Agenda Item #: 3D.1

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: November 15, 2022		[X] Consent	[] Regular [] Public Hearing	
Department:			1.1	
Submitted By:	COUNTY ATTORNEY			
	<u>I. EXECUTIV</u>	<u>'E BRIEF</u>		
inclusive of attorney's	Staff recommends motions fees and costs, in the total decimination of the state of	otal amount of \$80,0	000.00 in the personal	
West Palm Beach. V Palm Tran bus. Fol narrowing, and nerv- surgeries – a cervical	a personal injury lawsui While at a stop light, Plai lowing the accident, Pla e damage in his neck a discectomy + fusion and ural and facet injections.	ntiff's vehicle was st intiff sustained six h and back. Plaintiff a lumbar laminector	ruck from behind by a nerniated discs, spinal underwent two spinal	
year-old Plaintiff, Aar Okeechobee Bouleva	stification (or Policy Iss ron Lederman, was drivi ard, when he stopped in t e the traffic light was red,	ng a 2016 Mercede the left turning lane	s-Benz sedan east on at the intersection with	
imaging revealed six underwent twelve epi discectomy + fusion s	nt, Plaintiff sought medic c herniated discs, spinal dural or facet injections i surgery and a lumbar lan medical bills totaling mor	narrowing, and ne n his spine before he ninectomy + discecte	rve damage. Plaintiff e underwent a cervical omy surgery. To date,	
the injuries alleged b	ttlement is warranted bas y Plaintiff. Therefore, it ment in the amount of \$8	is recommended that	•	
Attachments:				
 Settlement Agre Release of All C Budget Availabil 	Claims			
Recommended By:	Department Directo	for D. Coff	Fman 11/3/2	
Approved By:	N/A			

County/Deputy/Asst. County Administrator

Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

mmary of Fiscar		T 2025	7 2026	1 2025
2023	2024	2025	2026	2027
80,000.00				
80,000.00				
		80,000.00	80,000.00	80,000.00

Is Item Included in Current Budget?	Yes X	No
Does this item include the use of federal funds?	Yes	No X

Budget Account No:

Fund 5010 Agency 700 Organization 7130 Object 4511

- B. Recommended Sources of Funds/Summary of Fiscal Impact:
- C. Departmental Fiscal Review:

III.	REVIEW COMMENTS:	
A.	OFMB Fiscal and/or Contract Dev. and Con	ntrol Comments:
	OFMB MP-11-4-22	Contract Dev. & Control
В.	Legal Sufficiency	
		·

Assistant County Attorney

C. Other Department Review

Department Director

(THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT)

ATTACHMENT 1

SETTLEMENT AGREEMENT

THIS AGREEMENT made and entered into this _____ day of ______, 2022, by and between PALM BEACH COUNTY (the "COUNTY"), a political subdivision of the State of Florida, and AARON LEDERMAN.

WHEREAS, AARON LEDERMAN sued the COUNTY in a lawsuit presently styled <u>Aaron Lederman v. Palm Beach County</u>, Case No. 502021CA009540XXXXMB AG, in the Circuit Court of Palm Beach County, Florida (the "Pending Lawsuit"), for damages arising from a motor vehicle accident that occurred on August 17, 2020 near Okeechobee Boulevard and Spencer Drive, in West Palm Beach, Palm Beach County, Florida (the "Accident");

WHEREAS, the COUNTY has denied liability, causation, and damages, and has raised several affirmative defenses in the Pending Lawsuit; and

WHEREAS, the Parties hereto wish to amicably resolve the Pending Lawsuit without further litigation of the claims made and defenses raised therein.

