By: Representative Blackmon

To: Judiciary A

HOUSE BILL NO. 5

AN ACT TO AMEND SECTION 11-11-3, MISSISSIPPI CODE OF 1972, TO REVISE THE VENUE IN GENERAL CIVIL ACTIONS; TO AMEND SECTION 11-1-60, MISSISSIPPI CODE OF 1972, TO REVISE CAPS ON NONECONOMIC DAMAGES; TO PROVIDE FOR CLASS ACTIONS; TO AMEND SECTION 11-1-66, 3 MISSISSIPPI CODE OF 1972, TO REVISE PREMISES LIABILITY; TO AMEND SECTION 85-5-7, MISSISSIPPI CODE OF 1972, TO REVISE JOINT AND SEVERAL LIABILITY; TO AMEND SECTION 13-5-23, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT JURORS CAN ONLY BE EXCUSED FROM SERVICE FOR ILLNESS OR UNDUE HARDSHIP; TO CODIFY SECTION 13-5-24, MISSISSIPPI 7 8 9 CODE OF 1972, TO PROVIDE THAT JURORS CAN POSTPONE JURY SERVICE ONE 10 TIME ONLY; TO AMEND SECTION 13-5-25, MISSISSIPPI CODE OF 1972, TO LIMIT THE FREQUENCY OF JURY SERVICE; TO AMEND SECTION 13-5-28, MISSISSIPPI CODE OF 1972, TO REQUIRE NOTICE OF JURY SERVICE EXEMPTION ENTITLEMENT TO BE INCLUDED IN JUROR SUMMONSES; TO AMEND 11 12 13 14 SECTION 13-5-34, MISSISSIPPI CODE OF 1972, TO REVISE THE PUNISHMENT FOR FAILURE TO APPEAR FOR JURY SERVICE; TO CODIFY SECTION 13-5-99, MISSISSIPPI CODE OF 1972, TO PROVIDE EMPLOYMENT PROTECTIONS FOR JURORS; TO AMEND SECTION 25-7-61, MISSISSIPPI CODE 15 16 17 18 OF 1972, TO CREATE A LENGTHY TRIAL FUND; TO AMEND SECTION 33-1-5, 19 MISSISSIPPI CODE OF 1972, TO ELIMINATE CERTAIN JUROR EXEMPTIONS; TO REPEAL SECTIONS 41-17-7 AND 47-5-55, MISSISSIPPI CODE OF 1972, 20 21 WHICH PROVIDE CERTAIN EXEMPTIONS FROM JURY SERVICE; TO AMEND SECTION 11-46-1, MISSISSIPPI CODE OF 1972, TO REVISE THE 22 23 DEFINITION OF "EMPLOYEE" FOR PURPOSES OF LIMITED LIABILITY UNDER 24 25 THE TORT CLAIMS BOARD TO INCLUDE THOSE PHYSICIANS WHO PROVIDE HEALTH CARE SERVICES TO MEDICAID RECIPIENTS, STATE AND SCHOOL EMPLOYEES HEALTH INSURANCE PLAN PARTICIPANTS AND CHILDREN'S HEALTH 26 27 INSURANCE PROGRAM PARTICIPANTS IF AT LEAST THIRTY-FIVE PERCENT OF 28 THE PHYSICIAN'S PATIENTS ARE MEDICAID RECIPIENTS, OR NOT TO EXCEED 29 ONE HUNDRED TWENTY-FIVE PHYSICIANS; TO INCLUDE CERTAIN RETIRED 30 31 PHYSICIANS WHO PROVIDE VOLUNTEER UNPAID HEALTH CARE SERVICES TO 32 ANY PUBLIC ENTITY OR PRIVATE ENTITY; TO CREATE IN THE STATE TREASURY A SPECIAL FUND TO THE CREDIT OF THE MISSISSIPPI TORT 33 CLAIMS BOARD WHICH SHALL BE COMPRISED OF ANY FUNDS MADE AVAILABLE 35 FOR THE FUND BY THE LEGISLATURE; TO PROVIDE THAT MONIES IN THE SPECIAL FUND SHALL BE EXPENDED BY THE MISSISSIPPI TORT CLAIMS BOARD TO PROVIDE ADDITIONAL FUNDS FOR PRIOR ACT COVERAGE FOR PLAN 36 37 PARTICIPANTS AND TO PAY THE MEDICAL MALPRACTICE PREMIUMS FOR THOSE 38 39 RETIRED PHYSICIANS DESCRIBED HEREIN; TO CREATE AN ADVISORY COUNCIL 40 TO ASSIST THE MISSISSIPPI TORT CLAIMS BOARD IN DETERMINING WHETHER 41 A PHYSICIAN MEETS THE PERCENTAGE REQUIREMENT NECESSARY TO QUALIFY AS AN EMPLOYEE FOR LIMITED LIABILITY PURPOSES; TO PROVIDE FOR 42 MEDICAL PRACTICE OF DISCLOSURE; TO IMPOSE POWERS AND DUTIES ON THE 43 STATE BOARD OF MEDICAL LICENSURE AND THE STATE DEPARTMENT OF 44 45 HEALTH; TO PROVIDE FOR PENALTIES; TO AMEND SECTION 73-43-11, MISSISSIPPI CODE OF 1972, IN CONFORMITY; TO AMEND SECTION 46 73-25-27, MISSISSIPPI CODE OF 1972, TO PROVIDE THE RIGHT FOR 47 HARMED PATIENTS TO ATTEND DISCIPLINARY PROCEEDINGS INVOLVING THE PHYSICIAN RESPONSIBLE FOR THE HARM; TO REQUIRE STATEWIDE 49 PUBLICATION OF RECALL NOTICES; TO PROVIDE FOR A DIRECT ACTION AGAINST AN INSURER; TO PROVIDE THAT POLICY SHALL CONTAIN 50 51 PROVISIONS THAT INSOLVENCY OR BANKRUPTCY OF THE INSURED SHALL NOT 52

