Adopted COMMITTEE AMENDMENT NO 1 PROPOSED TO

Senate Bill No. 2396

BY: Committee

Amend by striking all after the enacting clause and inserting in lieu thereof the following:

32	SECTION 1. The Legislature recognizes the importance of
33	assuring adequate health care services for all Mississippians, and
34	it acknowledges that physicians are a vital component of providing
35	such services. The Legislature finds that because of the makeup
36	of the citizenry of the state and the percentage of citizens who
37	are (a) Medicaid recipients, (b) State and School Employees Health
38	Insurance Plan participants and (c) Children's Health Insurance
39	Program participants, physicians who provide health care services
40	to such individuals are providing an essential public service and
41	that it is in the public interest to provide funding to further
42	address medical malpractice insurance needs of these physicians.
43	SECTION 2. Section 83-48-5, Mississippi Code of 1972, is
44	amended as follows:
45	83-48-5. (1) There is created the Medical Malpractice
46	Insurance Availability Plan that shall be funded by the
47	participants in the plan. The plan shall be administered by the
48	Tort Claims Board created under Section 11-46-18.
49	(2) (a) The plan shall provide coverage for medical

malpractice to hospitals, institutions for the aged or infirm, or

50

- 51 other health care facilities licensed by the State of Mississippi,
- 52 physicians, nurses or other personnel who are duly licensed to
- 53 practice in a hospital or other health care facility licensed by
- 54 the State of Mississippi. Participation in the plan shall be
- 55 voluntary for any hospital, institution for the aged or infirm, or
- other health care facilities licensed by the State of Mississippi,
- 57 physicians, nurses and any other personnel who are duly licensed
- 58 to practice in a hospital or other health care facility licensed
- 59 by the State of Mississippi. However, no state entity may
- 60 participate in the plan. The term "state" as used in this
- 61 subsection has the meaning ascribed to that term under Section
- 62 11-46-1. The plan shall make available tail (extended reporting
- 63 period) coverage for participants of the plan at an additional
- 64 premium assessment for such coverage. The plan shall make
- 65 available prior acts extended reporting period coverage
- 66 (retroactive to the inception date of the physician's last medical
- 67 malpractice policy) for participants of the plan at an additional
- 68 premium assessment for such coverage. The board shall encourage
- 69 participation in the insurance industry market. Any duly licensed
- 70 qualified Mississippi agent who writes a policy under the plan may
- 71 receive a commission not to exceed five percent (5%) of the
- 72 premium assessment as full compensation.
- 73 (b) The limits of coverage under the plan shall be as
- 74 follows:
- 75 (i) For participants who are "political
- 76 subdivisions" and participants who are "employees" of political
- 77 subdivisions, as such terms are defined under Section 11-46-1, a
- 78 maximum of Five Hundred Thousand Dollars (\$500,000.00), per single
- 79 occurrence, and Two Million Dollars (\$2,000,000.00), in the
- 80 aggregate, per year, for all occurrences;
- 81 (ii) For all other participants, a maximum of One
- 82 Million Dollars (\$1,000,000.00), per single occurrence, and Three

- 83 Million Dollars (\$3,000,000.00), in the aggregate, per year, for
- 84 all occurrences; and
- 85 (iii) For tail coverage, the plan shall provide
- 86 the same limits of coverage as designated in subparagraphs (i) and
- 87 (ii) of this paragraph (b).
- 88 (iv) For prior acts extended reporting period
- 89 coverage, the plan shall provide the same limits of coverage as
- 90 designated in subparagraphs (i) and (ii) of this paragraph (b).
- 91 For the purpose of providing funds, in addition to assessments,
- 92 for prior acts extending reporting period coverage, the
- 93 Mississippi Tort Claims Board shall use monies in the special fund
- 94 created under Section 4 of House Bill No. 1569, 2004 Regular
- 95 Session.
- 96 (3) Policies may be underwritten based on participant
- 97 history. All rates applicable to the coverage provided herein
- 98 shall be on an actuarially sound basis and calculated to be
- 99 self-supporting. Policies for prior acts extended reporting
- 100 period coverage shall be underwritten at the lowest premium rates
- 101 possible on an actuarially sound basis.
- 102 (4) Every participant in the plan shall:
- 103 (a) File with the board a written agreement, the form
- 104 and substance of which shall be determined by the board, signed by
- 105 a duly authorized representative of the participant, that the
- 106 participant will provide services to (i) Medicaid recipients, (ii)
- 107 State and School Employees Health Insurance Plan participants, and
- 108 (iii) Children's Health Insurance Program participants. The
- 109 agreement must provide, among other things, that the participant
- 110 will provide services to Medicaid recipients, State and School
- 111 Employees Health Insurance Plan participants, and Children's
- 112 Health Insurance Program participants in a manner that is
- 113 comparable to the services provided to all other patients and
- 114 shall be made without balance billing to the patient; and

