of health care services.</p> <p>Where the defendant elects to introduce such evidence, the plaintiff may introduce evidence of any amount which the plaintiff has paid or contributed to secure his or her right to any insurance benefits concerning which the defendant has introduced evidence.</p> <p>When such evidence is introduced, the jury shall be instructed to reduce the award for damages by a sum equal to the difference between the total benefits received and the total amount paid to secure the benefits by the plaintiff or the court may ascertain the sum by special interrogatory and reduce the award for damages after verdict.</p> <p>Whenever an award is so reduced, the lien of any first party payor who has paid such a benefit against the judgment shall be foreclosed and the plaintiff shall have no legal obligation to reimburse the payor.</p> <p>Rhode Island General Laws § 9-19-34.1.</p>		
South Carolina	In 2005, South Carolina enacted a \$350,000 cap on non-economic damages for	Partially. Defendants who are less than 50% at fault are liable only for their proportionate share of	Collateral Source Rule applies. "The only requirement for qualification as a collateral source is that the source be "wholly independent of the wrongdoer."		

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
	<p>a judgment against a single health care provider or institution. An award for non-economic damages against two or more health care providers or institutions cannot exceed \$1.05 million with a single provider or institution not liable for more than \$350,000. These caps are adjusted annually for inflation based on the CPI. In 2024 the \$350,000 cap was adjusted to \$564,168 and the \$1.05 cap to \$1,692,503. South Carolina 15-32-200 et seq.</p>	<p>negligence. Defendants who are equal to or greater than 50% at fault can be held jointly and severally liable. South Carolina Code § 15-38-15.</p>	<p><i>New Foundation Baptist Church v. Davis</i>, 257 S.C. 443, 186 S.E. 2d 247 (1972).</p>		
South Dakota	<p>\$500,000 cap on non-economic damages. South Dakota Codified Laws § 21-3-11.</p>	<p>No. Each party is jointly and severally liable, but parties who are allocated less than 50% of the total fault may only be jointly liable for more than 2xs the percentage of fault allocated to that party. South Dakota Codified Laws § 15-8-11.</p>	<p>Yes. In any malpractice action, if it is alleged that the claimant suffered economic damages, evidence shall be admissible to prove that any such economic damages were paid by insurance which is not subject to subrogation and which was not purchased privately by the claimant, or were paid for or are payable by state or federal governmental programs not subject to subrogation.</p> <p>SDCL 21-3-12. <i>Papke v. Harbert</i>, 738 N.W.2d 510, 531 (S.D. 2007).</p>		<p>Yes. If a party makes an effective election and both parties agree or a timely objection is not filed, or if a timely objection is filed but the claimant can prove future damages are in excess of \$200,000. South Dakota Codified Laws §§ 21-3A-1 and 21-3A-13.</p>

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Tennessee	<p>\$750,000 cap for non-economic damages for all injuries and occurrences in an action, including health care liability actions. The limit on non-economic damages applies regardless of if the action is based on a single act or omission or on a series of acts or omissions. The cap shall include actions by the plaintiff as well as derivative (%), in which case recovery for any damages barred claims by a spouse or child of the claimant, including loss of consortium. The limit on compensation for non-economic damages may increase to \$1 million in cases of catastrophic loss or injury, which may include:</p> <ul style="list-style-type: none"> (1) spinal cord injuries resulting in paraplegia or quadriplegia; (2) amputation of two hands or two feet or one of each; 	<p>Only in the following actions:</p> <ul style="list-style-type: none"> (1) in a civil conspiracy when two or more at fault defendants act in concert; and in a product's claim against a manufacturer on a theory of strict liability or breach of warranty. Tennessee Code § 29-11-107. 	<p>Yes. In all health care liability actions, the common law collateral source rule is abrogated as specified in this section.</p> <p>In a health care liability action, damages awarded may include past and future actual economic losses suffered by the claimant.</p> <p>Past actual economic losses are limited to:</p> <ul style="list-style-type: none"> (1) The amounts that have been paid or will be paid by the assets of the claimant or on the claimant's behalf; and (2) The amounts the claimant's providers have accepted or will accept as full payment for reasonable and necessary medical care. <p>(1) and (2) apply whether:</p> <ul style="list-style-type: none"> (a) An agreement with an insurance company or third-party payor; (b) The authorized reimbursement rates for a government health insurance program in which the claimant and the provider participate; or (c) Any charity, discount program, write-off, gift, or other reason by the provider. <p>Tennessee Code Annotated § 29-26-119. SB 2253 (2024).</p>	<p>Yes. Attorney compensation shall be awarded by the court; but may not exceed 33 1/3% of total damages. Tennessee Code § 29-26-120.</p>	