H. B. No. 5 041E/HR03/R26 PAGE 1 (CJR\LH) *HR03/R26*

N1/2

- 53 RELEASE THE INSURER FROM LIABILITY; TO PROVIDE THAT ACTIONS MAY BE
- 54 BROUGHT AGAINST THE INSURER ALONE IN CERTAIN SITUATIONS; TO
- 55 PROVIDE THAT THE INSURANCE POLICY SHALL BE ADMISSIBLE INTO
- 56 EVIDENCE; TO PROVIDE THAT ALL MALPRACTICE CLAIMS SHALL BE REVIEWED
- 57 BY A MEDICAL REVIEW PANEL; TO ALLOW PARTIES TO MUTUALLY AGREE TO
- 58 OPT OUT OF THIS REQUIREMENT; TO ESTABLISH THE MEMBERSHIP REVIEW
- 59 PANEL; TO PROVIDE WHAT EVIDENCE MAY BE CONSIDERED BY THE PANEL; TO
- 60 PROVIDE THE FORM OF THE DECISION; TO PROVIDE FOR PANELIST IMMUNITY
- 61 AND COMPENSATION; TO PROVIDE THAT THE LOSING PARTY SHALL PAY
- 62 ATTORNEY FEES TO THE PREVAILING PARTY UNDER CERTAIN CIRCUMSTANCES;
- 63 TO AMEND SECTION 11-46-19, MISSISSIPPI CODE OF 1972, IN CONFORMITY
- 64 THERETO; AND FOR RELATED PURPOSES.
- BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:
- 66 **SECTION 1.** Section 11-11-3, Mississippi Code of 1972, is
- 67 amended as follows:
- 68 11-11-3. (1) (a) (i) Civil actions of which the circuit
- 69 court has original jurisdiction shall be commenced in the county
- 70 where the defendant resides, or, if a corporation, in the county
- 71 of its principal place of business, or in the county where a
- 72 <u>substantial</u> alleged act or omission occurred or where <u>a</u>
- 73 substantial event that caused the injury occurred.
- 74 (ii) Civil actions alleging a defective product
- 75 may also be commenced in the county where the plaintiff obtained
- 76 the product.
- 77 (b) If venue in a civil action against a nonresident
- 78 defendant cannot be asserted under paragraph (a) of this
- 79 subsection (1), a civil action against a nonresident may be
- 80 commenced in the county where the plaintiff resides or is
- 81 domiciled.
- 82 (2) In any civil action where more than one (1) plaintiff is
- 83 joined, each plaintiff shall independently establish proper venue;
- 84 it is not sufficient that venue is proper for any other plaintiff
- 85 joined in the civil action.
- SECTION 2. Section 11-1-60, Mississippi Code of 1972, is
- 87 amended as follows:
- 88 11-1-60. (1) For the purposes of this section, the
- 89 following words and phrases shall have the meanings ascribed
- 90 herein unless the context clearly requires otherwise:

```
91 (a) "Noneconomic damages" means subjective,
```

