By: Representative Watson

To: Select Committee on Civil Justice Reform

## HOUSE BILL NO. 3

AN ACT TO AMEND SECTIONS 11-11-3, MISSISSIPPI CODE OF 1972, TO REVISE VENUE IN MEDICAL MALPRACTICE ACTIONS; TO AMEND SECTION 1 2 11-46-1, MISSISSIPPI CODE OF 1972, TO CLARIFY THAT CERTAIN MEDICAL PRACTITIONERS ARE EMPLOYEES UNDER THE TORT CLAIMS ACT; TO CREATE SECTION 11-1-62, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT 3 4 5 6 PHYSICIANS AND PHARMACISTS SHALL BE INDEMNIFIED FOR PRESCRIBING FDA APPROVED DRUGS; TO AMEND SECTION 11-1-63, MISSISSIPPI CODE OF 1972, IN CONFORMITY THERETO; TO AMEND SECTION 15-1-36, MISSISSIPPI CODE OF 1972, TO REDUCE THE PERIOD FOR COMMENCING A MALPRACTICE 7 8 9 ACTION AGAINST A NURSING FACILITY; TO PROVIDE A NINETY-DAY NOTICE 10 FOR MEDICAL MALPRACTICE ACTIONS; TO AMEND SECTION 85-5-7, 11 MISSISSIPPI CODE OF 1972, TO PROVIDE THAT MEDICAL PRACTITIONERS 12 COVERED UNDER THE TORT CLAIMS ACT ARE ONLY LIABLE FOR THE PERCENTAGE OF THEIR FAULT IN CIVIL ACTIONS; TO REQUIRE AFFIDAVITS 13 14 IN MEDICAL MALPRACTICE ACTIONS; TO PROVIDE A LIMITATION ON THE 15 AWARD OF NONECONOMIC DAMAGES; TO CREATE A MEDICAL MALPRACTICE RISK 16 17 POOL TO PROVIDE NECESSARY MEDICAL MALPRACTICE FOR CERTAIN HEALTH CARE PROVIDERS; TO AMEND SECTION 43-13-407, MISSISSIPPI CODE OF 18 1972, TO PROVIDE INITIAL FUNDING FOR THE MEDICAL MALPRACTICE RISK 19 20 POOL; TO AMEND SECTION 43-11-1, MISSISSIPPI CODE OF 1972, TO DEFINE THE TERM MEDICAL RECORDS; TO CREATE SECTION 43-11-16, 21 MISSISSIPPI CODE OF 1972, TO PROVIDE THAT MEDICAL RECORDS SHALL REMAIN THE PROPERTY OF THE INSTITUTIONS FOR THE AGED AND INFIRM, 22 23 SUBJECT TO REASONABLE ACCESS TO THE INFORMATION CONTAINED THEREIN 24 25 UPON GOOD CAUSE SHOWN BY THE RESIDENT, HIS PERSONAL REPRESENTATIVES OR HEIRS; TO CREATE THE MEDICAL MALPRACTICE 26 MEDIATION BOARD AND PROVIDE FOR ITS MEMBERSHIP; TO PROVIDE FOR 27 MEDIATION FOR MEDICAL MALPRACTICE AND NURSING FACILITY DISPUTES; 28 TO PROVIDE FOR THE APPOINTMENT AND CERTIFICATION OF MEDIATORS; TO 29 PROVIDE THAT MEDIATION SHALL BE NONBINDING UNLESS THE PARTIES 30 AGREE TO MAKE IT BINDING; TO REQUIRE THE COMMISSIONER OF INSURANCE TO ANNUALLY COMPILE AND PROVIDE TO THE LEGISLATURE A REPORT 31 32 REGARDING MEDICAL MALPRACTICE CLAIMS; TO PROVIDE INCENTIVE FOR 33 MEDICAL SCHOOL GRADUATES TO PRACTICE IN THE STATE; TO PROVIDE 34 IMMUNITY FOR MEDICAL PERSONNEL PROVIDING VOLUNTEER SERVICE TO 35 SCHOOL PROGRAMS; AND FOR RELATED PURPOSES. 36

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BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

38 SECTION 1. Section 11-11-3, Mississippi Code of 1972, is

39 amended as follows:

40 11-11-3. (1) Civil actions of which the circuit court has 41 original jurisdiction shall be commenced in the county in which 42 the defendant or any of them may be found or in the county where 43 the cause of action may occur or accrue and, if the defendant is a 44 domestic corporation, in the county in which said corporation is