NOW, THEREFORE, in consideration of the mutual covenants hereinafter set forth, the sufficiency of which are hereby acknowledged, the Parties agree as follows:

- 1. The foregoing recitals are true and correct and incorporated herein by reference.
- 2. Within a reasonable time, but no later than thirty (30) days, Alfred R. Bell, Esq., shall have executed and delivered to the Palm Beach County Attorney's Office the: 1) Settlement Agreement, 2) Release of All Claims, and 3) the Stipulation and Final Order of Dismissal with Prejudice.
- 3. Within a reasonable time of full execution and receipt of the documents listed in Paragraph 2, and subject to final administrative approval, the COUNTY shall pay to AARON LEDERMAN the amount of EIGHTY THOUSAND DOLLARS AND ZERO CENTS (\$80,000.00), by a check made payable to Skinger Openet Enor UP for tax ID: 87-4170989.
- 4. Alfred R. Bell, Esq. shall not disburse, and AARON LEDERMAN shall not accept, any proceeds from the settlement check described in Paragraph 3 unless and until the Settlement Agreement and Release of All Claims have been delivered to the COUNTY and the Stipulation and Final Order of Dismissal with Prejudice has been filed.
- 5. AARON LEDERMAN acknowledges and agrees that he is responsible for, and will resolve, the payment of any and all bills and liens relating to the Accident and Pending Lawsuit, including the lien held by Empire Healthchoice Assurance, Inc. under File No.: 110002781, and that the COUNTY shall not be responsible for any portion of said bills and liens.
 - 6. Each party shall bear its own attorney's fees and costs.

- This Settlement Agreement does not constitute an admission of liability by any party. Rather, the Parties expressly deny liability, and have entered into this Settlement Agreement in order to buy their peace.
- In any litigation brought to enforce the terms or remedy a violation of this Settlement Agreement, the prevailing party shall be entitled to an award of reasonable attorney's fees in addition to any other recovery.
- AARON LEDERMAN declares and acknowledges that the terms of this Settlement Agreement have been completely read, fully understood, discussed with counsel, and voluntarily accepted as a full and final compromise of any and all claims he may have against the COUNTY arising out of or relating to the Accident and Pending Lawsuit.
- This Settlement Agreement shall be binding on the Parties hereto, their assigns, 10. transferees, heirs, and other successors in interest.
- The Parties represent that no claim that has been, or could have been, raised in the Pending Lawsuit, and no claim to which this Settlement Agreement applies, has been assigned or

otherwise transferred to any other person or entity not a party hereto. IN WITNESS WHEREOF, the Parties have caused this Settlement Agreement to be executed as of the date first set forth above. Aaron Lederman Clinton B. Forbes Plaintiff Director, Palm Tran, Inc. APPROVED AS TO FORM PALM BEACH COUNTY, a Political Subdivision of the State of Florida AND LEGAL SUFFICIENCY Foren **Assistant County Attorney** Mayor, Board of County Commissioners

ATTEST:

JOSEPH ABRUZZO, Clerk and Comptroller

By:

ATTACHMENT 2

RELEASE OF ALL CLAIMS

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned, AARON LEDERMAN, being of lawful age and for the sole consideration of EIGHTY THOUSAND DOLLARS AND ZERO CENTS (\$80,000.00) to the undersigned in hand paid, the receipt and sufficiency whereof is hereby acknowledged, does hereby for himself and for his agents, executors, administrators, successors, and assigns, release, acquit and forever discharge PALM BEACH COUNTY (hereinafter the "COUNTY"), and their officers, agents, employees, commissioners, heirs, executors, administrators, successors, and assigns (together "Releasees"), none of whom admit any liability to the undersigned, but all of whom expressly deny any such liability, from any and all claims, demands, rights, damages, costs, loss of service, expenses, compensation, actions, causes of action or suits of any kind or nature whatsoever, which the undersigned may now have or which may hereafter accrue or develop, on account of or in any way growing out of any and all known and unknown, foreseen and unforeseen, bodily and personal injuries, and property damages, and any and all consequences thereof, relating to or resulting from an alleged motor vehicle accident that occurred on or about August 17, 2020 in Palm Beach County, Florida.

FURTHERMORE, the undersigned agrees that each party shall bear its own costs and attorney's fees, and the undersigned shall bear sole responsibility for any and all property damage, hospital, physician, diagnostic, rehabilitation, training, maintenance, medical or pharmaceutical expenses, bills, statements, liens or subrogable interests, of any nature whatsoever, which are or may be outstanding and payable on the date of execution of this Release, or which may be incurred and payable in the future.

FURTHERMORE, the undersigned agrees to resolve any pre-settlement Medicare conditional payments and/or reimbursements demanded or required by the Medicare Secondary Payer Recovery Contractor (MSPRC), CMS, collection agencies, or any other governmental entity, currently known, discovered, or demanded in the future.