- 92 nonpecuniary damages arising from death, pain, suffering,
- 93 inconvenience, mental anguish, worry, emotional distress, loss of
- 94 society and companionship, loss of consortium, bystander injury,
- 95 physical impairment, injury to reputation, humiliation,
- 96 embarrassment, loss of the enjoyment of life, hedonic damages,
- 97 other nonpecuniary damages, and any other theory of damages such
- 98 as fear of loss, illness or injury. The term "noneconomic
- 99 damages" shall not include damages for disfigurement, nor does it
- 100 include punitive or exemplary damages.
- 101 (b) "Actual economic damages" means objectively
- 102 verifiable pecuniary damages arising from medical expenses and
- 103 medical care, rehabilitation services, custodial care,
- 104 disabilities, loss of earnings and earning capacity, loss of
- 105 income, burial costs, loss of use of property, costs of repair or
- 106 replacement of property, costs of obtaining substitute domestic
- 107 services, loss of employment, loss of business or employment
- 108 opportunities, and other objectively verifiable monetary losses.
- 109 * * *
- 110 (2) (a) In any civil action, in the event the trier of fact
- 111 finds the defendant liable, they shall not award the plaintiff
- 112 more than the following for noneconomic damages:
- 113 (i) For claims for causes of action filed on or
- 114 after July 1, 2004, but before July 1, 2011, the sum of Two
- 115 Million Dollars (\$2,000,000.00);
- 116 (ii) For claims for causes of action filed on or
- 117 after July 1, 2011, but before July 1, 2017, the sum of Three
- 118 Million Dollars (\$3,000,000.00);
- 119 (iii) For claims for causes of action filed on or
- 120 after July 1, 2017, the sum of Five Million Dollars
- 121 (\$5,000,000.00).
- 122 It is the intent of this section to limit all noneconomic
- 123 damages to the above.

H. B. No. 5 *HRO3/R26* 041E/HR03/R26 PAGE 3 (CUR\LH)

- (b) The trier of fact shall not be advised of the

 limitations imposed by this subsection (2) and the judge shall
- 126 appropriately reduce any award of noneconomic damages that exceeds
- 127 the applicable limitation.
- 128 (3) The limitation on noneconomic damages set forth in
- 129 subsection (2) shall not apply in cases where the judge determines
- 130 that a jury may impose punitive damages.
- 131 (4) Nothing in this section shall be construed to impose a
- 132 limitation on damages for disfigurement or actual economic
- damages.
- 134 **SECTION 3.** (1) One or more members of a class may sue or be
- 135 sued as representative parties on behalf of all only if (a) the
- 136 class is so numerous that joinder of all members is impracticable,
- 137 (b) there are questions of law or fact common to the class, (c)
- 138 the claims or defenses of the representative parties are typical
- 139 of the claims or defenses of the class, and (d) the representative
- 140 parties will fairly and adequately protect the interests of the
- 141 class.
- 142 (2) An action may be maintained as a class action if the
- 143 prerequisites of subsection (1) are satisfied, and in addition:
- 144 (a) The prosecution of separate actions by or against
- 145 individual members of the class would create a risk of:
- 146 (i) Inconsistent or varying adjudications with
- 147 respect to individual members of the class which would establish
- 148 incompatible standards of conduct for the party opposing the
- 149 class, or
- 150 (ii) Adjudications with respect to individual
- 151 members of the class which would as a practical matter be
- 152 dispositive of the interests of the other members not parties to
- 153 the adjudications or substantially impair or impede their ability
- 154 to protect their interests; or
- 155 (b) The party opposing the class has acted or refused
- 156 to act on grounds generally applicable to the class, thereby

making appropriate final injunctive relief or corresponding declaratory relief with respect to the class as a whole; or

- (c) The court finds that the questions of law or fact common to the members of the class predominate over any questions affecting only individual members, and that a class action is superior to other available methods for the fair and efficient adjudication of the controversy. The matters pertinent to the findings include: (i) the interest of members of the class in individually controlling the prosecution or defense of separate actions; (ii) the extent and nature of any litigation concerning the controversy already commenced by or against members of the class; (iii) the desirability or undesirability of concentrating the litigation of the claims in the particular forum; (iv) the difficulties likely to be encountered in the management of a class action.
- (3) (a) As soon as practicable after the commencement of an action brought as a class action, the court shall determine by order whether it is to be so maintained. An order under this subdivision may be conditional, and may be altered or amended before the decision on the merits.
- In any class action maintained under subsection 177 (b) 178 (2)(c), the court shall direct to the members of the class the best notice practicable under the circumstances, including 179 180 individual notice to all members who can be identified through 181 reasonable effort. The notice shall advise each member that (i) the court will exclude the member from the class if the member so 182 183 requests by a specified date; (ii) the judgment, whether favorable or not, will include all members who do not request exclusion; and 184 (iii) any member who does not request exclusion may, if the member 185 186 desires, enter an appearance through counsel.
- (c) The judgment in an action maintained as a class
 action under subsection (2)(a) or (2)(b), whether or not favorable
 to the class, shall include and describe those whom the court
 H. B. No. 5 *HRO3/R26*

