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

To: Select Committee on

HOUSE BILL NO.

AN ACT TO AMEND SECTIONS 11-11-3, 11-11-5, 11-11-7, 11-11-11 AND 11-11-13, MISSISSIPPI CODE OF 1972, TO REVISE VENUE IN CIVIL ACTIONS; TO CLARIFY JOINDER OF CLAIMS; TO AMEND SECTION 11-46-1, MISSISSIPPI CODE OF 1972, TO CLARIFY THAT CERTAIN MEDICAL 3 PRACTITIONERS ARE EMPLOYEES UNDER THE TORT CLAIMS ACT; TO CREATE SECTION 11-1-62, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT PHYSICIANS AND PHARMACISTS SHALL NOT BE LIABLE FOR PRESCRIBING FDA 7 APPROVED DRUGS; TO CREATE SECTION 11-1-64, MISSISSIPPI CODE OF 8 1972, TO INSULATE INNOCENT SELLERS OF PRODUCTS; TO AMEND SECTION 9 11-1-63, MISSISSIPPI CODE OF 1972, IN CONFORMITY THERETO; TO AMEND SECTION 15-1-36, MISSISSIPPI CODE OF 1972, TO REDUCE THE PERIOD 10 11 FOR COMMENCING A MALPRACTICE ACTION AGAINST A NURSING FACILITY; TO 12 PROVIDE A NINETY-DAY NOTICE FOR MEDICAL MALPRACTICE ACTIONS; TO 13 AMEND SECTION 85-5-7, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT PERSONS COVERED UNDER THE TORT CLAIMS ACT ARE ONLY LIABLE FOR THE 14 15 PERCENTAGE OF THEIR FAULT IN CIVIL ACTIONS; TO PROVIDE THAT 16 PAYMENTS FROM COLLATERAL SOURCES SHALL BE REDUCED FROM AWARDS IN 17 18 CIVIL ACTIONS; TO REQUIRE AFFIDAVITS IN MEDICAL MALPRACTICE ACTIONS; TO PROVIDE FOR PERIODIC PAYMENTS FOR AWARDS OF \$50,000.00 19 OR MORE; TO PROVIDE A LIMITATION ON THE AWARD OF NONECONOMIC 20 DAMAGES; TO CREATE A MEDICAL MALPRACTICE RISK POOL TO PROVIDE 21 NECESSARY MEDICAL MALPRACTICE FOR CERTAIN HEALTH CARE PROVIDERS; 22 TO AMEND SECTION 43-13-407, MISSISSIPPI CODE OF 1972, TO PROVIDE INITIAL FUNDING FOR THE MEDICAL MALPRACTICE RISK POOL; TO AMEND 23 2.4 25 SECTION 43-11-1, MISSISSIPPI CODE OF 1972, TO DEFINE THE TERM MEDICAL RECORDS; TO CREATE SECTION 43-11-16, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT MEDICAL RECORDS SHALL REMAIN THE PROPERTY OF 26 27 THE INSTITUTIONS FOR THE AGED AND INFIRM, SUBJECT TO REASONABLE 28 ACCESS TO THE INFORMATION CONTAINED THEREIN UPON GOOD CAUSE SHOWN 29 BY THE RESIDENT, HIS PERSONAL REPRESENTATIVES OR HEIRS; TO CREATE 30 31 THE MEDICAL MALPRACTICE MEDIATION BOARD AND PROVIDE FOR ITS 32 MEMBERSHIP; TO PROVIDE FOR MEDIATION FOR MEDICAL MALPRACTICE AND NURSING FACILITY DISPUTES; TO PROVIDE FOR THE APPOINTMENT AND CERTIFICATION OF MEDIATORS; TO PROVIDE THAT MEDIATION SHALL BE 33 34 35 NONBINDING UNLESS THE PARTIES AGREE TO MAKE IT BINDING; TO REQUIRE THE COMMISSIONER OF INSURANCE TO ANNUALLY COMPILE AND PROVIDE TO 36 THE LEGISLATURE A REPORT REGARDING MEDICAL MALPRACTICE CLAIMS; TO 37 PROVIDE INCENTIVE FOR MEDICAL SCHOOL GRADUATES TO PRACTICE IN THE 38 39 STATE; TO PROVIDE IMMUNITY FOR MEDICAL PERSONNEL PROVIDING VOLUNTEER SERVICE TO SCHOOL PROGRAMS; AND FOR RELATED PURPOSES. 40 41 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI: SECTION 1. Section 11-11-3, Mississippi Code of 1972, is 42 amended as follows: 43 44 11-11-3. (1) Civil actions of which the circuit court has