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domiciled or in the county where the cause of action may occur or 45 46 accrue, except where otherwise provided, and except actions of trespass on land, ejectment and actions for the statutory penalty 47 for cutting and boxing trees and firing woods and actions for the 48 49 actual value of trees cut which shall be brought in the county where the land or some part thereof is situated. If a civil 50 action is brought in an improper county, such action may be 51 transferred to the proper county pursuant to Section 11-11-17. 52

53 (2) Civil actions for claims of medical malpractice shall be
54 commenced in the county where the cause of action occurred.
55 SECTION 2. Section 11-46-1, Mississippi Code of 1972, is

56 amended as follows:

57 11-46-1. As used in this chapter the following terms shall 58 have the meanings herein ascribed unless the context otherwise 59 requires:

60 (a) "Claim" means any demand to recover damages from a61 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.

(e) "Director" means the executive director of thedepartment who is also the executive director of the board.

"Employee" means any officer, employee or servant 70 (f) 71 of the State of Mississippi or a political subdivision of the state, including elected or appointed officials and persons acting 72 on behalf of the state or a political subdivision in any official 73 capacity, temporarily or permanently, in the service of the state 74 or a political subdivision whether with or without compensation. 75 76 The term "employee" shall not mean a person or other legal entity 77 while acting in the capacity of an independent contractor under

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contract to the state or a political subdivision; provided, 78 79 however, that for purposes of the limits of liability provided for in Section 11-46-15, the term "employee" shall include physicians 80 under contract to provide health services with the State Board of 81 82 Health, the State Board of Mental Health or any county or municipal jail facility while rendering services under such 83 The term "employee" shall also include any physician, 84 contract. dentist or other medical practitioner under contract or affiliated 85 with or employed by the University of Mississippi Medical Center, 86 its departmental practice plans, or who practices on the campus of 87 any university under the control of the Board of Trustees of State 88 89 Institutions of Higher Learning only for the purposes of acting 90 within the course and scope of their contract, affiliation or employment. The term "employee" shall also include any physician, 91 dentist or other medical practitioner under contract or affiliated 92 with or employed by the State Veterans Affairs Board only for the 93 purposes of acting within the course and scope of their contract, 94 affiliation or employment. The term "employee" shall also include 95 Mississippi Department of Human Services licensed foster parents 96 97 for the 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.

(i) "Political subdivision" means any body politic or
body corporate other than the state responsible for governmental
activities only in geographic areas smaller than that of the
state, including but not limited to any county, municipality,
school district, community hospital as defined in Section
41-13-10, Mississippi Code of 1972, airport authority or other
instrumentality thereof, whether or not such body or

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111 instrumentality thereof has the authority to levy taxes or to sue 112 or be sued in its own name.

(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:

<u>11-1-62.</u> In any civil action alleging damages caused by a 126 prescription drug and absent any negligence on the part of the 127 128 physician or pharmacist, a physician or pharmacist shall be indemnified by the manufacturer of the prescription drug for any 129 130 damages if the federal Food and Drug Administration (FDA) has approved that drug for treatment of the condition, disease or 131 132 illness for which the drug was prescribed. It is the intent of 133 this section to indemnify innocent physicians and pharmacists who are not actively negligent from forum-driven lawsuits and that, as 134 135 to any claim brought against a physician under this section, the physician's insurer shall not count such claim against the 136 137 physician for the purposes of insurance underwriting or, in any way, increase premiums for or deny insurance coverage. 138

139 SECTION 4. Section 11-1-63, Mississippi Code of 1972, is 140 amended as follows:

141 11-1-63. In any action for damages caused by a product 142 except for commercial damage to the product itself:

H. B. No. 3 023E/HR40/R21.1 PAGE 4 (CJR\BD) (a) <u>Subject to the provisions of Section 11-1-62</u>, the
manufacturer, seller, <u>distributor or prescriber</u> of the product
shall not be liable if the claimant does not prove by the
preponderance of the evidence that at the time the product left
the control of the manufacturer, seller, <u>distributor or</u>
prescriber:

(i) 1. The product was defective because it
deviated in a material way from the manufacturer's specifications
or from otherwise identical units manufactured to the same
manufacturing specifications, or

153 2. The product was defective because it154 failed to contain adequate warnings or instructions, or

1553. The product was designed in a defective156manner, or

157 4. The product breached an express warranty
158 or failed to conform to other express factual representations upon
159 which the claimant justifiably relied in electing to use the
160 product; and

161 (ii) The defective condition rendered the product162 unreasonably dangerous to the user or consumer; and

(iii) The defective and unreasonably dangerous
condition of the product proximately caused the damages for which
recovery is sought.

