MISSISSIPPI LEGISLATURE

By: Representatives Watson, Blackmon, Eads, Flaggs, Jennings, Civil Justice Reform Masterson, Moak, Pierce, Robinson (63rd), Simpson, Smith (39th), Stevens, Warren

To: Select Committee on

HOUSE BILL NO. (As Sent to Governor)

AN ACT TO AMEND SECTION 11-11-3, MISSISSIPPI CODE OF 1972, TO 1 REVISE VENUE IN MEDICAL MALPRACTICE ACTIONS; TO AMEND SECTION 2 3 11-46-1, MISSISSIPPI CODE OF 1972, TO CLARIFY THAT CERTAIN HEALTH 4 CARE PRACTITIONERS ARE EMPLOYEES UNDER THE TORT CLAIMS ACT; TO CREATE SECTION 11-1-62, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT 5 PHYSICIANS, OPTOMETRISTS, NURSE PRACTITIONERS AND PHYSICIAN 6 ASSISTANTS SHALL BE PROTECTED FOR PRESCRIBING FDA APPROVED DRUGS; 7 TO AMEND SECTION 15-1-36, MISSISSIPPI CODE OF 1972, TO REDUCE THE PERIOD FOR COMMENCING A MALPRACTICE ACTION AGAINST AN INSTITUTION 8 9 10 FOR THE AGED OR INFIRM; TO PROVIDE A SIXTY-DAY NOTICE FOR MEDICAL MALPRACTICE ACTIONS; TO AMEND SECTION 85-5-7, MISSISSIPPI CODE OF 11 1972, TO REVISE THE LIMITATION OF JOINT AND SEVERAL LIABILITY FOR 12 DAMAGES CAUSED BY TWO OR MORE MEDICAL DEFENDANTS; TO REQUIRE 13 AFFIDAVITS IN MEDICAL MALPRACTICE ACTIONS; TO PROVIDE A LIMITATION 14 ON THE AWARD OF NONECONOMIC DAMAGES; TO REQUIRE THE COMMISSIONER OF INSURANCE TO DETERMINE AND REPORT CERTAIN INFORMATION REGARDING 15 16 PHYSICIANS AND THE AVAILABILITY OF MEDICAL MALPRACTICE INSURANCE; 17 TO AMEND SECTION 43-11-1, MISSISSIPPI CODE OF 1972, TO DEFINE THE TERM MEDICAL RECORDS; TO CREATE SECTION 43-11-16, MISSISSIPPI CODE 18 19 OF 1972, TO PROVIDE THAT MEDICAL RECORDS SHALL REMAIN THE PROPERTY 20 OF THE INSTITUTIONS FOR THE AGED AND INFIRM, SUBJECT TO REASONABLE 21 ACCESS TO THE INFORMATION CONTAINED THEREIN UPON REQUEST BY THE 22 RESIDENT, HIS PERSONAL REPRESENTATIVES OR HEIRS; TO PROVIDE 23 IMMUNITY FOR MEDICAL PERSONNEL PROVIDING VOLUNTEER SERVICE TO 24 25 SCHOOL PROGRAMS; AND FOR RELATED PURPOSES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI: 26 27 SECTION 1. Section 11-11-3, Mississippi Code of 1972, is amended as follows: 28

29 11-11-3. (1) Civil actions of which the circuit court has original jurisdiction shall be commenced in the county in which 30 the defendant or any of them may be found or in the county where 31 32 the cause of action may occur or accrue and, if the defendant is a domestic corporation, in the county in which said corporation is 33 domiciled or in the county where the cause of action may occur or 34 accrue, except where otherwise provided, and except actions of 35 trespass on land, ejectment and actions for the statutory penalty 36 37 for cutting and boxing trees and firing woods and actions for the

38 actual value of trees cut which shall be brought in the county 39 where the land or some part thereof is situated.

40 (2) Any action against a licensed physician, osteopath, 41 dentist, nurse, nurse practitioner, physician assistant,

42 psychologist, pharmacist, podiatrist, optometrist, chiropractor,

43 institution for the aged or infirm, hospital or licensed pharmacy,

44 including any legal entity which may be liable for their acts or

45 <u>omissions</u>, for malpractice, negligence, error, omission, mistake,

46 breach of standard of care or the unauthorized rendering of

47 professional services shall be brought in the county in which the

48 alleged act or omission occurred.