original jurisdiction shall be commenced in the county in which

the defendant resides or in the county where the cause of action

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- may occur or accrue and, if the defendant is a domestic 47 48 corporation, in the county in which said corporation is domiciled or in the county where the cause of action may occur or accrue, 49 50 except where otherwise provided, and except actions of trespass on 51 land, ejectment and actions for the statutory penalty for cutting and boxing trees and firing woods and actions for the actual value 52 of trees cut which shall be brought in the county where the land 53 or some part thereof is situated. If a civil action is brought in 54 an improper county, such action may be transferred to the proper 55 county pursuant to Section 11-11-17. 56
- 57 (2) In any civil action brought in the courts of this state, venue must be proper as to each and every named defendant and 58 59 plaintiff unless the plaintiffs assert a claim to relief out of the same transaction or occurrence brought in the county and 60 judicial district which has the greatest connection to the events 61 or omissions giving rise to the cause of action occurred or in 62 which a substantial part of property which is the subject of the 63 64 action is situated. In other cases where the claims may be properly joined, such as cases involving the existence of a 65 66 substantial number of common questions of law or material fact, venue shall be proper only if venue would be proper as to each 67 68 plaintiff if the plaintiff filed the case as the only plaintiff and as to each defendant as if the defendant were the only 69 defendant. If the venue is improper as to any party, then the 70 71 claims involving that party shall be severed and transferred to a county where venue is proper as to such claims. 72
- 73 **SECTION 2.** Section 11-11-5, Mississippi Code of 1972, is 74 amended as follows:
- 11-11-5. Actions against any railroad, express, steamboat, power, superpower, telegraph or telephone corporation, or against individuals owning, managing, operating or controlling a railroad, express line or route, steamboat, power, superpower, telephone or telegraph line, or against any corporation or individuals owning,

- 80 managing, operating or controlling a motor transportation line for
- 81 the conveyance of passengers, freight or express, for hire, over
- 82 the highways in the State of Mississippi, may be brought in the
- 83 county where the cause of action accrued or in the county where
- 84 the defendant has its principal place of business * * * at the
- 85 time that the cause of action accrued.
- SECTION 3. Section 11-11-7, Mississippi Code of 1972, is
- 87 amended as follows:
- 88 11-11-7. Actions against insurance companies, groups of
- 89 insurance companies or an insurance association may be brought in
- 90 any county in which a loss may occur, or, if on a life policy, in
- 91 the county in which the beneficiary resides, and process may be
- 92 sent to any county, to be served as directed by law. Such actions
- 93 may also be brought in the county where the principal place of
- 94 business of such corporation or company may be. In case of a
- 95 foreign corporation or company, such actions may be brought in the
- 96 county where service of process may be had on an agent of such
- 97 corporation or company or service of process in any suit or
- 98 action, or any other legal process, may be served upon the
- 99 Insurance Commissioner of the State of Mississippi, and such
- 100 notice will confer jurisdiction on any court in any county in the
- 101 state where the suit is filed, provided the suit is brought in the
- 102 county where the loss occurred * * *.
- SECTION 4. Section 11-11-11, Mississippi Code of 1972, is
- 104 amended as follows:
- 105 11-11-11. Any civil action for the recovery of damages
- 106 brought against a nonresident or the representative of the
- 107 nonresident in the State of Mississippi may be commenced in the
- 108 county in which the action accrued * * *, except as otherwise
- 109 provided by law.
- SECTION 5. Section 11-11-13, Mississippi Code of 1972, is
- 111 amended as follows:

112 11-11-13. The venue of an action for damages brought against

113 a nonresident arising from his operation, either in person or by

- 114 agent or employee, of a motor vehicle upon any public street,
- 115 road, or highway of this state, or elsewhere in this state, shall
- 116 be * * * in the county where the cause of action accrued * * *.
- 117 SECTION 6. Section 11-46-1, Mississippi Code of 1972, is
- 118 amended as follows:
- 119 11-46-1. As used in this chapter the following terms shall
- 120 have the meanings herein ascribed unless the context otherwise
- 121 requires:
- 122 (a) "Claim" means any demand to recover damages from a
- 123 governmental entity as compensation for injuries.
- 124 (b) "Claimant" means any person seeking compensation
- 125 under the provisions of this chapter, whether by administrative
- 126 remedy or through the courts.
- 127 (c) "Board" means the Mississippi Tort Claims Board.
- 128 (d) "Department" means the Department of Finance and
- 129 Administration.
- 130 (e) "Director" means the executive director of the
- 131 department who is also the executive director of the board.
- 132 (f) "Employee" means any officer, employee or servant
- 133 of the State of Mississippi or a political subdivision of the
- 134 state, including elected or appointed officials and persons acting
- on behalf of the state or a political subdivision in any official
- 136 capacity, temporarily or permanently, in the service of the state
- 137 or a political subdivision whether with or without compensation.
- 138 The term "employee" shall not mean a person or other legal entity
- 139 while acting in the capacity of an independent contractor under
- 140 contract to the state or a political subdivision; provided,
- 141 however, that for purposes of the limits of liability provided for
- in Section 11-46-15, the term "employee" shall include physicians
- 143 under contract to provide health services with the State Board of
- 144 Health, the State Board of Mental Health or any county or

municipal jail facility while rendering services under such 145 contract. The term "employee" shall also include any physician, 146 147 dentist or other medical practitioner under contract or affiliated 148 with or employed by the University of Mississippi Medical Center, 149 its departmental practice plans, or who practices on the campus of any university under the control of the Board of Trustees of State 150 Institutions of Higher Learning only for the purposes of acting 151 within the course and scope of their contract, affiliation or 152 153 employment. The term "employee" shall also include any physician, dentist or other medical practitioner under contract or affiliated 154 155 with or employed by the State Veterans Affairs Board only for the purposes of acting within the course and scope of their contract, 156 157 affiliation or employment. The term "employee" shall also include Mississippi Department of Human Services licensed foster parents 158 for the limited purposes of coverage under the Tort Claims Act as 159 provided in Section 11-46-8. 160