- 115 (b) Pay all assessments and premiums established by the
- 116 board.
- 117 (5) This chapter shall not preclude any hospital,
- 118 institution for the aged or infirm, or other health care
- 119 facilities licensed by the State of Mississippi, physician, nurse
- 120 or other personnel who are duly licensed to practice in a hospital
- 121 or other health care facility licensed by the State of Mississippi
- 122 from procuring medical malpractice insurance from any source other
- 123 than the plan.
- 124 (6) Notwithstanding any other provision of this section to
- 125 the contrary, the Mississippi Torts Claim Board shall use so much
- 126 of the monies in the special fund created in Section 4 of House
- 127 Bill No. 1569, 2004 Regular Session, as may be necessary to pay
- 128 all medical malpractice insurance premiums for not more than an
- 129 aggregate of twenty-five (25) physicians described in Section
- 130 11-46-1(f)(ii).
- 131 (7) The Tort Claims Board shall have the following powers
- 132 and duties:
- 133 (a) To expend money from a loan from the Tort Claims
- 134 Fund in an amount not to exceed Five Hundred Thousand Dollars
- 135 (\$500,000.00) for the start-up costs of administering the Medical
- 136 Malpractice Insurance Availability Plan;
- 137 (b) To approve and pay claims of participants;
- 138 (c) To charge and collect assessments and fees from
- 139 participants in the plan;
- 140 (d) To contract with accountants, attorneys, actuaries
- 141 and any other experts deemed necessary to carry out the
- 142 responsibilities under the plan. The outsourcing of any function
- 143 of the board shall be provided by Mississippi residents or
- 144 Mississippi domicile corporations, if available;

145	(e) To employ not more than five (5) persons in
146	time-limited positions to assist the board in the administration
147	of the plan;

- (f) To contract for administration of the claims and service of the plan to a third party. The outsourcing of any function of the board shall be provided by Mississippi residents or Mississippi domicile corporations, if available;
- 152 (g) To use monies in the special fund created under

 153 Section 4 of House Bill No. 1569, 2004 Regular Session, for the

 154 purposes provided in subsections (2)(b)(iv) and (6) of this

 155 section.
- (h) To adopt and promulgate rules and regulations to
 implement the provisions of the plan. The Tort Claims Board shall
 adopt such rules and regulations as may be necessary to ensure
 that the plan remains actuarially sound. The board shall retain
 the limited liability established by Section 11-46-15; and
- (i) To submit an annual report on or before March 1

 162 each year to the House and Senate Insurance Committees. Such

 163 report shall contain:
- 164 (i) Certification by a qualified actuary that the 165 plan is solvent;
- (ii) The number of participants in the plan;

 (iii) The number of claims filed and paid by the
 plan; and
- 169 (iv) The amount of all assessments and fees
 170 collected from the participants in the plan.
- 171 (8) Nothing contained in this section shall be construed as
 172 repealing, amending or superseding the provisions of any other law
 173 and, if the provisions of this section conflict with any other
 174 law, then the provisions of such other law shall govern and
 175 control to the extent of the conflict.

- SECTION 3. Section 11-46-1, Mississippi Code of 1972, is
- 177 amended as follows:
- 178 11-46-1. As used in this chapter the following terms shall
- 179 have the meanings herein ascribed unless the context otherwise
- 180 requires:
- 181 (a) "Claim" means any demand to recover damages from a
- 182 governmental entity as compensation for injuries.
- 183 (b) "Claimant" means any person seeking compensation
- 184 under the provisions of this chapter, whether by administrative
- 185 remedy or through the courts.
- 186 (c) "Board" means the Mississippi Tort Claims Board.
- 187 (d) "Department" means the Department of Finance and
- 188 Administration.
- (e) "Director" means the executive director of the
- 190 department who is also the executive director of the board.
- 191 (f) "Employee" means:
- 192 (i) Any officer, employee or servant of the State
- 193 of Mississippi or a political subdivision of the state, including
- 194 elected or appointed officials and persons acting on behalf of the
- 195 state or a political subdivision in any official capacity,
- 196 temporarily or permanently, in the service of the state or a
- 197 political subdivision whether with or without compensation. The
- 198 term "employee" shall not mean a person or other legal entity
- 199 while acting in the capacity of an independent contractor under
- 200 contract to the state or a political subdivision; provided,
- 201 however, that for purposes of the limits of liability provided for
- 202 in Section 11-46-15, the term "employee" shall include physicians
- 203 under contract to provide health services with the State Board of
- 204 Health, the State Board of Mental Health or any county or
- 205 municipal jail facility while rendering services under such
- 206 contract. The term "employee" shall also include any physician,
- 207 dentist or other health care practitioner employed by the