49 (3) If a civil action is brought in an improper county, such 50 action may be transferred to the proper county pursuant to Section 51 11-11-17.

52 **SECTION 2.** Section 11-46-1, Mississippi Code of 1972, is 53 amended as follows:

54 11-46-1. As used in this chapter the following terms shall 55 have the meanings herein ascribed unless the context otherwise 56 requires:

57 (a) "Claim" means any demand to recover damages from a58 governmental entity as compensation for injuries.

(b) "Claimant" means any person seeking compensation
under the provisions of this chapter, whether by administrative
remedy or through the courts.

(c) "Board" means the Mississippi Tort Claims Board.
(d) "Department" means the Department of Finance and
Administration.

"Director" means the executive director of the 65 (e) department who is also the executive director of the board. 66 (f) "Employee" means any officer, employee or servant 67 68 of the State of Mississippi or a political subdivision of the 69 state, including elected or appointed officials and persons acting on behalf of the state or a political subdivision in any official 70 H. B. No. 2 023E/HR03/R20SG

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capacity, temporarily or permanently, in the service of the state 71 72 or a political subdivision whether with or without compensation. 73 The term "employee" shall not mean a person or other legal entity 74 while acting in the capacity of an independent contractor under 75 contract to the state or a political subdivision; provided, 76 however, that for purposes of the limits of liability provided for in Section 11-46-15, the term "employee" shall include physicians 77 under contract to provide health services with the State Board of 78 Health, the State Board of Mental Health or any county or 79 80 municipal jail facility while rendering services under such The term "employee" shall also include any physician, 81 contract. 82 dentist or other health care practitioner employed by the 83 University of Mississippi Medical Center (UMMC) and its departmental practice plans who is a faculty member and provides 84 health care services only for patients at UMMC or its affiliated 85 practice sites. The term "employee" shall also include any 86 physician, dentist or other health care practitioner employed by 87 any university under the control of the Board of Trustees of State 88 Institutions of Higher Learning who practices only on the campus 89 90 of any university under the control of the Board of Trustees of State Institutions of Higher Learning. The term "employee" shall 91 also include any physician, dentist or other health care 92 practitioner employed by the State Veterans Affairs Board and who 93 provides health care services for patients for the State Veterans 94 95 Affairs Board. The term "employee" shall also include Mississippi 96 Department of Human Services licensed foster parents for the 97 limited purposes of coverage under the Tort Claims Act as provided in Section 11-46-8. 98

(g) "Governmental entity" means and includes the stateand political subdivisions as herein defined.

(h) "Injury" means death, injury to a person, damage to
or loss of property or any other injury that a person may suffer
that is actionable at law or in equity.

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"Political subdivision" means any body politic or 104 (i) 105 body corporate other than the state responsible for governmental 106 activities only in geographic areas smaller than that of the 107 state, including, but not limited to, any county, municipality, 108 school district, community hospital as defined in Section 41-13-10, Mississippi Code of 1972, airport authority or other 109 instrumentality thereof, whether or not such body or 110 instrumentality thereof has the authority to levy taxes or to sue 111 or be sued in its own name. 112

(j) "State" means the State of Mississippi and any office, department, agency, division, bureau, commission, board, institution, hospital, college, university, airport authority or other instrumentality thereof, whether or not such body or instrumentality thereof has the authority to levy taxes or to sue or be sued in its own name.

(k) "Law" means all species of law including, but not limited to, any and all constitutions, statutes, case law, common law, customary law, court order, court rule, court decision, court opinion, court judgment or mandate, administrative rule or regulation, executive order, or principle or rule of equity.

SECTION 3. The following shall be codified as Section 125 11-1-62, Mississippi Code of 1972:

11-1-62. In any civil action alleging damages caused by a 126 prescription drug that has been approved by the federal Food and 127 128 Drug Administration, a physician, optometrist, nurse practitioner or physician assistant may not be sued unless the plaintiff pleads 129 130 specific facts which, if proven, amount to negligence on the part of the medical provider. It is the intent of this section to 131 immunize innocent medical providers listed in this section who are 132 not actively negligent from forum-driven lawsuits. 133

134 SECTION 4. Section 85-5-7, Mississippi Code of 1972, is 135 amended as follows:

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85-5-7. (1) As used in this section "fault" means an act or 136 omission of a person which is a proximate cause of injury or death 137 to another person or persons, damages to property, tangible or 138 139 intangible, or economic injury, including, but not limited to, 140 negligence, malpractice, strict liability, absolute liability or failure to warn. "Fault" shall not include any tort which results 141 142 from an act or omission committed with a specific wrongful intent. (2) Except as may be otherwise provided in subsections (6) 143 and (8) of this section, in any civil action based on fault, the 144 liability for damages caused by two (2) or more persons shall be 145 146 joint and several only to the extent necessary for the person

147 suffering injury, death or loss to recover fifty percent (50%) of 148 his recoverable damages.