(b) A product is not defective in design or formulation if the harm for which the claimant seeks to recover compensatory damages was caused by an inherent characteristic of the product which is a generic aspect of the product that cannot be eliminated without substantially compromising the product's usefulness or desirability and which is recognized by the ordinary person with the ordinary knowledge common to the community.

(c) (i) In any action alleging that a product is
defective because it failed to contain adequate warnings or
instructions pursuant to paragraph (a) (i) 2 of this section, the

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manufacturer, seller, distributor or prescriber shall not be 176 177 liable if the claimant does not prove by the preponderance of the evidence that at the time the product left the control of the 178 179 manufacturer, seller, distributor or prescriber, the manufacturer, 180 seller, distributor or prescriber knew or in light of reasonably 181 available knowledge should have known about the danger that caused the damage for which recovery is sought and that the ordinary user 182 or consumer would not realize its dangerous condition. 183

(ii) An adequate product warning or instruction is 184 one that a reasonably prudent person in the same or similar 185 186 circumstances would have provided with respect to the danger and that communicates sufficient information on the dangers and safe 187 188 use of the product, taking into account the characteristics of, and the ordinary knowledge common to an ordinary consumer who 189 purchases the product; or in the case of a prescription drug, 190 medical device or other product that is intended to be used only 191 under the supervision of a physician or other licensed 192 193 professional person, taking into account the characteristics of, and the ordinary knowledge common to, a physician or other 194 195 licensed professional who prescribes the drug, device or other 196 product.

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(d) For purposes of this section:

198(i) "Seller" means any person or entity that sells199products of any kind.

200 <u>(ii)</u> "Prescriber" means any person licensed by the 201 <u>State of Mississippi to prescribe medicine.</u>

(e) In any action alleging that a product is defective pursuant to paragraph (a) of this section, the manufacturer, seller, distributor or prescriber shall not be liable if the claimant (i) had knowledge of a condition of the product that was inconsistent with his safety; (ii) appreciated the danger in the condition; and (iii) deliberately and voluntarily chose to expose

H. B. No. 3 023E/HR40/R21.1 PAGE 6 (CJR\BD) 208 himself to the danger in such a manner to register assent on the 209 continuance of the dangerous condition.

In any action alleging that a product is defective 210 (f) 211 pursuant to paragraph (a)(i)2 of this section, the manufacturer, 212 seller, distributor or prescriber shall not be liable if the danger posed by the product is known or is open and obvious to the 213 user or consumer of the product, or should have been known or open 214 and obvious to the user or consumer of the product, taking into 215 account the characteristics of, and the ordinary knowledge common 216 to, the persons who ordinarily use or consume the product. 217

(g) In any action alleging that a product is defective because of its design pursuant to paragraph (a)(i)3 of this section, the manufacturer or product seller shall not be liable if the claimant does not prove by the preponderance of the evidence that at the time the product left the control of the manufacturer or seller:

(i) The manufacturer, seller, distributor or <u>prescriber</u> knew, or in light of reasonably available knowledge or in the exercise of reasonable care should have known, about the danger that caused the damage for which recovery is sought; and (ii) The product failed to function as expected

and there existed a feasible design alternative that would have to a reasonable probability prevented the harm. A feasible design alternative is a design that would have to a reasonable probability prevented the harm without impairing the utility, usefulness, practicality or desirability of the product to users or consumers.

(h) (i) The manufacturer of a product who is found liable for a defective product pursuant to subsection (a) shall indemnify a product seller, distributor or prescriber for the costs of litigation, any reasonable expenses, reasonable attorney's fees and any damages awarded by the trier of fact unless the seller, distributor or prescriber exercised substantial

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control over that aspect of the design, testing, manufacture, 241 packaging or labeling of the product that caused the harm for 242 which recovery of damages is sought; the seller, distributor or 243 prescriber altered or modified the product, and the alteration or 244 245 modification was a substantial factor in causing the harm for 246 which recovery of damages is sought; the seller, distributor or prescriber had actual knowledge of the defective condition of the 247 product at the time he supplied same; or the seller, distributor 248 or prescriber made an express factual representation about the 249 aspect of the product which caused the harm for which recovery of 250 251 damages is sought.