208	University of Mississippi Medical Center (UMMC) and its
209	departmental practice plans who is a faculty member and provides
210	health care services only for patients at UMMC or its affiliated
211	practice sites. The term "employee" shall also include any
212	physician, dentist or other health care practitioner employed by
213	any university under the control of the Board of Trustees of State
214	Institutions of Higher Learning who practices only on the campus
215	of any university under the control of the Board of Trustees of
216	State Institutions of Higher Learning. The term "employee" shall
217	also include any physician, dentist or other health care
218	practitioner employed by the State Veterans Affairs Board and who
219	provides health care services for patients for the State Veterans
220	Affairs Board. The term "employee" shall also include Mississippi
221	Department of Human Services licensed foster parents for the
222	limited purposes of coverage under the Tort Claims Act as provided
223	in Section 11-46-8. For the purposes of the limits of liability
224	provided for in Section 11-46-15 and for no other purpose under
225	this chapter, the term "employee" also shall include any physician
226	who provides health care services to Medicaid recipients, State
227	and School Employees Health Insurance Plan participants and
228	Children's Health Insurance Program participants, provided that at
229	least thirty-five percent (35%) of the physician's patients, as
230	determined by the board, are Medicaid recipients, however, not to
231	exceed one hundred twenty-five (125) physicians; and
232	(ii) Any retired physician who provides volunteer
233	unpaid health care services to any public entity or private
234	entity. For the purposes of this subparagraph (ii), "public
235	entity" means any agency, department, institution, instrumentality
236	or political subdivision of the state, or any agency, department,
237	institution or instrumentality of any political subdivision of the
238	state; and "private entity" means any business, organization,

- 239 corporation, association or other legal entity which is not a
- 240 public entity.
- 241 (g) "Governmental entity" means and includes the state
- 242 and political subdivisions as herein defined.
- (h) "Injury" means death, injury to a person, damage to
- 244 or loss of property or any other injury that a person may suffer
- 245 that is actionable at law or in equity.
- 246 (i) "Political subdivision" means any body politic or
- 247 body corporate other than the state responsible for governmental
- 248 activities only in geographic areas smaller than that of the
- 249 state, including, but not limited to, any county, municipality,
- 250 school district, community hospital as defined in Section
- 251 41-13-10, Mississippi Code of 1972, airport authority or other
- 252 instrumentality thereof, whether or not such body or
- 253 instrumentality thereof has the authority to levy taxes or to sue
- 254 or be sued in its own name.
- 255 (j) "State" means the State of Mississippi and any
- 256 office, department, agency, division, bureau, commission, board,
- 257 institution, hospital, college, university, airport authority or
- 258 other instrumentality thereof, whether or not such body or
- 259 instrumentality thereof has the authority to levy taxes or to sue
- 260 or be sued in its own name.
- 261 (k) "Law" means all species of law including, but not
- 262 limited to, any and all constitutions, statutes, case law, common
- law, customary law, court order, court rule, court decision, court
- 264 opinion, court judgment or mandate, administrative rule or
- 265 regulation, executive order, or principle or rule of equity.
- 266 **SECTION 4.** There is created in the State Treasury a special
- 267 fund to the credit of the Mississippi Tort Claims Board, which
- 268 shall be comprised of any funds that may be made available for the
- 269 fund by the Legislature. Monies in the fund shall be expended by
- 270 the Mississippi Tort Claims Board, upon appropriation by the

```
Legislature, only for the purpose of providing additional funds
271
272
     for prior acts extended reporting period coverage as provided in
273
     Section 83-48-5 and for paying the medical malpractice premiums
274
     for those physicians described in Section 11-46-1(f)(ii) as
275
     provided for in Section 83-48-5. Unexpended amounts remaining in
276
     the special fund at the end of a fiscal year shall not lapse into
277
     the State General Fund, and any interest earned or investment
278
     earnings on amounts in the special fund shall be deposited to the
279
     credit of the special fund.
280
          SECTION 5.
                     The Tort Claims Board shall develop methods and
281
     promulgate rules and regulations to verify whether a physician
282
     meets the percentage requirement under Section 11-46-1(f) to
283
     qualify as an employee. There is created an advisory council to
284
     assist the Mississippi Tort Claims Board in determining whether a
285
     physician meets the percentage requirement under Section
286
     11-46-1(f) to qualify as an employee. The advisory council shall
287
     be composed of the Executive Director of the Mississippi Medical
288
     Association or his designee; the President of the Mississippi
289
     Medical and Surgical Association or his designee; the
290
     administrator of the Mississippi Tort Claims Board or his
     designee; two (2) physicians appointed by the Lieutenant Governor;
291
292
     two (2) physicians appointed by the Speaker of the House of
293
     Representatives and three (3) nonphysician members, one (1) from
     each Supreme Court district, appointed by the Governor.
294
295
          SECTION 6. That any medical provider or hospital or nursing
296
     home or other medical facility shall charge no more than the
297
     following amounts to patients or their representatives for
298
     photocopying any patient's records: Twenty Dollars ($20.00) for
299
     pages one (1) through twenty (20); One Dollar ($1.00) per page for
300
     the next eighty (80) pages; Fifty Cents (50¢) per page for all
     pages thereafter. Ten percent (10%) of the total charge may be
301
302
     added for postage and handling. Fifteen Dollars ($15.00) may be
```