Except as otherwise provided in subsections (2) and (6) 149 (3) 150 of this section, in any civil action based on fault, the liability for damages caused by two (2) or more persons shall be several 151 only, and not joint and several and a joint tort-feasor shall be 152 153 liable only for the amount of damages allocated to him in direct proportion to his percentage of fault. In assessing percentages 154 155 of fault an employer and the employer's employee or a principal and the principal's agent shall be considered as one (1) defendant 156 157 when the liability of such employer or principal has been caused 158 by the wrongful or negligent act or omission of the employee or 159 agent.

(4) Any defendant held jointly liable under this section
shall have a right of contribution against fellow joint
tort-feasors. A defendant shall be held responsible for
contribution to other joint tort-feasors only for the percentage
of fault assessed to such defendant.

165 (5) Nothing in this section shall eliminate or diminish any 166 defenses or immunities which currently exist, except as expressly 167 noted herein.

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(6) Joint and several liability shall be imposed on all who
consciously and deliberately pursue a common plan or design to
commit a tortious act, or actively take part in it. Any person
held jointly and severally liable under this section shall have a
right of contribution from his fellow defendants acting in
concert.

174 (7) In actions involving joint tort-feasors, the trier of
175 fact shall determine the percentage of fault for each party
176 alleged to be at fault.

Except as provided in subsection (6) of this section, in 177 (8) 178 any action against a licensed physician, psychologist, osteopath, dentist, nurse, nurse practitioner, physician assistant, 179 180 pharmacist, podiatrist, optometrist, chiropractor, hospital, institution for the aged or infirm, or licensed pharmacy, 181 including any legal entity which may be liable for their acts or 182 omissions, for malpractice, negligence, error, omission, mistake 183 or the unauthorized rendering of professional services which 184 185 involve joint tort-feasors, the trier of fact shall determine the percentage of fault for each joint tort-feasor, including named 186 187 parties and absent tort-feasors, without regard to whether the joint tort-feasor is immune from damages. For noneconomic 188 damages, a defendant's liability shall be several only. For 189 190 economic damages, for any defendant whose fault is determined to be less than thirty percent (30%), liability shall be several only 191 192 and for any defendant whose fault is determined to be thirty percent (30%) or more, liability shall be joint and several only 193 194 to the extent necessary for the person suffering injury, death or loss to recover fifty percent (50%) of his recoverable damages. 195 Fault allocated under this subsection to an immune tort-feasor or 196 a tort-feasor whose liability is limited by law shall not be 197

198 reallocated to any other tort-feasor.

199 <u>(9)</u> Nothing in this section shall be construed to create a 200 cause of action. Nothing in this section shall be construed, in 201 any way, to alter the immunity of any person.

202 **SECTION 5.** Section 15-1-36, Mississippi Code of 1972, is 203 amended as follows:

204 15-1-36. (1) For any claim accruing on or before June 30, 205 1998, and except as otherwise provided in this section, no claim 206 in tort may be brought against a licensed physician, osteopath, 207 dentist, hospital, institution for the aged or infirm, nurse, pharmacist, podiatrist, optometrist or chiropractor for injuries 208 209 or wrongful death arising out of the course of medical, surgical or other professional services unless it is filed within two (2) 210 211 years from the date the alleged act, omission or neglect shall or with reasonable diligence might have been first known or 212 discovered. 213

For any claim accruing on or after July 1, 1998, and 214 (2) except as otherwise provided in this section, no claim in tort may 215 216 be brought against a licensed physician, osteopath, dentist, hospital, institution for the aged or infirm, nurse, pharmacist, 217 podiatrist, optometrist or chiropractor for injuries or wrongful 218 death arising out of the course of medical, surgical or other 219 220 professional services unless it is filed within two (2) years from the date the alleged act, omission or neglect shall or with 221 reasonable diligence might have been first known or discovered, 222 223 and, except as described in paragraphs (a) and (b) of this subsection, in no event more than seven (7) years after the 224 225 alleged act, omission or neglect occurred:

(a) In the event a foreign object introduced during a
surgical or medical procedure has been left in a patient's body,
the cause of action shall be deemed to have first accrued at, and
not before, the time at which the foreign object is, or with
reasonable diligence should have been, first known or discovered
to be in the patient's body.