FURTHERMORE, the undersigned understands and agrees that this settlement is the compromise of a doubtful and disputed claim, and that the payment made shall not be construed as an admission of liability on the part of the Releasees, and that the Releasees deny any liability therefore and merely intend to avoid further litigation and buy their peace.

FURTHERMORE, the undersigned hereby declares and represents that any injuries sustained may be permanent and progressive and that recovery therefrom is uncertain and indefinite and in making this Release the undersigned understands and agrees that the undersigned relied wholly upon the undersigned's own judgment, belief and knowledge of the nature, extent, effect and duration of any injuries and liability therefore, without reliance upon any statement or representation by the Releasees, or by their representatives or by any physician or surgeon employed by them. The undersigned further declares and represents that no promise, inducement, or agreement not herein expressed has been made to the undersigned, and that this Release contains the entire agreement between the Parties hereto and that the terms of this Agreement are contractual and not merely a recital.

FURTHERMORE, the undersigned states that while he hereby releases any and all claims against the Releasees, and their officers, agents, employees, heirs, executors, administrators, successors and assigns, for both past and future losses related to the Pending Lawsuit and the accident on August 17, 2020, including medical expenses, health care expenses and related

expenses, the necessity for future medical treatment and expenses incurred is speculative and unknown at this time and therefore, as a result, the undersigned reserves the right to pursue and recover all future medical expenses, health care expenses and related expenses, from any person, firm, or organization who may be responsible for payment of such expenses, including any first-party health or automobile insurance coverage, but such reservation specifically <u>does not include</u> the Releasees.

FURTHERMORE, notwithstanding the language contained in this Release, this release shall not be construed as releasing any medical providers for potential claims which may arise based upon treatment and care rendered as a result of the accident which is the subject of this Release. Moreover, this Release shall not be construed as releasing any health insurance carrier or other insurer from medical and lost wage benefits to which the Releasor is entitled.

THE UNDERSIGNED hereby declares that the undersigned has completely read, fully understood and voluntarily accepted the foregoing Release of All Claims for the purpose of making a full and final compromise settlement and adjustment of any and all claims, disputed or otherwise, on account of the injuries and damages set forth above, and for the express purpose of precluding forever any further or additional claims against the Releasees arising out of the aforementioned incident. The undersigned has had the benefit of an attorney with respect to the review and execution of this Release of All Claims and is executing this release on his own free will and accord.

THE UNDERSIGNED hereby accepts the tendered settlement draft as final payment of the consideration set forth above.

IN WITNESS HEREOF, I, AARON LEDERMAN, have hereunto set my hand and seal
this 19th day of OCtober 2022.
IN THE PRESENCE OF: WITNESS SIGNATURE AARON EEDERMAN
(PRINT WITNESSES' NAME)
STATE OF Florida) COUNTY OF St. Lucic)
The foregoing three-page Release of All Claims was acknowledged before me, an officer duly authorized in the State and County aforesaid, to take acknowledgments, this _/ 9 day of
[] is personally known to me; OR [Mas produced, as identification;
and who
did take an oath; OR did not take an oath.
and who executed the above Release of All Claims, and who acknowledged the above Release of All Claims to be freely and voluntarily executed for the purposes therein recited.
[seal] Notary Public State of Florida Heather Vaughn My Commission GG 316514 Expires 03/26/2023 Notary Public My commission expires: 3/26/2023

BUDGET AVAILABILITY STATEMENT RISK MANAGEMENT

REQUEST DATE: <u>11/3/2022</u>

REQUESTED BY: County Attorney

REQUESTED FOR: <u>Aaron Lederman v. Palm Beach County Board of County Commissioners</u>

REQUESTED AMOUNT: \$80,000

AGENDA DATE: November 15, 2022

BUDGET ACCOUNT NUMBER:

FUND: <u>5010</u> DEPT: <u>700</u> UNIT: <u>7130</u> OBJ: <u>4511</u>

BAS APPROVED BY:

DATE: <u>11/3/2022</u>

Brian Palacios, Fiscal Manager