159

160

161

162

163

164

165

166

167

168

169

170

- 190 finds to be members of the class. The judgment in an action
- 191 maintained as a class action under subsection (2)(c), whether or
- 192 not favorable to the class, shall include and specify or describe
- 193 those to whom the notice provided in subsection (3)(b) was
- 194 directed, and who have not requested exclusion, and whom the court
- 195 finds to be members of the class.
- 196 (d) When appropriate (i) an action may be brought or
- 197 maintained as a class action with respect to particular issues, or
- 198 (ii) a class may be divided into subclasses and each subclass
- 199 treated as a class, and the provisions of this rule shall then be
- 200 construed and applied accordingly.
- 201 (4) (a) When a person sues or is sued as a representative
- 202 of a class, the court must, at an early practicable time,
- 203 determine by order whether to certify the action as a class
- 204 action.
- 205 (b) An order certifying a class action must define the
- 206 class and the class claims, issues or defenses and must appoint
- 207 class counsel under subsection (9).
- 208 (c) An order under this subsection may be altered or
- 209 amended before final judgment.
- 210 (d) (i) For any class certified under this section or
- 211 the court may direct appropriate notice to the class.
- 212 (ii) For any class certified under this section,
- 213 the court must direct to class members the best notice practicable
- 214 under the circumstances, including individual notice to all
- 215 members who can be identified through reasonable effort. The
- 216 notice must concisely and clearly state in plain, easily
- 217 understood language:
- 218 1. The nature of the action;
- 219 2. The definition of the class certified;
- 3. The class claims, issues or defenses;
- 221 4. That a class member may enter an
- 222 appearance through counsel if the member so desires;

223 5	5	That	the	court	will	exclude	from	the	~ 1	ass

- 224 any member who requests exclusion, stating when and how members
- 225 may elect to be excluded; and
- 226 6. The binding effect of a class judgment on
- 227 class members under this section.
- (e) The judgment in an action maintained as a class
- 229 action under subsection (3)(a) or (3)(b), whether or not favorable
- 230 to the class, shall include and describe those whom the court
- 231 finds to be members of the class. The judgment in an action
- 232 maintained as a class action under subsection (3)(c), whether or
- 233 not favorable to the class, shall include and specify or describe
- 234 those to whom the notice provided in subsection (4)(b) was
- 235 directed, and who have not requested exclusion, and whom the court
- 236 finds to be members of the class.
- 237 (f) When appropriate (i) an action may be brought or
- 238 maintained as a class action with respect to particular issues, or
- 239 (ii) a class may be divided into subclasses and each subclass
- 240 treated as a class, and the provisions of this rule shall then be
- 241 construed and applied accordingly.
- 242 (5) In the conduct of actions to which this rule applies,
- 243 the court may make appropriate orders:
- 244 (a) Determining the course of proceedings or
- 245 prescribing measures to prevent undue repetition or complication
- 246 in the presentation of evidence or argument;
- 247 (b) Requiring, for the protection of the members of the
- 248 class or otherwise for the fair conduct of the action, that notice
- 249 be given in such manner as the court may direct to some or all of
- 250 the members of any step in the action, or of the proposed extent
- 251 of the judgment, or of the opportunity of members to signify
- 252 whether they consider the representation fair and adequate, to
- 253 intervene and present claims or defenses, or otherwise to come
- 254 into the action;