H. B. No. 2 023E/HR03/R20SG PAGE 7 (CJR\LH) (b) In the event the cause of action shall have been fraudulently concealed from the knowledge of the person entitled thereto, the cause of action shall be deemed to have first accrued at, and not before, the time at which such fraud shall be, or with reasonable diligence should have been, first known or discovered.

Except as otherwise provided in subsection (4) of this 237 (3) section, if at the time at which the cause of action shall or with 238 reasonable diligence might have been first known or discovered, 239 the person to whom such claim has accrued shall be six (6) years 240 of age or younger, then such minor or the person claiming through 241 242 such minor may, notwithstanding that the period of time limited pursuant to subsections (1) and (2) of this section shall have 243 expired, commence action on such claim at any time within two (2) 244 245 years next after the time at which the minor shall have reached his sixth birthday, or shall have died, whichever shall have first 246 247 occurred.

(4) If at the time at which the cause of action shall or 248 249 with reasonable diligence might have been first known or 250 discovered, the person to whom such claim has accrued shall be a 251 minor without a parent or legal guardian, then such minor or the 252 person claiming through such minor may, notwithstanding that the 253 period of time limited pursuant to subsections (1) and (2) of this section shall have expired, commence action on such claim at any 254 time within two (2) years next after the time at which the minor 255 256 shall have a parent or legal guardian or shall have died, whichever shall have first occurred; provided, however, that in no 257 258 event shall the period of limitation begin to run prior to such 259 minor's sixth birthday unless such minor shall have died.

(5) If at the time at which the cause of action shall or with reasonable diligence might have been first known or discovered, the person to whom such claim has accrued shall be under the disability of unsoundness of mind, then such person or the person claiming through him may, notwithstanding that the

H. B. No. 2 023E/HR03/R20SG PAGE 8 (CJR\LH) period of time hereinbefore limited shall have expired, commence action on such claim at any time within two (2) years next after the time at which the person to whom the right shall have first accrued shall have ceased to be under the disability, or shall have died, whichever shall have first occurred.

(6) When any person who shall be under the disabilities mentioned in subsections (3), (4) and (5) of this section at the time at which his right shall have first accrued, shall depart this life without having ceased to be under such disability, no time shall be allowed by reason of the disability of such person to commence action on the claim of such person beyond the period prescribed under Section 15-1-55, Mississippi Code of 1972.

(7) For the purposes of subsection (3) of this section, and only for the purposes of such subsection, the disability of infancy or minority shall be removed from and after a person has reached his sixth birthday.

(8) For the purposes of subsection (4) of this section, and only for the purposes of such subsection, the disability of infancy or minority shall be removed from and after a person has reached his sixth birthday or from and after such person shall have a parent or legal guardian, whichever occurs later, unless such disability is otherwise removed by law.

(9) The limitation established by this section as to a
licensed physician, osteopath, dentist, hospital or nurse shall
apply only to actions the cause of which accrued on or after July
1, 1976.

(10) The limitation established by this section as to pharmacists shall apply only to actions the cause of which accrued on or after July 1, 1978.

(11) The limitation established by this section as to
 podiatrists shall apply only to actions the cause of which accrued
 on or after July 1, 1979.

H. B. No. 2 023E/HR03/R20SG PAGE 9 (CJR\LH) (12) The limitation established by this section as to optometrists and chiropractors shall apply only to actions the cause of which accrued on or after July 1, 1983.

(13) The limitation established by this section as to
actions commenced on behalf of minors shall apply only to actions
the cause of which accrued on or after July 1, 1989.

303 <u>(14) The limitation established by this section as to</u> 304 <u>institutions for the aged or infirm shall apply only to actions</u> 305 the cause of which occurred on or after January 1, 2003.