(ii) Subparagraph (i) shall not apply unless the
seller, distributor or prescriber has given prompt notice of the
suit to the manufacturer within thirty (30) days of the filing of
the complaint against the seller.

(i) <u>An agent or employee of a disclosed principal who</u>
directly participates in or authorizes the commission of a tort
shall be subject to liability for any tortious conduct committed
within the course and scope of employment.

260 <u>(j)</u> Nothing in this section shall be construed to 261 eliminate any common law defense to an action for damages caused 262 by a product.

263 **SECTION 5.** Section 15-1-36, Mississippi Code of 1972, is 264 amended as follows:

265 15-1-36. (1) For any claim accruing on or before June 30, 1998, and except as otherwise provided in this section, no claim 266 in tort may be brought against a licensed physician, osteopath, 267 dentist, hospital, nursing facility, nurse, pharmacist, 268 podiatrist, optometrist or chiropractor for injuries or wrongful 269 270 death arising out of the course of medical, surgical or other professional services unless it is filed within two (2) years from 271 272 the date the alleged act, omission or neglect shall or with reasonable diligence might have been first known or discovered. 273

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For any claim accruing on or after July 1, 1998, and 274 (2) except as otherwise provided in this section, no claim in tort may 275 be brought against a licensed physician, osteopath, dentist, 276 277 hospital, nursing facility, nurse, pharmacist, podiatrist, 278 optometrist or chiropractor for injuries or wrongful death arising out of the course of medical, surgical or other professional 279 280 services unless it is filed within two (2) years from the date the 281 alleged act, omission or neglect shall or with reasonable diligence might have been first known or discovered, and, except 282 as described in paragraphs (a) and (b) of this subsection, in no 283 284 event more than seven (7) years after the alleged act, omission or neglect occurred: 285

(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.

(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 297 (3) 298 section, if at the time at which the cause of action shall or with reasonable diligence might have been first known or discovered, 299 the person to whom such claim has accrued shall be six (6) years 300 of age or younger, then such minor or the person claiming through 301 such minor may, notwithstanding that the period of time limited 302 303 pursuant to subsections (1) and (2) of this section shall have expired, commence action on such claim at any time within two (2) 304 305 years next after the time at which the minor shall have reached

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306 his sixth birthday, or shall have died, whichever shall have first 307 occurred.

(4) If at the time at which the cause of action shall or 308 309 with reasonable diligence might have been first known or 310 discovered, the person to whom such claim has accrued shall be a 311 minor without a parent or legal guardian, then such minor or the person claiming through such minor may, notwithstanding that the 312 period of time limited pursuant to subsections (1) and (2) of this 313 section shall have expired, commence action on such claim at any 314 time within two (2) years next after the time at which the minor 315 316 shall have a parent or legal guardian or shall have died, whichever shall have first occurred; provided, however, that in no 317 318 event shall the period of limitation begin to run prior to such minor's sixth birthday unless such minor shall have died. 319

If at the time at which the cause of action shall or (5) 320 with reasonable diligence might have been first known or 321 discovered, the person to whom such claim has accrued shall be 322 323 under the disability of unsoundness of mind, then such person or the person claiming through him may, notwithstanding that the 324 period of time hereinbefore limited shall have expired, commence 325 action on such claim at any time within two (2) years next after 326 327 the time at which the person to whom the right shall have first accrued shall have ceased to be under the disability, or shall 328 have died, whichever shall have first occurred. 329

(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.

337 (7) For the purposes of subsection (3) of this section, and338 only for the purposes of such subsection, the disability of

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339 infancy or minority shall be removed from and after a person has 340 reached his sixth birthday.

341 (8) For the purposes of subsection (4) of this section, and 342 only for the purposes of such subsection, the disability of 343 infancy or minority shall be removed from and after a person has 344 reached his sixth birthday or from and after such person shall 345 have a parent or legal guardian, whichever occurs later, unless 346 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.

357 (12) The limitation established by this section as to
358 optometrists and chiropractors shall apply only to actions the
359 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.

363 (14) The limitation established by this section as to 364 nursing facilities shall apply only to actions the cause of which 365 accrued after the passage of House Bill No. \_\_\_\_\_, Third 366 Extraordinary Session of 2002.