- 161 (g) "Governmental entity" means and includes the state 162 and 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.
- 166 (i) "Political subdivision" means any body politic or 167 body corporate other than the state responsible for governmental 168 activities only in geographic areas smaller than that of the 169 state, including but not limited to any county, municipality, school district, community hospital as defined in Section 170 171 41-13-10, Mississippi Code of 1972, airport authority or other instrumentality thereof, whether or not such body or 172 instrumentality thereof has the authority to levy taxes or to sue 173 or be sued in its own name. 174
- (j) "State" means the State of Mississippi and any

 office, department, agency, division, bureau, commission, board,

 institution, hospital, college, university, airport authority or

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- 178 other instrumentality thereof, whether or not such body or
- 179 instrumentality thereof has the authority to levy taxes or to sue
- 180 or be sued in its own name.
- 181 (k) "Law" means all species of law including but not
- 182 limited to any and all constitutions, statutes, case law, common
- 183 law, customary law, court order, court rule, court decision, court
- 184 opinion, court judgment or mandate, administrative rule or
- 185 regulation, executive order, or principle or rule of equity.
- 186 **SECTION 7.** The following shall be codified as Section
- 187 11-1-62, Mississippi Code of 1972:
- 188 11-1-62. In any civil action alleging damages caused by a
- 189 prescription drug and absent any negligence on the part of the
- 190 physician or pharmacist, a physician or pharmacist shall be
- 191 indemnified by the manufacturer of the prescription drug for any
- 192 damages if the federal Food and Drug Administration (FDA) has
- 193 approved that drug for treatment of the condition, disease or
- 194 illness for which the drug was prescribed. It is the intent of
- 195 this section to indemnify innocent physicians and pharmacists who
- 196 are not actively negligent from forum-driven lawsuits and that, as
- 197 to any claim brought against a physician under this section, the
- 198 physician's insurer shall not count such claim against the
- 199 physician for the purposes of insurance underwriting or, in any
- 200 way, increase premiums for or deny insurance coverage.
- SECTION 8. Section 11-1-63, Mississippi Code of 1972, is
- 202 amended as follows:
- 203 11-1-63. In any action for damages caused by a product
- 204 except for commercial damage to the product itself:
- 205 (a) Subject to the provisions of Section 11-1-62, the
- 206 manufacturer, seller, distributor or prescriber of the product
- 207 shall not be liable if the claimant does not prove by the
- 208 preponderance of the evidence that at the time the product left
- 209 the control of the manufacturer, seller, distributor or
- 210 prescriber:



211	(i) 1. The product was defective because it
212	deviated in a material way from the manufacturer's specifications
213	or from otherwise identical units manufactured to the same
214	manufacturing specifications, or
215	2. The product was defective because it
216	failed to contain adequate warnings or instructions, or
217	3. The product was designed in a defective
218	manner, or
219	4. The product breached an express warranty
220	or failed to conform to other express factual representations upon
221	which the claimant justifiably relied in electing to use the
222	product; and
223	(ii) The defective condition rendered the product
224	unreasonably dangerous to the user or consumer; and
225	(iii) The defective and unreasonably dangerous
226	condition of the product proximately caused the damages for which
227	recovery is sought.
228	(b) A product is not defective in design or formulation
229	if the harm for which the claimant seeks to recover compensatory
230	damages was caused by an inherent characteristic of the product
231	which is a generic aspect of the product that cannot be eliminated
232	without substantially compromising the product's usefulness or
233	desirability and which is recognized by the ordinary person with
234	the ordinary knowledge common to the community.
235	(c) (i) In any action alleging that a product is
236	defective because it failed to contain adequate warnings or
237	instructions pursuant to paragraph (a)(i)2 of this section, the
238	manufacturer, seller, distributor or prescriber shall not be
239	liable if the claimant does not prove by the preponderance of the
240	evidence that at the time the product left the control of the
241	manufacturer, seller, distributor or prescriber, the manufacturer,
242	seller, distributor or prescriber knew or in light of reasonably
243	available knowledge should have known about the danger that caused

the damage for which recovery is sought and that the ordinary user or consumer would not realize its dangerous condition.

- 246 (ii) An adequate product warning or instruction is 247 one that a reasonably prudent person in the same or similar 248 circumstances would have provided with respect to the danger and that communicates sufficient information on the dangers and safe 249 use of the product, taking into account the characteristics of, 250 and the ordinary knowledge common to an ordinary consumer who 251 252 purchases the product; or in the case of a prescription drug, medical device or other product that is intended to be used only 253 254 under the supervision of a physician or other licensed professional person, taking into account the characteristics of, 255 256 and the ordinary knowledge common to, a physician or other 257 licensed professional who prescribes the drug, device or other 258 product.
- 259 (d) For purposes of this section:
- 260 <u>(i) "Seller" means any person or entity that sells</u>
 261 products of any kind.
- 262 (ii) "Prescriber" means any person licensed by the 263 State of Mississippi to prescribe medicine.
- In any action alleging that a product is defective 264 (e) 265 pursuant to paragraph (a) of this section, the manufacturer, seller, distributor or prescriber shall not be liable if the 266 claimant (i) had knowledge of a condition of the product that was 267 268 inconsistent with his safety; (ii) appreciated the danger in the condition; and (iii) deliberately and voluntarily chose to expose 269 himself to the danger in such a manner to register assent on the 270 continuance of the dangerous condition. 271
- 272 (f) In any action alleging that a product is defective
 273 pursuant to paragraph (a)(i)2 of this section, the manufacturer,
 274 seller, distributor or prescriber shall not be liable if the
 275 danger posed by the product is known or is open and obvious to the
 276 user or consumer of the product, or should have been known or open

and obvious to the user or consumer of the product, taking into 278 account the characteristics of, and the ordinary knowledge common 279 to, the persons who ordinarily use or consume the product.