No action based upon the health care provider's 306 (15) 307 professional negligence may be begun unless the defendant has been given at least sixty (60) days' prior written notice of the 308 309 intention to begin the action. No particular form of notice is required, but it shall notify the defendant of the legal basis of 310 the claim and the type of loss sustained, including with 311 specificity the nature of the injuries suffered. If the notice is 312 served within sixty (60) days prior to the expiration of the 313 314 applicable statute of limitations, the time for the commencement of the action shall be extended sixty (60) days from the service 315 316 of the notice for said health care providers and others. This subsection shall not be applicable with respect to any defendant 317 318 whose name is unknown to the plaintiff at the time of filing the complaint and who is identified therein by a fictitious name. 319

SECTION 6. In any action against a licensed physician, 320 (1) 321 health care provider or health care practitioner for injuries or wrongful death arising out of the course of medical, surgical or 322 other professional services where expert testimony is otherwise 323 required by law, the complaint shall be accompanied by a 324 certificate executed by the attorney for the plaintiff declaring 325 326 that:

327 (a) The attorney has reviewed the facts of the case and 328 has consulted with at least one (1) expert qualified pursuant to 329 the Mississippi Rules of Civil Procedure and the Mississippi Rules

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of Evidence who is qualified to give expert testimony as to standard of care or negligence and who the attorney reasonably believes is knowledgeable in the relevant issues involved in the particular action, and that the attorney has concluded on the basis of such review and consultation that there is a reasonable basis for the commencement of such action; or

(b) The attorney was unable to obtain the consultation 336 required by paragraph (a) of this subsection because a limitation 337 of time established by Section 15-1-36 would bar the action and 338 that the consultation could not reasonably be obtained before such 339 340 time expired. A certificate executed pursuant to this paragraph (b) shall be supplemented by a certificate of consultation 341 342 pursuant to paragraph (a) or (c) within sixty (60) days after 343 service of the complaint or the suit shall be dismissed; or

(c) The attorney was unable to obtain the consultation
required by paragraph (a) of this subsection because the attorney
had made at least three (3) separate good faith attempts with
three (3) different experts to obtain a consultation and that none
of those contacted would agree to a consultation.

349 (2) Where a certificate is required pursuant to this section
350 only, a single certificate is required for an action, even if more
351 than one (1) defendant has been named in the complaint or is
352 subsequently named.

(3) A certificate under subsection (1) of this section is not required where the attorney intends to rely solely on either the doctrine of "res ipsa loquitur" or "informed consent." In such cases, the complaint shall be accompanied by a certificate executed by the attorney declaring that the attorney is solely relying on such doctrine and, for that reason, is not filing a certificate under subsection (1) of this section.

360 (4) If a request by the plaintiff for the records of the
361 plaintiff's medical treatment by the defendants has been made and
362 the records have not been produced, the plaintiff shall not be

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363 required to file the certificate required by this section until 364 ninety (90) days after the records have been produced.

(5) For purposes of this section, an attorney who submits a 365 366 certificate of consultation shall not be required to disclose the 367 identity of the consulted or the contents of the consultation; provided, however, that when the attorney makes a claim under 368 paragraph (c) of subsection (1) of this section that he was unable 369 370 to obtain the required consultation with an expert, the court, upon the request of a defendant made prior to compliance by the 371 plaintiff with the provisions of this section, may require the 372 attorney to divulge to the court, in camera and without any 373 374 disclosure by the court to any other party, the names of physicians refusing such consultation. 375

376 (6) The provisions of this section shall not apply to a377 plaintiff who is not represented by an attorney.

(7) The plaintiff, in lieu of serving a certificate required by this section, may provide the defendant or defendants with expert information in the form required by the Mississippi Rules of Civil Procedure. Nothing in this section requires the disclosure of any "consulting" or nontrial expert, except as expressly stated herein.

384 **SECTION 7.** (1) For the purposes of this section, the 385 following words and phrases shall have the meanings ascribed 386 herein unless the context clearly requires otherwise:

387 (a) "Noneconomic damages" means subjective, nonpecuniary damages arising from death, pain, suffering, 388 inconvenience, mental anguish, worry, emotional distress, loss of 389 390 society and companionship, loss of consortium, bystander injury, 391 physical impairment, injury to reputation, humiliation, 392 embarrassment, loss of the enjoyment of life, hedonic damages, other nonpecuniary damages, and any other theory of damages such 393 394 as fear of loss, illness or injury. The term "noneconomic

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395 damages" shall not include damages for disfigurement, nor does it 396 include punitive or exemplary damages.