367 (15) No action based upon the health care provider's 368 professional negligence may be begun unless the defendant has been 369 given at least ninety (90) days' prior notice of the intention to 370 begin the action. No particular form of notice is required, but 371 it shall notify the defendant of the legal basis of the claim and H. B. No. 3 023E/HR40/R21.1 PAGE 11 (CJR\BD)

the type of loss sustained, including with specificity the nature 372 of the injuries suffered. If the notice is served within ninety 373 (90) days of the expiration of the applicable statute of 374 375 limitations, the time for the beginning of the action shall be 376 extended ninety (90) days from the service of the notice. This 377 subsection shall not be applicable with respect to any defendant whose name is unknown to the plaintiff at the time of filing the 378 complaint and who is identified therein by a fictitious name. 379

380 SECTION 6. Section 85-5-7, Mississippi Code of 1972, is 381 amended as follows:

85-5-7. (1) As used in this section "fault" means an act or omission of a person which is a proximate cause of injury or death to another person or persons, damages to property, tangible or intangible, or economic injury, including but not limited to negligence, malpractice, strict liability, absolute liability or failure to warn. "Fault" shall not include any tort which results from an act or omission committed with a specific wrongful intent.

(2) Except as may be otherwise provided in <u>subsections</u> (6) and (8) of this section, in any civil action based on fault, the liability for damages caused by two (2) or more persons shall be joint and several only to the extent necessary for the person suffering injury, death or loss to recover fifty percent (50%) of his recoverable damages.

Except as otherwise provided in subsections (2) and (6) 395 (3) 396 of this section, in any civil action based on fault, the liability for damages caused by two (2) or more persons shall be several 397 only, and not joint and several and a joint tortfeasor shall be 398 liable only for the amount of damages allocated to him in direct 399 proportion to his percentage of fault. In assessing percentages 400 401 of fault an employer and the employer's employee or a principal and the principal's agent shall be considered as one (1) defendant 402 403 when the liability of such employer or principal has been caused

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404 by the wrongful or negligent act or omission of the employee or 405 agent.

406 (4) Any defendant held jointly liable under this section
407 shall have a right of contribution against fellow joint
408 tortfeasors. A defendant shall be held responsible for
409 contribution to other joint tortfeasors only for the percentage of
410 fault assessed to such defendant.

411 (5) Nothing in this section shall eliminate or diminish any 412 defenses or immunities which currently exist, except as expressly 413 noted herein.

(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.

(7) In actions involving joint tortfeasors, the trier of
fact shall determine the percentage of fault for each party
alleged to be at fault.

(8) <u>Physicians, dentists and other medical practitioners</u>
covered under the provisions of Section 11-46-1 et seq. shall only
be liable for the amount of damages which is the percentage of
fault allocated to such physician, dentist and other medical
practitioners.

428 (9) Nothing in this section shall be construed to create a 429 cause of action. Nothing in this section shall be construed, in 430 any way, to alter the immunity of any person.

431 <u>SECTION 7.</u> Before any action for medical malpractice may be 432 brought, the attorney bringing such action shall sign an affidavit 433 as an officer of the court stating that he has had his case 434 reviewed by a medical expert and the medical expert has determined 435 there is a reasonable basis for the commencement of the action.

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436 <u>SECTION 8.</u> (1) For the purposes of this section, the 437 following words and phrases shall have the meanings ascribed 438 herein unless the context clearly requires otherwise:

439 (a) "Noneconomic damages" means subjective, 440 nonpecuniary damages arising from death, pain, suffering, 441 inconvenience, physical impairment, disfigurement, mental anguish, 442 worry, emotional distress, loss of society and companionship, loss of consortium, bystander injury, injury to reputation, 443 humiliation, loss of the enjoyment of life, hedonic damages, other 444nonpecuniary damages, and any other theory of damages such as fear 445 446 of loss, illness or injury. The term "noneconomic damages" shall

447 not include punitive damages.

"Actual economic damages" means objectively 448 (b) 449 verifiable pecuniary damages arising from medical expenses and 450 medical care, rehabilitation services, custodial care, 451 disabilities, loss of earnings and earning capacity, loss of income, burial costs, loss of use of property, costs of repair of 452 453 replacement of property, costs of obtaining substitute domestic services, loss of employment, loss of business or employment 454 455 opportunities, and other objectively verifiable monetary losses.

(c) "Provider of health care" means an individual
licensed, certified, or otherwise authorized or permitted by law
to provide health care in the ordinary course of business or
practice of a profession.