255	(C)	Imposing	conditions	on	the	representative	parties

- 256 or on intervenors;
- 257 (d) Requiring that the pleadings be amended to
- 258 eliminate therefrom allegations as to representation of absent
- 259 persons, and that the action proceed accordingly;
- 260 (e) Dealing with similar procedural matters. The
- 261 orders may be combined and may be altered or amended as may be
- 262 desirable from time to time.
- 263 (6) A class action shall not be dismissed or compromised
- 264 without the approval of the court, and notice of the proposed
- 265 dismissal or compromise shall be given to all members of the class
- 266 in such manner as the court directs.
- 267 (7) (a) (i) The court must approve any settlement,
- 268 voluntary dismissal or compromise of the claims, issues or
- 269 defenses of a certified class.
- 270 (ii) The court must direct notice in a reasonable
- 271 manner to all class members who would be bound by a proposed
- 272 settlement, voluntary dismissal or compromise.
- 273 (iii) The court may approve a settlement,
- 274 voluntary dismissal or compromise that would bind class members
- 275 only after a hearing and on finding that the settlement, voluntary
- 276 dismissal or compromise is fair, reasonable and adequate.
- (b) The parties seeking approval of a settlement,
- 278 voluntary dismissal or compromise must file a statement
- 279 identifying any agreement made in connection with the proposed
- 280 settlement, voluntary dismissal or compromise.
- 281 (c) In an action previously certified as a class
- 282 action, the court may refuse to approve a settlement unless it
- 283 affords a new opportunity to request exclusion to individual class
- 284 members who had an earlier opportunity to request exclusion but
- 285 did not do so.

286	(d) (i) Any class member may object to a proposed
287	settlement, voluntary dismissal or compromise that requires court
288	approval.

- 289 (ii) An objection made under this subsection may 290 be withdrawn only with the court's approval.
- 291 (8) A court of appeals may in its discretion permit an
 292 appeal from an order of a district court granting or denying class
 293 action certification under this rule if application is made to it
 294 within ten (10) days after entry of the order. An appeal does not
 295 stay proceedings in the district court unless the district judge
 296 or the court of appeals so order.
- 297 (9) (a) Unless a statute provides otherwise, a court that 298 certifies a class must appoint class counsel.
- 299 (b) An attorney appointed to serve as class counsel 300 must fairly and adequately represent the interests of the class.
- 301 (c) In appointing class counsel, the court:
- 302 (i) Must consider:
- 1. The work counsel has done in identifying or investigating potential claims in the action;
- 2. Counsel's experience in handling class

 306 actions, other complex litigation and claims of the type asserted

 307 in the action;
- 308 3. Counsel's knowledge of the applicable law;
- 310 4. The resources counsel will commit to 311 representing the class;
- (ii) May consider any other matter pertinent to

 counsel's ability to fairly and adequately represent the interests

 of the class;
- (iii) May direct potential class counsel to
 provide information on any subject pertinent to the appointment
 and to propose terms for attorney fees and nontaxable costs; and

309

and

318 (iv) May make further orders in connection v
--

- 319 the appointment.
- 320 (d) The court may designate interim counsel to act on
- 321 behalf of the putative class before determining whether to certify
- 322 the action as a class action.
- 323 (e) The court may appoint one or more individual
- 324 attorneys or one or more law firms as class counsel which the
- 325 court determines is best able to represent the interests of the
- 326 class.
- 327 (f) The order appointing class counsel may include
- 328 provisions about the award of attorney fees or nontaxable costs.
- 329 (10) In an action certified as a class action, the court may
- 330 award reasonable attorney fees and nontaxable costs authorized by
- 331 law or by agreement of the parties as follows:
- 332 (a) A claim for an award of attorney fees and
- 333 nontaxable costs must be made by motion, subject to the provisions
- 334 of this subsection, at a time set by the court. Notice of the
- 335 motion must be served on all parties and, for motions by class
- 336 counsel, directed to class members in a reasonable manner.
- 337 (b) A class member, or a party from whom payment is
- 338 sought, may object to the motion.
- 339 (c) The court may hold a hearing and must find the
- 340 facts and state its conclusions of law on the motion.
- 341 (d) The court may refer issues related to the amount of
- 342 the award to a special master or to a magistrate judge.
- 343 **SECTION 4.** Section 11-1-66, Mississippi Code of 1972, is
- 344 amended as follows:
- 345 11-1-66. (1) No owner, occupant, lessee or managing agent
- 346 of property shall be civilly liable for the criminal acts of a
- 347 third party, unless such owner, occupant, lessee or managing agent
- 348 knew or, with the exercise of reasonable care, should have known
- 349 of the risk of criminal conduct on such property and the failure