(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

prescriber 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 control over that aspect of the design, testing, manufacture, packaging or labeling of the product that caused the harm for which recovery of damages is sought; the seller, distributor or prescriber altered or modified the product, and the alteration or modification was a substantial factor in causing the harm for which recovery of damages is sought; the seller, distributor or prescriber had actual knowledge of the defective condition of the

- 310 product at the time he supplied same; or the seller, distributor
- 311 or prescriber made an express factual representation about the
- 312 aspect of the product which caused the harm for which recovery of
- 313 damages is sought.
- 314 (ii) Subparagraph (i) shall not apply unless the
- 315 seller, distributor or prescriber has given prompt notice of the
- 316 suit to the manufacturer within thirty (30) days of the filing of
- 317 the complaint against the seller.
- 318 (i) Nothing in this section shall be construed to
- 319 eliminate any common law defense to an action for damages caused
- 320 by a product.
- 321 **SECTION 9.** The following shall be codified as Section
- 322 11-1-64, Mississippi Code of 1972:
- 11-1-64. (1) In any civil action alleging damages caused by
- 324 a product, a product seller other than a manufacturer shall not be
- 325 liable for a latent defect if the seller is a mere conduit who
- 326 purchased the product from a reputable manufacturer. It is the
- 327 intent of this section to insulate innocent sellers who are not
- 328 actively negligent from forum driven lawsuits.
- 329 (2) A product seller shall not be considered to have failed
- 330 to exercise reasonable care with respect to a product based upon
- an alleged failure to inspect the product, if there was no
- reasonable opportunity to inspect the product; or the inspection,
- in the exercise of reasonable care, would not have revealed that
- 334 the product was defective.
- 335 (3) Nothing in this section shall be construed to eliminate
- 336 any common law defense to an action for damages caused by a
- 337 product.
- 338 **SECTION 10.** Section 15-1-36, Mississippi Code of 1972, is
- 339 amended as follows:
- 340 15-1-36. (1) For any claim accruing on or before June 30,
- 341 1998, and except as otherwise provided in this section, no claim
- 342 in tort may be brought against a licensed physician, osteopath,

dentist, hospital, <u>nursing facility</u>, nurse, pharmacist,

podiatrist, optometrist or chiropractor for injuries or wrongful

death arising out of the course of medical, surgical or other

professional services unless it is filed within two (2) years from

the date the alleged act, omission or neglect shall or with

reasonable diligence might have been first known or discovered.

- (2) For any claim accruing on or after July 1, 1998, and except as otherwise provided in this section, no claim in tort may be brought against a licensed physician, osteopath, dentist, hospital, nursing facility, nurse, pharmacist, podiatrist, optometrist or chiropractor for injuries or wrongful death arising out of the course of medical, surgical or other professional services unless it is filed within two (2) years from the date the alleged act, omission or neglect shall or with reasonable diligence might have been first known or discovered, and, except as described in paragraphs (a) and (b) of this subsection, in no event more than seven (7) years after the alleged act, omission or neglect occurred:
- 361 (a) In the event a foreign object introduced during a
 362 surgical or medical procedure has been left in a patient's body,
 363 the cause of action shall be deemed to have first accrued at, and
 364 not before, the time at which the foreign object is, or with
 365 reasonable diligence should have been, first known or discovered
 366 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.
 - (3) Except as otherwise provided in subsection (4) of this section, 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 six (6) years

of age or younger, then such minor or the person claiming through
such minor may, notwithstanding that the period of time limited

pursuant to subsections (1) and (2) of this section shall have
expired, commence action on such claim at any time within two (2)

years next after the time at which the minor shall have reached
his sixth birthday, or shall have died, whichever shall have first
occurred.

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

- 409 time shall be allowed by reason of the disability of such person
- 410 to commence action on the claim of such person beyond the period
- 411 prescribed under Section 15-1-55, Mississippi Code of 1972.
- 412 (7) For the purposes of subsection (3) of this section, and
- 413 only for the purposes of such subsection, the disability of
- 414 infancy or minority shall be removed from and after a person has
- 415 reached his sixth birthday.
- 416 (8) For the purposes of subsection (4) of this section, and
- 417 only for the purposes of such subsection, the disability of
- 418 infancy or minority shall be removed from and after a person has
- 419 reached his sixth birthday or from and after such person shall
- 420 have a parent or legal guardian, whichever occurs later, unless
- 421 such disability is otherwise removed by law.
- 422 (9) The limitation established by this section as to a
- 423 licensed physician, osteopath, dentist, hospital or nurse shall
- 424 apply only to actions the cause of which accrued on or after July
- 425 1, 1976.
- 426 (10) The limitation established by this section as to
- 427 pharmacists shall apply only to actions the cause of which accrued
- 428 on or after July 1, 1978.
- 429 (11) The limitation established by this section as to
- 430 podiatrists shall apply only to actions the cause of which accrued
- 431 on or after July 1, 1979.
- 432 (12) The limitation established by this section as to
- 433 optometrists and chiropractors shall apply only to actions the
- 434 cause of which accrued on or after July 1, 1983.
- 435 (13) The limitation established by this section as to
- 436 actions commenced on behalf of minors shall apply only to actions
- 437 the cause of which accrued on or after July 1, 1989.
- 438 (14) The limitation established by this section as to
- 439 nursing facilities shall apply only to actions the cause of which
- 440 accrued after the passage of House Bill No. ____, Third
- 441 Extraordinary Session of 2002.