460 (2)(a) In any action for malpractice, negligence, error, omission, mistake or the unauthorized rendering of professional 461 services against a provider of health care, the court shall 462 instruct the jury that in the event they find the defendant 463 liable, they shall not award the plaintiff more than Five Hundred 464 Thousand Dollars (\$500,000.00) for pain and suffering, loss of 465 companionship, embarrassment and other items of general damages 466 467 unless the judge determines by clear and convincing evidence that 468 there is substantial or permanent loss or impairment of a bodily

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function, death or substantial disfigurement, or other special 469 circumstances in the case which warrant a finding that imposition 470 of such a limitation would deprive the plaintiff of just 471 472 compensation for the injuries sustained. In any such action which 473 is tried without a jury, the court shall not award the plaintiff more than Five Hundred Thousand Dollars (\$500,000.00) for pain and 474 suffering, loss of companionship, embarrassment and other items of 475 general damages unless the aforesaid findings are made specially 476 477 by the court and stated separately in the judgment entered by the It is the intent of this section to limit all noneconomic 478 court. 479 damages to the above.

(b) The limitations on damages set forth in this section shall be adjusted for inflation annually. The adjustment shall be based on the cumulative annual adjustment for inflation for each year since the effective date of the damages limitations in this section. The adjustment made pursuant to this paragraph shall be rounded upward or downward to the nearest increment of Ten Dollars (\$10.00).

(c) As used in this section, "inflation" means the
annual percentage change in the United States Department of Labor,
Bureau of Labor Statistics, Consumer Price Index for the State of
Mississippi, all items, all urban consumers or its successor
index.

(d) The Secretary of State shall certify the adjusted
limitation on damages within fourteen (14) days after the
appropriate information is available.

495 <u>SECTION 9.</u> The Commissioner of Insurance shall establish a 496 medical malpractice risk pool for the purpose of making necessary 497 medical malpractice insurance available for physicians, registered 498 nurses and all other personnel who are duly licensed to practice 499 in a hospital and hospitals. Monies for the initial funding of 500 the Medical Malpractice Risk Pool shall be drawn from the Health 501 Care Expendable Fund established in Section 43-13-407. The

H. B. No. 3 023E/HR40/R21.1 PAGE 15 (CJR\BD) 502 Commissioner of Insurance shall promulgate rules and regulations 503 necessary for the operation of the risk pool.

504 **SECTION 10.** Section 43-13-407, Mississippi Code of 1972, is 505 amended as follows:

43-13-407. (1) In accordance with the purposes of this article, there is established in the State Treasury the Health Care Expendable Fund, into which shall be transferred from the Health Care Trust Fund the following sums:

510 (a) In fiscal year 2000, Fifty Million Dollars511 (\$50,000,000.00);

512 (b) In fiscal year 2001, Fifty-five Million Dollars 513 (\$55,000,000.00);

514 (c) In fiscal year 2002, Sixty Million Five Hundred 515 Thousand Dollars (\$60,500,000.00);

516 (d) In fiscal year 2003, Sixty-six Million Five Hundred517 Fifty Thousand Dollars (\$66,550,000.00);

(e) In fiscal year 2004 and each subsequent fiscal year, a sum equal to the average annual amount of the income from the investment of the funds in the Health Care Trust Fund since July 1, 1999.

(2) In any fiscal year in which interest and dividends from the investment of the funds in the Health Care Trust Fund are not sufficient to fund the full amount of the annual transfer into the Health Care Expendable Fund as required in subsection (1) of this section, the State Treasurer shall transfer from tobacco settlement installment payments an amount that is sufficient to fully fund the amount of the annual transfer.

(3) (a) On March 6, 2002, the State Treasurer shall
transfer the sum of Eighty-seven Million Dollars (\$87,000,000.00)
from the Health Care Trust Fund into the Health Care Expendable
Fund. In addition, at the time the State of Mississippi receives
the 2002 calendar year tobacco settlement installment payment, the

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534 State Treasurer shall deposit the full amount of that installment 535 payment into the Health Care Expendable Fund.

If during any fiscal year after March 6, 2002, the 536 (b) 537 general fund revenues received by the state exceed the general 538 fund revenues received during the previous fiscal year by more than five percent (5%), the Legislature shall repay to the Health 539 540 Care Trust Fund one-third (1/3) of the amount of the general fund revenues that exceed the five percent (5%) growth in general fund 541 The repayment required by this paragraph shall continue 542 revenues. in each fiscal year in which there is more than five percent (5%) 543 growth in general fund revenues, until the full amount of the 544 545 funds that were transferred and deposited into the Health Care Expendable Fund under the provisions of paragraph (a) of this 546 547 subsection have been repaid to the Health Care Trust Fund.