- 350 to exercise reasonable care to deter such foreseeable conduct is a
- 351 proximate cause of damages to an individual or entity.
- 352 (2) No owner, occupant, lessee or managing agent of property
- 353 shall be liable for the death or injury of an independent
- 354 contractor or the independent contractor's employees resulting
- 355 from dangers of which the contractor knew or reasonably should
- 356 have known.
- 357 **SECTION 5.** Section 85-5-7, Mississippi Code of 1972, is
- 358 amended as follows:
- 359 85-5-7. (1) As used in this section "fault" means an act or
- 360 omission of a person which is a proximate cause of injury or death
- 361 to another person or persons, damages to property, tangible or
- 362 intangible, or economic injury, including, but not limited to,
- 363 negligence, malpractice, strict liability, absolute liability or
- 364 failure to warn. "Fault" shall not include any tort which results
- 365 from an act or omission committed with a specific wrongful intent.
- 366 * * *
- 367 (2) Except as otherwise provided in subsection (4) of this
- 368 section, in any civil action based on fault, the liability for
- 369 damages caused by two (2) or more persons shall be several only,
- 370 and not joint and several and a joint tort-feasor shall be liable
- 371 only for the amount of damages allocated to him in direct
- 372 proportion to his percentage of fault. In assessing percentages
- 373 of fault an employer and the employer's employee or a principal
- 374 and the principal's agent shall be considered as one (1) defendant
- 375 when the liability of such employer or principal has been caused
- 376 by the wrongful or negligent act or omission of the employee or
- 377 agent.
- 378 * * *
- 379 (3) Nothing in this section shall eliminate or diminish any
- 380 defenses or immunities which currently exist, except as expressly
- 381 noted herein.

(4) Joint and several liability shall be imposed on all who 382 383 consciously and deliberately pursue a common plan or design to commit a tortious act, or actively take part in it. Any person 384 385 held jointly and severally liable under this section shall have a 386 right of contribution from his fellow defendants acting in 387 concert. 388 In actions involving joint tort-feasors, the trier of (5) 389 fact shall determine the percentage of fault for each party 390 alleged to be at fault. 391 392 (6) Nothing in this section shall be construed to create a cause of action. Nothing in this section shall be construed, in 393 394 any way, to alter the immunity of any person. 395 SECTION 6. Section 13-5-23, Mississippi Code of 1972, is amended as follows: 396 397 13-5-23. (1) All qualified persons shall be liable to serve 398 as jurors, unless excused by the court for one (1) of the 399 following causes: 400 When the juror is ill and, on account of the 401 illness, is incapable of performing jury service; or 402 (b) When the juror's attendance would cause undue or 403 extreme physical or financial hardship to the prospective juror or 404 a person under his or her care or supervision. * * * 405 406 An excuse of illness under <u>subsection (1)(a) of this</u> 407 section may be made to the clerk of court outside of open court by providing the clerk with * * * a certificate of a licensed 408 409 physician * * *, stating that the juror is ill and is unfit for 410 jury service, in which case the clerk may excuse the juror. If 411 the excuse of illness is not supported by a physician's certificate, a judge of the court for which the individual was 412

called to jury service shall decide whether to excuse an

individual under subsection (1)(a) of this section.

HR03/R26

413

414

H. B. No. 5
041E/HR03/R26
PAGE 12 (CJR\LH)

415	(3) (a) The test of an excuse under subsection (1)(b) of
416	this section for undue or extreme physical or financial hardship
417	shall be whether the individual would either:
418	(i) Be required to abandon a person under his or
419	her personal care or supervision due to the impossibility of
420	obtaining an appropriate substitute caregiver during the period of
421	participation in the jury pool or on the jury; or
422	(ii) Incur costs that would have a substantial
423	adverse impact on the payment of the individual's necessary daily
424	living expenses or on those for whom he or she provides the
425	principal means of support; or
426	(iii) Suffer physical hardship that would result
427	in illness or disease.
428	(b) "Undue or extreme physical or financial hardship"
429	does not exist solely based on the fact that a prospective juror
430	will be required to be absent from his or her place of employment
431	or business.
432	(c) A judge of the court for which the individual was
433	called to jury service shall decide whether to excuse an
434	individual under subsection (1)(b) of this section.
435	(d) A person asking to be excused based on a finding of
436	undue or extreme physical or financial hardship must take all
437	actions necessary to have obtained a ruling on that request by no
438	later than the date on which the individual is scheduled to appear
439	for jury duty.
440	(e) A person asking a judge to grant an excuse under
441	subsection (1)(b) of this section shall be required to provide the
442	judge with documentation such as, but not limited to, federal and
443	state income tax returns or other information which verifies
444	<pre>income, medical statements from licensed physicians, proof of</pre>
445	dependency or guardianship and similar documents, which the judge
446	finds to clearly support the request to be excused. Failure to
447	provide satisfactory documentation shall result in a denial of the
	H. B. No. 5 *HRO3/R26* 041E/HR03/R26 PAGE 13 (CJR\LH)