442 (15) No action based upon the health care provider's professional negligence may be begun unless the defendant has been 443 given at least ninety (90) days' prior notice of the intention to 444 445 begin the action. No particular form of notice is required, but 446 it shall notify the defendant of the legal basis of the claim and the type of loss sustained, including with specificity the nature 447 of the injuries suffered. If the notice is served within ninety 448 (90) days of the expiration of the applicable statute of 449 450 limitations, the time for the beginning of the action shall be extended ninety (90) days from the service of the notice. This 451 452 subsection shall not be applicable with respect to any defendant whose name is unknown to the plaintiff at the time of filing the 453 454 complaint and who is identified therein by a fictitious name. 455 SECTION 11. Section 85-5-7, Mississippi Code of 1972, is 456 amended as follows: 85-5-7. (1) As used in this section "fault" means an act or 457 omission of a person which is a proximate cause of injury or death 458 459 to another person or persons, damages to property, tangible or intangible, or economic injury, including but not limited to 460 negligence, malpractice, strict liability, absolute liability or 461 462 failure to warn. "Fault" shall not include any tort which results 463 from an act or omission committed with a specific wrongful intent. 464 Except as may be otherwise provided in subsection (6) of this section, in any civil action based on fault, the liability 465 466 for damages caused by two (2) or more persons shall be joint and several only to the extent necessary for the person suffering 467 468 injury, death or loss to recover fifty percent (50%) of his recoverable damages, except as the liability for damages caused by 469 any persons covered under the provisions of Section 11-46-1 et 470 seq. shall be limited to such person's own percentage of fault. 471 472 Except as otherwise provided in subsections (2) and (6) 473 of this section, in any civil action based on fault, the liability 474 for damages caused by two (2) or more persons shall be several

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- only, and not joint and several and a joint tortfeasor shall be 475 476 liable only for the amount of damages allocated to him in direct proportion to his percentage of fault. In assessing percentages 477 478 of fault an employer and the employer's employee or a principal 479 and the principal's agent shall be considered as one (1) defendant when the liability of such employer or principal has been caused 480 by the wrongful or negligent act or omission of the employee or 481 482 agent.
- (4) Any defendant held jointly liable under this section
 shall have a right of contribution against fellow joint
 tortfeasors. A defendant shall be held responsible for
 contribution to other joint tortfeasors only for the percentage of
 fault assessed to such defendant.
- 488 (5) Nothing in this section shall eliminate or diminish any 489 defenses or immunities which currently exist, except as expressly 490 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.
- 497 (7) In actions involving joint tortfeasors, the trier of 498 fact shall determine the percentage of fault for each party 499 alleged to be at fault.
- 500 (8) Nothing in this section shall be construed to create a 501 cause of action. Nothing in this section shall be construed, in 502 any way, to alter the immunity of any person.
- 503 <u>SECTION 12.</u> After the jury makes an award in an action for 504 personal injury against a health care provider based upon 505 professional negligence, the defendant may present to the 506 presiding judge evidence of any amount payable as a benefit to the 507 plaintiff as a result of the personal injury under the United

States Social Security Act, any state or federal income disability 508 509 or worker's compensation act, any health, sickness or income-disability insurance, accident insurance that provides 510 511 health benefits or income-disability coverage and any contract or 512 agreement of any group, organization, partnership or corporation to provide, pay for or reimburse the cost of medical, hospital, 513 dental or other health care services. If the defendant elects to 514 present such evidence, the plaintiff may introduce evidence of any 515 amount which the plaintiff has paid or contributed to secure his 516 right to these insurance benefits. The plaintiff may also 517 518 introduce evidence of any leave time lost due to the personal injury. The presiding judge shall reduce the jury award by the 519 520 amount of such benefits less any amount which the plaintiff has paid or contributed to secure such benefits. 521 "Health care provider" means an individual licensed, 522 523 certified or otherwise authorized or permitted by law to provide 524 health care in the ordinary course of business or practice of a 525 profession. "Health care provider" also means any hospital or 526 nursing facility. 527

"Professional negligence" means a negligent act or omission to act by a health care provider in the rendering of professional services, which act or omission is the proximate cause of a personal injury or wrongful death, provided that such services are within the scope of services for which the provider is licensed and which are not within any restriction imposed by the licensing agency or licensed hospital.

534 <u>SECTION 13.</u> Before any action for medical malpractice may be 535 brought, the attorney bringing such action shall sign an affidavit 536 as an officer of the court stating that he has had his case 537 reviewed by a medical expert and the medical expert has determined 538 that medical malpractice is evident in such action.

539 <u>SECTION 14.</u> (1) In any action for injury or damages against 540 a provider of health care services, the court shall, at the H. B. No. 6

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request of either party, enter a judgment ordering that money 541 damages or its equivalent for future damages of the judgment 542 creditor be paid in whole or in part by periodic payments rather 543 544 than by a lump-sum payment if the award equals or exceeds Fifty 545 Thousand Dollars (\$50,000.00) in future damages. In entering a 546 judgment ordering the payment of future damages by periodic 547 payments, the court shall make a specific finding as to the dollar 548 amount of periodic payments which will compensate the judgment 549 creditor for such future damages. As a condition to authorizing period payments of future damages, the court shall require the 550 551 judgment debtor who is not adequately insured to post security adequate to assure full payment of such damages awarded by the 552 judgment. Upon termination of periodic payments of future 553 554 damages, the court shall order the return of this security, or so 555 much as remains, to the judgment debtor.