"Actual economic damages" means objectively 397 (b) 398 verifiable pecuniary damages arising from medical expenses and 399 medical care, rehabilitation services, custodial care, disabilities, loss of earnings and earning capacity, loss of 400 401 income, burial costs, loss of use of property, costs of repair or 402 replacement of property, costs of obtaining substitute domestic services, loss of employment, loss of business or employment 403 opportunities, and other objectively verifiable monetary losses. 404

(c) "Provider of health care" means a licensed
physician, psychologist, osteopath, dentist, nurse, nurse
practitioner, physician assistant, pharmacist, podiatrist,
optometrist, chiropractor, institution for the aged or infirm,
hospital, licensed pharmacy or any legal entity which may be
liable for their acts or omissions.

(2) (a) In any action for injury based on malpractice or breach of standard of care against a provider of health care, including institutions for the aged or infirm, in the event the trier of fact finds the defendant liable, they shall not award the plaintiff more than the following for noneconomic damages:

(i) For claims for causes of action filed on or after passage of House Bill No. 2, 3rd Extraordinary Session 2002, but before July 1, 2011, the sum of Five Hundred Thousand Dollars (\$500,000.00);

420 (ii) For claims for causes of action filed on or
421 after July 1, 2011, but before July 1, 2017, the sum of Seven
422 Hundred Fifty Thousand Dollars (\$750,000.00);

423 (iii) For claims for causes of action filed on or
424 after July 1, 2017, the sum of One Million Dollars
425 (\$1,000,000.00).

426 It is the intent of this section to limit all noneconomic 427 damages to the above.

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The trier of fact shall not be advised of the 428 (b) 429 limitations imposed by this subsection (2) and the judge shall appropriately reduce any award of noneconomic damages that exceeds 430 431 the applicable limitation.

432 (3) The limitation on noneconomic damages set forth in 433 subsection (2) shall not apply in cases where the judge determines that a jury may impose punitive damages. 434

(4) Nothing in this section shall be construed to impose a 435 436 limitation on damages for disfigurement or actual economic 437 damages.

438 SECTION 8. The Commissioner of Insurance shall determine the number of physicians licensed by and practicing in the State of 439 440 Mississippi who are unable to obtain medical malpractice 441 insurance, and the commissioner shall report such information and 442 other information that the commissioner determines which impacts 443 the medical profession to the Legislature on or before January 5, The commissioner shall make recommendations to the 444 2003. 445 Legislature on or before January 5, 2003, concerning the establishment of an actuarially sound joint underwriting medical 446 447 malpractice association for the purpose of making necessary medical malpractice insurance available for physicians, registered 448 449 nurses and all other personnel who are duly licensed to practice 450 in a hospital, hospitals, nursing facilities or assisted living facilities. The need and funding for such association shall be 451 452 determined by the Legislature.

SECTION 9. Section 43-11-1, Mississippi Code of 1972, is 453 454 amended as follows:

455 43-11-1. When used in this chapter, the following words shall have the following meaning: 456

457 "Institutions for the aged or infirm" means a place (a) 458 either governmental or private which provides group living 459 arrangements for four (4) or more persons who are unrelated to the 460 operator and who are being provided food, shelter and personal

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care whether any such place be organized or operated for profit or 461 The term "institution for aged or infirm" includes nursing 462 not. homes, pediatric skilled nursing facilities, psychiatric 463 464 residential treatment facilities, convalescent homes and homes for 465 the aged, provided that these institutions fall within the scope 466 of the definitions set forth above. The term "institution for the aged or infirm" does not include hospitals, clinics or mental 467 institutions devoted primarily to providing medical service. 468

(b) "Person" means any individual, firm, partnership,
corporation, company, association or joint stock association, or
any licensee herein or the legal successor thereof.

(c) "Personal care" means assistance rendered by personnel of the home to aged or infirm residents in performing one or more of the activities of daily living, which includes, but is not limited to, the bathing, walking, excretory functions, feeding, personal grooming and dressing of such residents.