- 448 request to be excused. Any documentation produced under this
- 449 paragraph shall not be a public record.
- 450 (4) After two (2) years, a person excused from jury service
- 451 shall become eligible once again for qualification as a juror
- 452 unless the person was excused from service permanently. A person
- 453 is excused from jury service permanently only when the deciding
- 454 judge determines that the underlying grounds for being excused are
- 455 of a permanent nature.
- 456 $\underline{(5)}$ * * * A tales juror * * * shall not be compelled to
- 457 serve two (2) days successively unless the case in which the juror
- 458 is impaneled continues longer than one (1) day. Grand jurors
- 459 shall serve until discharged by the court.
- 460 **SECTION 7.** The following provision shall be codified as
- 461 Section 13-5-24, Mississippi Code of 1972:
- 462 13-5-24. (1) Notwithstanding any other provisions of this
- 463 chapter, individuals scheduled to appear for jury service have the
- 464 right to postpone the date of their initial appearance for jury
- 465 service one (1) time only. Postponements shall be granted upon
- 466 request, provided that:
- 467 (a) The juror has not been granted a postponement
- 468 within the past two (2) years;
- (b) The prospective juror appears in person or contacts
- 470 the clerk of the court by telephone, electronic mail or in writing
- 471 to request a postponement; and
- 472 (c) Prior to the grant of a postponement with the
- 473 concurrence of the clerk of the court, the prospective juror fixes
- 474 a date certain to appear for jury service that is within the next
- 475 two (2) terms of court but not more than twelve (12) months after
- 476 the date on which the prospective juror originally was called to
- 477 serve and on which date the court will be in session.
- 478 (2) A subsequent request to postpone jury service may be
- 479 approved by a judicial officer only in the event of an extreme
- 480 emergency, such as a death in the family, sudden illness, or a

- natural disaster or a national emergency in which the prospective juror is personally involved, that could not have been anticipated at the time the initial postponement was granted. Prior to the grant of a second postponement, the prospective juror must fix a date certain on which the individual will appear for jury service within twelve (12) months of the postponement on a date when the
- court will be in session.

 SECTION 8. Section 13-5-25, Mississippi Code of 1972, is
- 490 13-5-25. Every citizen over sixty-five (65) years of age, 491 and everyone who has served on the regular panel as a juror in the actual trial of one or more litigated cases within two (2) years, 492 493 shall be exempt from service if he claims the privilege * * *. 494 qualified juror shall be excluded because of any such reasons, but 495 the same shall be a personal privilege to be claimed by any person 496 selected for jury duty. Any citizen over sixty-five (65) years of 497 age may claim this personal privilege outside of open court by 498 providing the clerk of court with information that allows the 499 clerk to determine the validity of the claim.
- Provided, however, that no person who has served on the regular panel as a juror in the actual trial of one or more litigated cases in one (1) court may claim the exemption in any other court where he may be called to serve.
- 504 **SECTION 9.** Section 13-5-28, Mississippi Code of 1972, is 505 amended as follows:
- or drawn, the clerk thereafter shall cause each person drawn for jury service to be served with a summons, either personally or by mail, addressed to him at his usual residence, business or post office address, requiring him to report for jury service at a specified time and place. The summons shall include instructions to the potential jurors that explain, in layman's terms, the provisions
- 513 of Sections 13-5-23 and 13-5-99.

489

amended as follows:

SECTION 10. Section 13-5-34, Mississippi Code of 1972, is 514 515 amended as follows: (1) A person summoned for jury service who fails 516 13-5-34. 517 to appear or to complete jury service as directed, and who has 518 failed to obtain a postponement in compliance with the provisions for requesting a postponement, or who fails to appear on the date 519 set pursuant to Section 13-5-24 shall be ordered by the court to 520 521 appear forthwith and show cause for his failure to comply with the 522 If he fails to show good cause for noncompliance with summons. the summons he is in civil contempt of court and * * * may be 523 524 fined not more than Five Hundred Dollars (\$500.00) or imprisoned not more than three (3) days, or both. The prospective juror may 525 526 be excused from paying sanctions for good cause shown or in the 527 interest of justice. (2) In addition to, or in lieu of, the fine or imprisonment 528 529 provided in subsection (1) of this section, the court may order that the prospective juror complete a period of community service 530 531 for a period no less than if the prospective juror would have completed jury service, and provide proof of completion of this 532 533 community service to the court. 534 SECTION 11. The following provision shall be codified as 535 Section 13-5-99, Mississippi Code of 1972: 536 13-5-99. (1) It shall be unlawful for any employer or any 537 other person to persuade or attempt to persuade any juror to avoid 538 jury service; to intimidate or to threaten any juror in that respect; or to remove or otherwise subject an employee to adverse 539 540 employment action as a result of jury service if the employee 541 notifies his or her employer that he or she has been summoned to serve as a juror within a reasonable period of time after receipt 542 543 of a summons. It shall be unlawful for an employer to require or 544 (2)