- recovered by the medical provider or hospital or nursing home or other medical facility for retrieving medical records in archives at a location off the premises where the facility/office is located.
- 307 **SECTION 7.** This act shall take effect and be in force from 308 and after July 1, 2004.

Further, amend by striking the title in its entirety and inserting in lieu thereof the following:

AN ACT TO AMEND SECTION 83-48-5, MISSISSIPPI CODE OF 1972, TO 2 EXPAND THE MEDICAL MALPRACTICE INSURANCE AVAILABILITY PLAN THAT IS 3 ADMINISTERED BY THE MISSISSIPPI TORT CLAIMS BOARD TO MAKE AVAILABLE PRIOR ACTS EXTENDED REPORTING PERIOD COVERAGE TO ALL PARTICIPANTS OF THE PLAN AT ADDITIONAL PREMIUM ASSESSMENTS FOR 5 6 SUCH COVERAGE AND TO PAY ALL MEDICAL MALPRACTICE INSURANCE 7 PREMIUMS FOR CERTAIN RETIRED PHYSICIANS WHO PROVIDE VOLUNTEER 8 UNPAID HEALTH CARE SERVICES; TO AMEND SECTION 11-46-1, MISSISSIPPI 9 CODE OF 1972, TO REVISE THE DEFINITION OF "EMPLOYEE" FOR PURPOSES OF LIMITED LIABILITY UNDER THE TORT CLAIMS BOARD TO INCLUDE THOSE 10 11 PHYSICIANS WHO PROVIDE HEALTH CARE SERVICES TO MEDICAID 12 RECIPIENTS, STATE AND SCHOOL EMPLOYEES HEALTH INSURANCE PLAN 13 PARTICIPANTS AND CHILDREN'S HEALTH INSURANCE PROGRAM PARTICIPANTS IF AT LEAST THIRTY-FIVE PERCENT OF THE PHYSICIAN'S PATIENTS ARE 14 15 MEDICAID RECIPIENTS, OR NOT TO EXCEED ONE HUNDRED TWENTY-FIVE 16 PHYSICIANS; TO INCLUDE CERTAIN RETIRED PHYSICIANS WHO PROVIDE 17 VOLUNTEER UNPAID HEALTH CARE SERVICES TO ANY PUBLIC ENTITY OR 18 PRIVATE ENTITY; TO CREATE IN THE STATE TREASURY A SPECIAL FUND TO 19 THE CREDIT OF THE MISSISSIPPI TORT CLAIMS BOARD WHICH SHALL BE 20 COMPRISED OF ANY FUNDS MADE AVAILABLE FOR THE FUND BY THE 21 LEGISLATURE; TO PROVIDE THAT MONIES IN THE SPECIAL FUND SHALL BE 22 EXPENDED BY THE MISSISSIPPI TORT CLAIMS BOARD TO PROVIDE ADDITIONAL FUNDS FOR PRIOR ACT COVERAGE FOR PLAN PARTICIPANTS AND 23 TO PAY THE MEDICAL MALPRACTICE PREMIUMS FOR THOSE RETIRED 24 25 PHYSICIANS DESCRIBED HEREIN; TO CREATE AN ADVISORY COUNCIL TO 26 ASSIST THE MISSISSIPPI TORT CLAIMS BOARD IN DETERMINING WHETHER A 27 PHYSICIAN MEETS THE PERCENTAGE REQUIREMENT NECESSARY TO QUALIFY AS AN EMPLOYEE FOR LIMITED LIABILITY PURPOSES; TO PROVIDE RATES FOR 28 29 COPIES OF MEDICAL RECORDS THAT MAY BE CHARGED BY MEDICAL PROVIDERS 30 AND FACILITIES; AND FOR RELATED PURPOSES.