- (2) (a) The judgment ordering the payment of future damages by periodic payments shall specify the recipient or recipients of the payments, the dollar amount of the payments, the interval between payments, and the number of payments or the period of time over which payments shall be made. Such payments shall only be subject to modification in the event of the death of the judgment creditor.
- (b) In the event that the court finds that the judgment debtor has exhibited a continuing pattern of failing to make the payments, as specified in paragraph (a), the court shall find the judgment debtor in contempt of court and, in addition to the required periodic payments, shall order the judgment debtor to pay the judgment creditor all damages caused by the failure to make such period payments, including court costs and attorney's fees.
 - (3) However, money damages awarded for loss of future earnings shall not be reduced or payments terminated by reason of the death of the judgment creditor, but shall be paid to persons to whom the judgment creditor owed a duty of support, as provided

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- by law, immediately prior to his death. In such cases the court which rendered the original judgment, may, upon petition of any party in interest, modify the judgment to award and apportion the unpaid future damages in accordance with this subsection.
- 578 (4) Following the occurrence or expiration of all
 579 obligations specified in the periodic payment judgment, any
 580 obligation of the judgment debtor to make further payments shall
 581 cease and any security given, pursuant to subsection (1) shall
 582 revert to the judgment debtor.
- 583 (5) As used in this section:
- (a) "Future damages" includes damages for future
 medical treatment, care or custody, loss of future earnings, loss
 of bodily function, or future pain and suffering of the judgment
 creditor.
- (b) "Periodic payments" means the payment of money or delivery of other property to the judgment creditor at regular intervals.
- (c) "Health care provider" 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. "Health care provider" includes the legal representatives of a health care provider. "Health care provider" also means any hospital or nursing facility.
- omission to act by a health care provider in the rendering of professional services, which act or omission is the proximate cause of a personal injury or wrongful death, provided that such services are within the scope of services for which the provider is licensed and which are not within any restriction imposed by the licensing agency or licensed hospital.
- (6) It is the intent of the Legislature in enacting this section to authorize the entry of judgments in malpractice actions against health care providers which provide for the payment of

future damages through periodic payments rather than lump-sum 607 608 payments. By authorizing periodic payment judgments, it is the further intent of the Legislature that the courts will utilize 609 610 such judgments to provide compensation sufficient to meet the 611 needs of an injured plaintiff and those persons who are dependent on the plaintiff for whatever period is necessary while 612 eliminating the potential windfall from a lump-sum recovery which 613 was intended to provide for the care of an injured plaintiff over 614 an extended period who then dies shortly after the judgment is 615 paid, leaving the balance of the judgment award to persons and 616 617 purposes for which it was not intended. It is also the intent of the Legislature that all elements of the periodic payment program 618 619 be specified with certainty in the judgment ordering such payments and that the judgment not be subject to modification at some 620 future time which might alter the specifications of the original 621 622 judgment.

- 623 <u>SECTION 15.</u> (1) For the purposes of this section, the 624 following words and phrases shall have the meanings ascribed 625 herein unless the context clearly requires otherwise:
- 626 "Noneconomic damages" means subjective, nonpecuniary damages arising from death, pain, suffering, 627 628 inconvenience, physical impairment, disfigurement, mental anguish, worry, emotional distress, loss of society and companionship, loss 629 of consortium, bystander injury, injury to reputation, 630 631 humiliation, loss of the enjoyment of life, hedonic damages, other nonpecuniary damages, and any other theory of damages such as fear 632 633 of loss, illness or injury. The term "noneconomic damages" shall
- (b) "Actual economic damages" means objectively

 verifiable pecuniary damages arising from medical expenses and

 medical care, rehabilitation services, custodial care,

 disabilities, loss of earnings and earning capacity, loss of

 income, burial costs, loss of use of property, costs of repair of

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not include punitive damages.

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replacement of property, costs of obtaining substitute domestic services, loss of employment, loss of business or employment opportunities, and other objectively verifiable monetary losses.

- In any action for malpractice, negligence, error, omission, mistake or the unauthorized rendering of professional services against a provider of health care, the court shall instruct the jury that in the event they find the defendant liable, they shall not award the plaintiff more than Five Hundred Thousand Dollars (\$500,000.00) for pain and suffering, loss of companionship, embarrassment and other items of general damages unless the judge determines by clear and convincing evidence that there is substantial or permanent loss or impairment of a bodily function or substantial disfigurement, or other special circumstances in the case which warrant a finding that imposition of such a limitation would deprive the plaintiff of just compensation for the injuries sustained. In any such action which is tried without a jury, the court shall not award the plaintiff more than Five Hundred Thousand Dollars (\$500,000.00) for pain and suffering, loss of companionship, embarrassment and other items of general damages unless the aforesaid findings are made specially by the court and stated separately in the judgment entered by the court. It is the intent of this section to limit all noneconomic
- 663 (b) The limitations on damages set forth in this
 664 section shall be adjusted for inflation annually. The adjustment
 665 shall be based on the cumulative annual adjustment for inflation
 666 for each year since the effective date of the damages limitations
 667 in this section. The adjustment made pursuant to this paragraph
 668 shall be rounded upward or downward to the nearest increment of
 669 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
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damages to the above.