(d) "Psychiatric residential treatment facility" means
any nonhospital establishment with permanent facilities which
provides a twenty-four-hour program of care by qualified
therapists, including, but not limited to, duly licensed mental
health professionals, psychiatrists, psychologists,

482 psychotherapists and licensed certified social workers, for emotionally disturbed children and adolescents referred to such 483 facility by a court, local school district or by the Department of 484 485 Human Services, who are not in an acute phase of illness requiring the services of a psychiatric hospital, and are in need of such 486 487 restorative treatment services. For purposes of this paragraph, the term "emotionally disturbed" means a condition exhibiting one 488 or more of the following characteristics over a long period of 489 time and to a marked degree, which adversely affects educational 490 491 performance:

492 1. An inability to learn which cannot be explained493 by intellectual, sensory or health factors;

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An inability to build or maintain satisfactory 494 2. 495 relationships with peers and teachers; Inappropriate types of behavior or feelings 496 3. 497 under normal circumstances; 498 4. A general pervasive mood of unhappiness or 499 depression; or 500 A tendency to develop physical symptoms or 5. fears associated with personal or school problems. 501 An establishment furnishing primarily domiciliary care is not within 502 this definition. 503 "Pediatric skilled nursing facility" means an 504 (e) 505 institution or a distinct part of an institution that is primarily 506 engaged in providing to inpatients skilled nursing care and 507 related services for persons under twenty-one (21) years of age 508 who require medical or nursing care or rehabilitation services for the rehabilitation of injured, disabled or sick persons. 509 "Licensing agency" means the State Department of 510 (f) 511 Health. (g) "Medical records" mean, without restriction, those 512 513 medical histories, records, reports, summaries, diagnoses and prognoses, records of treatment and medication ordered and given, 514 515 notes, entries, x-rays and other written or graphic data prepared, 516 kept, made or maintained in institutions for the aged or infirm that pertain to residency in, or services rendered to residents 517 518 of, an institution for the aged or infirm. SECTION 10. The following shall be codified as Section 519 43-11-16, Mississippi Code of 1972: 520 43-11-16. Medical records are and shall remain the property 521 of the various institutions for the aged or infirm, subject, 522 523 however, to reasonable access to the information contained therein upon written request by the resident, his legally appointed 524 525 representatives, his attending medical personnel and his duly 526 authorized nominees, and upon payment of any reasonable charges H. B. No. 2

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for such service. Nothing in this section shall be construed to 527 deny access to medical records by the Attorney General, the 528 licensing agency, or his or its agents and investigators in the 529 530 discharge of their official duties under this chapter. Except as 531 otherwise provided by law, medical records shall not constitute 532 public records and nothing in this section shall be deemed to impair any privilege of confidence conferred by law or the 533 Mississippi Rules of Evidence on residents, their personal 534 representatives or heirs by Section 13-1-21. 535

SECTION 11. (1) Any licensed physician, certified nurse 536 537 practitioner, psychologist or physician assistant who voluntarily provides needed medical or health services to any program at an 538 accredited school in the state without the expectation of payment 539 540 shall be immune from liability for any civil action arising out of 541 the provision of such medical or health services provided in good faith on a charitable basis. This section shall not extend 542 immunity to willful acts or gross negligence. Except in cases of 543 544 rendering emergency care wherein the provisions of Section 545 73-25-37, Mississippi Code of 1972, apply, immunity under this 546 section shall be extended only if the physician, certified nurse practitioner, psychologist or physician assistant and patient 547 548 execute a written waiver in advance of the rendering of such 549 medical services specifying that such services are provided without the expectation of payment and that the licensed physician 550 551 or certified nurse practitioner, psychologist or physician assistant shall be immune as provided herein. 552

(2) Any physician who voluntarily renders any medical service under a special volunteer medical license authorized under Section 73-25-18 without any payment or compensation or the expectation or promise of any payment or compensation shall be immune from liability for any civil action arising out of any act or omission resulting from the rendering of the medical service unless the act or omission was the result of the physician's gross

H. B. No. 2 023E/HR03/R20SG PAGE 17 (CJR\LH) 560 negligence or willful misconduct. In order for the immunity under 561 this subsection to apply, there must be a written or oral 562 agreement for the physician to provide a voluntary noncompensated 563 medical service before the rendering of the service by the 564 physician.

565 **SECTION 12.** If any provision of this act is held by a court 566 to be invalid, such invalidity shall not affect the remaining 567 provisions of this act, and to this end the provisions of this act 568 are declared severable.

569 **SECTION 13**. This act shall take effect and be in force from 570 and after January 1, 2003, and shall apply to all causes of action 571 filed on or after that date.