(4) All income from the investment of the funds in the Health Care Expendable Fund shall be credited to the account of the Health Care Expendable Fund. Any funds in the Health Care Expendable Fund at the end of a fiscal year shall not lapse into the State General Fund.

(5) The funds in the Health Care Expendable Fund shall be available for expenditure under specific appropriation by the Legislature beginning in fiscal year 2000, and shall be expended exclusively for health care purposes, including, but not limited to, the initial funding for the Medical Malpractice Risk Pool established in House Bill \_\_\_\_\_, 2002 Third Extraordinary

559 <u>Session.</u>

560 (6) Subsections (1), (2), (4) and (5) of this section shall 561 stand repealed on July 1, 2004.

562 **SECTION 11.** Section 43-11-1, Mississippi Code of 1972, is 563 amended as follows:

564 43-11-1. When used in this chapter, the following words 565 shall have the following meaning:

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"Institutions for the aged or infirm" means a place 566 (a) 567 either governmental or private which provides group living arrangements for four (4) or more persons who are unrelated to the 568 569 operator and who are being provided food, shelter and personal 570 care whether any such place be organized or operated for profit or The term "institution for aged or infirm" includes nursing 571 not. homes, pediatric skilled nursing facilities, psychiatric 572 573 residential treatment facilities, convalescent homes and homes for 574 the aged, provided that these institutions fall within the scope of the definitions set forth above. The term "institution for the 575 576 aged or infirm" does not include hospitals, clinics or mental institutions devoted primarily to providing medical service. 577

578 (b) "Person" means any individual, firm, partnership, 579 corporation, company, association or joint stock association, or 580 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.

586 "Psychiatric residential treatment facility" means (d) 587 any nonhospital establishment with permanent facilities which 588 provides a 24-hour program of care by qualified therapists including, but not limited to, duly licensed mental health 589 590 professionals, psychiatrists, psychologists, psychotherapists and licensed certified social workers, for emotionally disturbed 591 children and adolescents referred to such facility by a court, 592 local school district or by the Department of Human Services, who 593 are not in an acute phase of illness requiring the services of a 594 psychiatric hospital, and are in need of such restorative 595 treatment services. For purposes of this paragraph, the term 596 597 "emotionally disturbed" means a condition exhibiting one or more

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of the following characteristics over a long period of time and to 598 a marked degree, which adversely affects educational performance: 599 1. An inability to learn which cannot be explained 600 601 by intellectual, sensory or health factors; 602 2. An inability to build or maintain satisfactory 603 relationships with peers and teachers; 604 Inappropriate types of behavior or feelings 3. 605 under normal circumstances; 606 A general pervasive mood of unhappiness or 4. 607 depression; or 608 5. A tendency to develop physical symptoms or 609 fears associated with personal or school problems. An 610 establishment furnishing primarily domiciliary care is not within this definition. 611 "Pediatric skilled nursing facility" means an (e) 612 613 institution or a distinct part of an institution that is primarily engaged in providing to inpatients skilled nursing care and 614 615 related services for persons under twenty-one (21) years of age who require medical or nursing care or rehabilitation services for 616 617 the rehabilitation of injured, disabled or sick persons. "Licensing agency" means the State Department of 618 (f) 619 Health. 620 (g) "Medical records" mean, without restriction, those medical histories, records, reports, summaries, diagnoses and 621 622 prognoses, records of treatment and medication ordered and given, notes, entries, x-rays and other written or graphic data prepared, 623 624 kept, made or maintained in institutions for the aged or infirm that pertain to residency in, or services rendered to residents 625 of, an institution for the aged or infirm. 626 SECTION 12. The following shall be codified as Section 627 43-11-16, Mississippi Code of 1972: 628 629 43-11-16. Medical records are and shall remain the property 630 of the various institutions for the aged and infirm, subject H. B. No. 3

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however to reasonable access to the information contained therein 631 upon good cause shown by the resident, his personal 632 representatives or heirs, his attending medical personnel and his 633 634 duly authorized nominees, and upon payment of any reasonable 635 charges for such service. Nothing in this section shall be construed to deny access to medical records by the licensing 636 agency in the discharge of its official duties under this chapter. 637 Except as otherwise provided by law, medical records shall not 638 constitute public records and nothing in this section shall be 639 deemed to impair any privilege of confidence conferred by law or 640 641 the Mississippi Rules of Evidence on residents, their personal representatives or heirs by Section 13-1-21. 642