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- 673 Mississippi, all items, all urban consumers or its successor
- 674 index.
- 675 (d) The Secretary of State shall certify the adjusted
- 676 limitation on damages within fourteen (14) days after the
- 677 appropriate information is available.
- 678 **SECTION 16.** The Commissioner of Insurance shall establish a
- 679 medical malpractice risk pool for the purpose of making necessary
- 680 medical malpractice insurance available for physicians, registered
- on nurses and all other personnel who are duly licensed to practice
- 682 in a hospital and hospitals. Monies in the amount of One Dollar
- 683 (\$1.00) for the initial funding of the Medical Malpractice Risk
- 684 Pool shall be drawn from the Health Care Expendable Fund
- 685 established in Section 43-13-407. The Commissioner of Insurance
- 686 shall promulgate rules and regulations necessary for the operation
- 687 of the risk pool.
- 688 **SECTION 17.** Section 43-13-407, Mississippi Code of 1972, is
- 689 amended as follows:
- 690 43-13-407. (1) In accordance with the purposes of this
- 691 article, there is established in the State Treasury the Health
- 692 Care Expendable Fund, into which shall be transferred from the
- 693 Health Care Trust Fund the following sums:
- 694 (a) In fiscal year 2000, Fifty Million Dollars
- 695 (\$50,000,000.00);
- (b) In fiscal year 2001, Fifty-five Million Dollars
- 697 (\$55,000,000.00);
- 698 (c) In fiscal year 2002, Sixty Million Five Hundred
- 699 Thousand Dollars (\$60,500,000.00);
- 700 (d) In fiscal year 2003, Sixty-six Million Five Hundred
- 701 Fifty Thousand Dollars (\$66,550,000.00);
- 702 (e) In fiscal year 2004 and each subsequent fiscal
- 703 year, a sum equal to the average annual amount of the income from
- 704 the investment of the funds in the Health Care Trust Fund since

705 July 1, 1999.

- 706 (2) In any fiscal year in which interest and dividends from
 707 the investment of the funds in the Health Care Trust Fund are not
 708 sufficient to fund the full amount of the annual transfer into the
 709 Health Care Expendable Fund as required in subsection (1) of this
 710 section, the State Treasurer shall transfer from tobacco
 711 settlement installment payments an amount that is sufficient to
 712 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
 State Treasurer shall deposit the full amount of that installment
 payment into the Health Care Expendable Fund.
- If during any fiscal year after March 6, 2002, the 720 general fund revenues received by the state exceed the general 721 fund revenues received during the previous fiscal year by more 722 723 than five percent (5%), the Legislature shall repay to the Health Care Trust Fund one-third (1/3) of the amount of the general fund 724 725 revenues that exceed the five percent (5%) growth in general fund The repayment required by this paragraph shall continue 726 revenues. 727 in each fiscal year in which there is more than five percent (5%) growth in general fund revenues, until the full amount of the 728 funds that were transferred and deposited into the Health Care 729 730 Expendable Fund under the provisions of paragraph (a) of this subsection have been repaid to the Health Care Trust Fund. 731
- (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.
- 737 (5) The funds in the Health Care Expendable Fund shall be
 738 available for expenditure under specific appropriation by the

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- 739 Legislature beginning in fiscal year 2000, and shall be expended
- 740 exclusively for health care purposes, including, but not limited
- 741 to, the initial funding for the Medical Malpractice Risk Pool
- 742 <u>established in House Bill</u>, 2002 Third Extraordinary
- 743 Session.
- 744 (6) Subsections (1), (2), (4) and (5) of this section shall
- 745 stand repealed on July 1, 2004.
- 746 **SECTION 18.** Section 43-11-1, Mississippi Code of 1972, is
- 747 amended as follows:
- 748 43-11-1. When used in this chapter, the following words
- 749 shall have the following meaning:
- 750 (a) "Institutions for the aged or infirm" means a place
- 751 either governmental or private which provides group living
- 752 arrangements for four (4) or more persons who are unrelated to the
- 753 operator and who are being provided food, shelter and personal
- 754 care whether any such place be organized or operated for profit or
- 755 not. The term "institution for aged or infirm" includes nursing
- 756 homes, pediatric skilled nursing facilities, psychiatric
- 757 residential treatment facilities, convalescent homes and homes for
- 758 the aged, provided that these institutions fall within the scope
- 759 of the definitions set forth above. The term "institution for the
- 760 aged or infirm" does not include hospitals, clinics or mental
- 761 institutions devoted primarily to providing medical service.
- 762 (b) "Person" means any individual, firm, partnership,
- 763 corporation, company, association or joint stock association, or
- 764 any licensee herein or the legal successor thereof.
- 765 (c) "Personal care" means assistance rendered by
- 766 personnel of the home to aged or infirm residents in performing
- 767 one or more of the activities of daily living, which includes, but
- 768 is not limited to, the bathing, walking, excretory functions,
- 769 feeding, personal grooming and dressing of such residents.

- 770 (d) "Psychiatric residential treatment facility" means
- 771 any nonhospital establishment with permanent facilities which

- 772 provides a 24-hour program of care by qualified therapists
- 773 including, but not limited to, duly licensed mental health
- 774 professionals, psychiatrists, psychologists, psychotherapists and
- 775 licensed certified social workers, for emotionally disturbed
- 776 children and adolescents referred to such facility by a court,
- 777 local school district or by the Department of Human Services, who
- 778 are not in an acute phase of illness requiring the services of a
- 779 psychiatric hospital, and are in need of such restorative
- 780 treatment services. For purposes of this paragraph, the term
- 781 "emotionally disturbed" means a condition exhibiting one or more
- 782 of the following characteristics over a long period of time and to
- 783 a marked degree, which adversely affects educational performance:
- 784 1. An inability to learn which cannot be explained
- 785 by intellectual, sensory or health factors;
- 786 2. An inability to build or maintain satisfactory
- 787 relationships with peers and teachers;
- 788 3. Inappropriate types of behavior or feelings
- 789 under normal circumstances;
- 790 4. A general pervasive mood of unhappiness or
- 791 depression; or
- 792 5. A tendency to develop physical symptoms or
- 793 fears associated with personal or school problems. An
- 794 establishment furnishing primarily domiciliary care is not within
- 795 this definition.
- 796 (e) "Pediatric skilled nursing facility" means an
- 797 institution or a distinct part of an institution that is primarily
- 798 engaged in providing to inpatients skilled nursing care and
- 799 related services for persons under twenty-one (21) years of age
- 800 who require medical or nursing care or rehabilitation services for
- 801 the rehabilitation of injured, disabled or sick persons.
- (f) "Licensing agency" means the State Department of
- 803 Health.