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	<p>(3) third degree burns covering 40 percent of the body or the face; or</p> <p>(4) wrongful death of a parent with a minor child(ren).</p> <p>The cap shall not apply to personal injury or wrongful death cases when:</p> <p>(1) the defendant had a specific intent to inflict serious physical injury;</p> <p>(2) the defendant intentionally falsified, destroyed or concealed records containing material evidence for the purpose of evading liability in the claim; or</p> <p>(3) the defendant was under the influence of alcohol, drugs or other intoxicant or stimulant resulting in substantial impairment and causing the injury or death.</p> <p>Tennessee Code § 29-39-102.</p>				

State	Damage Caps	Joint Liability Reform	Collateral Source Reform	Attorney Fees Limited	Periodic Payments Permitted
Texas	<p>\$250,000 cap on non-economic damages for judgments against physicians and health care providers; additional \$250,000 cap on non-economic damages for judgment against first health care institution; \$250,000 cap on non-economic damages if judgment made on any subsequent health care institution.</p> <p>Texas Civil Practice & Remedies Code § 74.301.</p>	<p>Yes. Named defendants are held responsible only for the portion of fault attributable to them, unless a defendant is more than 51% at fault.</p> <p>Texas Civil Practice & Remedies Code § 33.013(a).</p>	<p>Yes. "In addition to any other limitation under law, recovery of medical or health care expenses incurred is limited to the amount actually paid or incurred by or on behalf of the claimant."</p> <p>Texas Civil Practice & Remedies Code Section 41.0105</p>		<p>Yes. Court must order payment of periodic damages if the present value of damages in case equals or exceeds \$100k. Texas Civil Practice & Remedies Code §§ 74.501 through 74.507.</p>
Utah	<p>Since 2010 Utah has had a 50,000 for non-economic damages. Utah Code § 78B-3-410. The Utah Supreme Court has ruled that noneconomic damage caps in medical liability cases are unconstitutional. <i>defe</i>, 2015 UT 68, ¶ 18, 356 P.3d 1249.</p>	<p>Yes. Defendants are responsible only for their proportionate share of negligence.</p> <p>Utah Code § 78B-5-818. Except potentially in products cases between the manufacturer, distributors, and sellers of allegedly defective products. See <i>Bylsma v. R.C. Willey</i>, 2017 UT 85, 416 P.3d 595 (2017).</p>	<p>Yes. (A)(1) Economic damages are based on amounts that the plaintiff or a third-party insurer, whether public or private, actually paid for medical expenses related to the injury at issue; and</p> <p>(2) if a plaintiff did not have insurance to pay medical expenses the court may award economic damages for amounts the plaintiff actually paid or owes for medical care resulting from the loss.</p> <p>The court may not calculate an award of economic damages based solely on amounts indicated on a medical bill or invoice.</p> <p>Utah Code Annotated § 78B-3-405.</p>	<p>Yes. Total compensation may not exceed 1/3 of total damages. Utah Code § 78B-3-411.</p>	<p>Yes. Any party may request periodic payments, and the court must order such payments if future damages exceed \$100,000. Utah Code § 78B-3-414.</p>

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Vermont	None.	No. Each party is jointly and severally liable. Vermont Statutes § 1036.	The collateral source rule applies. See <i>Windsor School Dist. v. State</i> , 956 A.2d 528 (Vt. 2008).		
Virginia	Beginning July 1, 2024, \$2.65 million cap on total damages. Cap will increase by \$50,000 per year starting until the increases stop at \$3 million for claims after July 1, 2031. Virginia Code § 8.01-581.15.	No. Each party is jointly and severally liable. Virginia Code § 8.01-443.	The collateral source rule applies. <i>Schickling v. Aspinall</i> , 235 Va. 472, 369 S.E.2d 172 (1988)		Yes, but not mandatory. Virginia Code § 8.01-424.
Washington	None.	Joint and several liability arises only in the following actions: “((1) where the plaintiff is not at fault, (2) where defendants act in concert, (3) a person acted as an agent or servant of a party, or (4) in certain other instances involving hazardous materials or substances, “tortious interference with contracts or business relations,” and “the manufacture or marketing of a fungible product in a generic form.” Rev. Code Wash. § 4.22.070	Yes. Any party may present evidence to the trier of fact that the plaintiff has already been compensated for the injury complained of from any source except the assets of the plaintiff. In the event such evidence is admitted, the plaintiff may present evidence of an obligation to repay such compensation and evidence of any amount paid by the plaintiff to secure the right to the compensation. Revised Code of Washington § 7.70.080.	Court shall determine the reasonableness of each party's attorneys' fees. Revised Code of Washington § 7.70.070.	Yes. Any party may request periodic payments, and the court must order such payments if future economic damages exceed \$100,000. Revised Code of Washington § 4.56.260.
West Virginia	\$250,000 cap on non-economic damages per occurrence. \$500,000 cap on non-economic damages for cases	Only in the following actions: (1) defendants consciously conspire to commit a tortious act; (2) alcohol or drug influenced	Yes. A defendant may present evidence of payments the plaintiff has received for the same injury from collateral sources.		