643 **SECTION 13.** (1) There is created the Medical Malpractice 644 Mediation Board which shall be comprised of the following members: 645 One (1) person appointed by the Governor; (a) 646 (b) One (1) person appointed by the Mississippi Trial 647 Lawyers Association; 648 (C) One (1) person appointed by the Mississippi Bar;

649 (d) One (1) person appointed by the Mississippi650 Hospital Association; and

(e) One (1) person appointed by the Mississippi MedicalAssociation.

(2) All members of the board shall be entitled to per diem
as provided in Section 25-3-69 and travel expenses as provided in
Section 25-3-41 for the performance of their duties as members of
the board.

(3) The board shall elect a chairman and other officers itdeems necessary to carry out the purposes of this act.

659 <u>SECTION 14.</u> Before any medical malpractice suit or suit 660 involving a nursing facility may be brought, the dispute must be 661 submitted for mediation. The board shall appoint and certify 662 mediators for such disputes. Mediators shall be members of the 663 Mississippi Bar who have been engaged in the active practice of

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law for a minimum of five (5) years. The mediator shall make 664 every effort to help parties resolve their dispute in order to 665 avoid litigation. Mediation shall be informal and rules of Civil 666 667 Procedure and Evidence shall be relaxed. Mediation under this act 668 shall be nonbinding unless the parties agree in writing to make the mediation binding. Any matter which is submitted for 669 670 mediation under this act which is not resolved may not be filed as civil action until ninety (90) days after the termination of 671 672 mediation.

673 <u>SECTION 15.</u> Sections 13 and 14 of this act shall not be 674 construed to take away from the courts their power over awards, 675 nor to make invalid any award good at common law. Sections 13 and 676 14 of this act shall be liberally construed for the encouragement 677 of the settlement of disputes and the prevention of litigation.

578 <u>SECTION 16.</u> The Commissioner of Insurance annually for a 579 period of three (3) years shall compile and provide to the 580 Legislature a report on the number of medical malpractice claims, 581 the rate being charged for medical malpractice insurance premiums, 582 the number of physicians leaving the state and any other issues 583 that the commissioner determines impact the medical profession.

684 **SECTION 17.** If any graduate of the University of Mississippi 685 Medical Center decides to retain residency and practice medicine 686 in the state upon graduation from any accredited medical doctor program or nurse practitioner program, then for a period of two 687 688 (2) years that physician or nurse practitioner shall be able to receive from designated state funds an amount not to exceed twenty 689 690 percent (20%) of such physician's or nurse practitioner's medical malpractice premium should those funds be made available by the 691 Legislature and if the physician's or nurse practitioner's 692 practice includes a minimum of twenty percent (20%) Medicaid paid 693 694 patients.

695 <u>SECTION 18.</u> (1) Any licensed physician or certified nurse 696 practitioner who voluntarily provides needed medical or health

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services to any program at an accredited school in the state 697 without the expectation of payment due to the inability of such 698 person to pay for said services shall be immune from liability for 699 any civil action arising out of the provision of such medical or 700 701 health services provided in good faith on a charitable basis. This section shall not extend immunity to acts of willful or gross 702 703 negligence. Except in cases of rendering emergency care wherein the provisions of Section 73-25-37, Mississippi Code of 1972, 704 apply, immunity under this section shall be extended only if the 705 706 physician or certified nurse practitioner and patient execute a 707 written waiver in advance of the rendering of such medical 708 services specifying that such services are provided without the expectation of payment and that the licensed physician or 709 710 certified nurse practitioner shall be immune as provided herein.

711 Any physician who voluntarily renders any medical (2) service under a special volunteer medical license authorized under 712 Section 73-25-18 without any payment or compensation or the 713 714 expectation or promise of any payment or compensation shall be 715 immune from liability for any civil action arising out of any act 716 or omission resulting from the rendering of the medical service 717 unless the act or omission was the result of the physician's gross negligence or willful misconduct. In order for the immunity under 718 719 this subsection to apply, there must be a written or oral agreement for the physician to provide a voluntary noncompensated 720 721 medical service before the rendering of the service by the physician. 722

723 **SECTION 19.** This act shall take effect and be in force from 724 and after its passage and shall apply only to causes of action 725 accruing on or after that date.