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                    "Medical records" mean, without restriction, those
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     medical histories, records, reports, summaries, diagnoses and
     prognoses, records of treatment and medication ordered and given,
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     notes, entries, x-rays and other written or graphic data prepared,
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     kept, made or maintained in institutions for the aged or infirm
     that pertain to residency in, or services rendered to residents
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     of, an institution for the aged or infirm.
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          SECTION 19. The following shall be codified as Section
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     43-11-16, Mississippi Code of 1972:
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          43-11-16. Medical records are and shall remain the property
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     of the various institutions for the aged and infirm, subject
     however to reasonable access to the information contained therein
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     upon good cause shown by the resident, his personal
     representatives or heirs, his attending medical personnel and his
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     duly authorized nominees, and upon payment of any reasonable
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     charges for such service. Nothing in this section shall be
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     construed to deny access to medical records by the licensing
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     agency in the discharge of its official duties under this chapter.
     Except as otherwise provided by law, medical records shall not
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     constitute public records and nothing in this section shall be
     deemed to impair any privilege of confidence conferred by law or
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     the Mississippi Rules of Evidence on residents, their personal
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     representatives or heirs by Section 13-1-21.
          SECTION 20.
                           There is created the Medical Malpractice
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     Mediation Board which shall be comprised of the following members:
                    One (1) person appointed by the Governor;
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                (a)
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                    One (1) person appointed by the Mississippi Trial
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     Lawyers Association;
                    One (1) person appointed by the Mississippi Bar;
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                (C)
                    One (1) person appointed by the Mississippi
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                (d)
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     Hospital Association; and
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                    One (1) person appointed by the Mississippi Medical
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     Association.
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- 837 (2) All Members of the board shall be entitled to per diem 838 as provided in Section 25-3-69 and travel expenses as provided in 839 Section 25-3-41 for the performance of their duties as members of 840 the board.
- 841 (3) The board shall elect a chairman and other officers it 842 deems necessary to carry out the purposes of this act.
- **SECTION 21.** Before any medical malpractice suit or suit 843 involving a nursing facility may be brought, the dispute must be 844 submitted for mediation. The board shall appoint and certify 845 mediators for such disputes. Mediators shall be members of the 846 847 Mississippi Bar who have been engaged in the active practice of law for a minimum of five (5) years. The mediator shall make 848 every effort to help parties resolve their dispute in order to 849 850 avoid litigation. Mediation shall be informal and rules of Civil Procedure and Evidence shall be relaxed. Mediation under this act 851 shall be nonbinding unless the parties agree in writing to make 852 the mediation binding. Any matter which is submitted for 853 854 mediation under this act which is not resolved may not be filed as 855 civil action until ninety (90) days after the termination of 856 mediation.
- SECTION 22. Sections 20 and 21 of this act shall not be
 construed to take away from the courts their power over awards,
 nor to make invalid any award good at common law. Sections 20 and
 21 of this act shall be liberally construed for the encouragement
 of the settlement of disputes and the prevention of litigation.
- SECTION 23. The Commissioner of Insurance annually for a
 period of three (3) years shall compile and provide to the
 Legislature a report on the number of medical malpractice claims,
 the rate being charged for medical malpractice insurance premiums,
 the number of physicians leaving the state and any other issues
 that the commissioner determines impact the medical profession.
- 868 <u>SECTION 24.</u> If any graduate of the University of Mississippi 869 Medical Center decides to retain residency and practice medicine

in the state upon graduation from any accredited medical doctor program or nurse practitioner program, then for a period of two (2) years that physician or nurse practitioner shall be able to receive from designated state funds an amount not to exceed twenty percent (20%) of such physician's or nurse practitioner's medical malpractice premium should those funds be made available by the Legislature and if the physician's or nurse practitioner's practice includes a minimum of twenty percent (20%) Medicaid paid patients.

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SECTION 25. (1) Any licensed physician or certified nurse practitioner who voluntarily provides needed medical or health services to any program at an accredited school in the state without the expectation of payment due to the inability of such person to pay for said services shall be immune from liability for any civil action arising out of the provision of such medical or health services provided in good faith on a charitable basis. This section shall not extend immunity to acts of willful or gross negligence. Except in cases of rendering emergency care wherein the provisions of Section 73-25-37, Mississippi Code of 1972, apply, immunity under this section shall be extended only if the physician or certified nurse practitioner and patient execute a written waiver in advance of the rendering of such medical services specifying that such services are provided without the expectation of payment and that the licensed physician or certified nurse practitioner shall be immune as provided herein.

(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 negligence or willful misconduct. In order for the immunity under

904	agreement for the physician to provide a voluntary noncompensated
905	medical service before the rendering of the service by the
906	physician.
907	SECTION 26. This act shall take effect and be in force from
908	and after its passage and shall apply only to causes of action

this subsection to apply, there must be a written or oral

accruing on or after that date.

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