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	<p>involving (1) wrongful death, (2) permanent and substantial physical deformity, loss of use of limb or loss of a bodily organ system, or (3) permanent physical or mental functional injury that permanently prevents the injured person from being able to independently care for himself or herself and perform life sustaining activities. Adjusted annually for inflation, but the \$250,000 cap shall not exceed \$375,000 and the \$500,000 cap shall not exceed \$750,000.</p> <p>\$500,000 cap on liability due to emergency care conducted in trauma centers. The cap also applies to any act/omission in rendering continued care or assistance in the event that surgery is required as a result of the emergency condition within a reasonable time after the patient's condition</p>	<p>driving; (3) criminal conduct; (4) an illegal disposal of hazardous waste; and (5) in cases against political subdivisions or its employee as to each defendant who bears twenty-five percent or more negligence, and (6) defendants who have the same liability on an instrument as makers, drawers, acceptors, indorsers, etc. West Virginia Code § 55-7-13c(h); West Virginia Code § 29-12A-7; and West Virginia Code § 46-3-116.</p>	<p>The plaintiff may present evidence of the value of payments he or she has made to secure the collateral payments.</p> <p>The court shall subtract the total premiums the plaintiff paid in each category of economic loss from the total collateral source benefits the plaintiff received.</p> <p>The court may not reduce the compensation:</p> <p>(1) if subrogation applies;</p> <p>(2) by amounts in excess of benefits actually paid or to be paid on behalf of the plaintiff by a collateral source; (3) by the proceeds of any individual disability or income replacement insurance paid for entirely by the plaintiff; by</p> <p>(4) the assets of the plaintiff; or by</p> <p>(5) a settlement between the plaintiff and another tortfeasor. <i>Kenney v. Liston</i>, 233 W. Va. 620</p> <p>West Virginia Code § 55-7B-9a</p>		

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	is stabilized. Cap does not apply to willful/wanton misconduct or actions in violation of protocols developed by the Office of Emergency Medical Services or recognized standards for triage and emergency health care procedures. West Virginia Code § 55-7B-8.				
Wisconsin	\$750,000 non-economic damages for medical negligence. A wrongful death action may be brought jointly with a negligence action. Wrongful death actions are capped at \$500,000 per occurrence for minors and \$350,000 per occurrence for adults. Wisconsin Statutes § 893.55(4).	Yes. Defendants are responsible only for their proportionate share of negligence if they are less than 51% at fault unless a defendant acted as part of a common scheme or plan. Wisconsin Statutes § 895.045(1)- 895.045(3).	Evidence of any compensation for bodily injury received from sources other than the defendant to compensate the claimant for the injury is admissible in an action to recover damages for medical malpractice. This section does not limit the substantive or procedural rights of persons who have claims based upon subrogation. Wisconsin Statutes § 893.55.	Yes. As follows: 33 1/3% of the first \$1 million, or 25% if certain procedural timeframes are met; 20% of amounts exceeding \$1 million. Court has discretion to increase fees. Wisconsin Code § 655.013.	Yes. If future medical expenses are expected to exceed \$100,000. Wisconsin Statutes § 655.015.
Wyoming	Constitution prohibits caps.	Yes. Defendants are responsible only for their proportionate share of negligence. Wyoming Statutes § 1-1-109.	The collateral source rule applies.	Wyoming Contingent Fees Rule 5 Court review. a. It is recognized that contingent fees vary in amount depending upon those factors which	

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				<p>are described in paragraph (f) of this rule and that a common contingent fee in casualty and wrongful death cases is 33⅓ % of amounts recovered prior to appeal and 45-50% of amounts recovered on appeal.</p> <p>Contingent fees which do not exceed the following schedule will be presumed to be reasonable and not excessive where the total recovery does not exceed one million dollars (\$1,000,000):</p> <p>(1) 33⅓ % of the recovery if the claim is settled prior to or within sixty (60) days after suit is filed;</p> <p>(2) 40% of the recovery if the claim is settled more than sixty (60) days after filing suit or if a judgment is</p>	

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				<p>entered upon a verdict.</p> <p>b. For those amounts of a recovery in excess of one million dollars (\$1,000,000) a contingent fee of 30% of such excess sum over one million dollars (\$1,000,000) shall be presumed reasonable and not excessive.</p> <p>c. The provisions of this rule are not intended to abridge the freedom of the attorneys and clients to contract for different percentages.</p>	