request an employee to use annual, vacation or sick leave for time

spent responding to a summons for jury duty, time spent

HR03/R26

545

546

H. B. No. 5
041E/HR03/R26
PAGE 16 (CJR\LH)

- participating in the jury selection process, or time spent
 actually serving on a jury. Nothing in this provision shall be
 construed to require an employer to provide annual, vacation or
 sick leave to employees under the provisions of this statute who
 otherwise are not entitled to such benefits under company
 policies.
- 553 (3) Any violation of subsection (1) or (2) of this section 554 shall be deemed an interference with the administration of justice 555 and a contempt of court and punishable as such.
- 556 (4) A court shall automatically postpone and reschedule the 557 service of a summoned juror employed by an employer with five (5) 558 or fewer full-time employees, or their equivalent, if another 559 employee of that employer has previously been summoned to appear 560 during the same period. Such postponement will not constitute the 561 excused individual's right to one (1) automatic postponement under 562 Section 13-5-24.
- 563 **SECTION 12.** Section 25-7-61, Mississippi Code of 1972, is amended as follows:
- 565 25-7-61. (1) Fees of jurors shall be payable as follows:
 - (a) Grand jurors and petit jurors in the chancery, county, circuit and special eminent domain courts shall be paid an amount to be set by the board of supervisors, not to be less than Twenty-five Dollars (\$25.00) per day and not to be greater than Forty Dollars (\$40.00) per day, plus mileage authorized in Section 25-3-41. In the trial of all cases where jurors are in charge of bailiffs and are not permitted to separate, the sheriff with the

approval of the trial judge may pay for room and board of jurors

No grand juror shall receive any compensation except mileage unless he shall have been sworn as provided by Section 13-5-45; and no petit juror except those jurors called on special venires shall receive any compensation authorized under this subsection

on panel for actual time of trial.

566

567

568

569

570

571

572

573

- except mileage unless he shall have been sworn as provided by Section 13-5-71.
- (b) Jurors making inquisitions of idiocy, lunacy or of unsound mind and jurors on coroner's inquest shall be paid Five

 Dollars (\$5.00) per day plus mileage authorized in Section 25-3-41 by the county treasurer on order of the board of supervisors on certificate of the clerk of the chancery court in which such
- 587 Jurors in the justice courts shall be paid an (c) amount of not less than Ten Dollars (\$10.00) per day and not more 588 589 than Fifteen Dollars (\$15.00) per day, to be established by the 590 board of supervisors. In all criminal cases in the justice court 591 wherein the prosecution fails, the fees of jurors shall be paid by 592 the county treasurer on order of the board of supervisors on 593 certificate of the county attorney in all counties that have 594 county attorneys, otherwise by the justice court judge.
- 595 (2) Any juror may return the fees provided as compensation 596 for service as a juror to the county which paid for such person's 597 service as a juror. The fees returned to the county may be 598 earmarked for a particular purpose to be selected by the juror, 599 including:
- 600 (a) The local public library;
- 601 (b) Local law enforcement;

586

inquisition is held.

- 602 (c) The Mississippi Fire Fighters Memorial Burn Center 603 Fund created in Section 7-9-70, Mississippi Code of 1972; or
- 604 (d) Any other governmental agency.
- (3) The Administrative Office of Courts shall promulgate

 rules to establish a Lengthy Trial Fund to be used to provide full

 or partial wage replacement or wage supplementation to jurors who

 serve as petit jurors in civil cases for more than ten (10) days.
- (a) The court rules shall provide for the following:
- (i) The selection and appointment of an
- 611 administrator for the fund.

H. B. No. 5 *HRO3/R26* 041E/HR03/R26 PAGE 18 (CJR\LH)

612	(ii) Procedures for the administration of the
613	fund, including payments of salaries of the administrator and
614	other necessary personnel.
615	(iii) Procedures for the accounting, auditing and
616	investment of money in the Lengthy Trial Fund.
617	(iv) A report by the Administrative Office of
618	Courts on the administration of the Lengthy Trial Fund in its
619	annual report on the judicial branch, setting forth the money
620	collected for and disbursed from the fund.
621	(b) The administrator shall use any monies deposited in
622	the Lengthy Trial Fund to pay full or partial wage replacement or
623	supplementation to jurors whose employers pay less than full
624	regular wages when the period of jury service lasts more than ten
625	(10) days.
626	(c) The court may pay replacement or supplemental wages
627	of up to Three Hundred Dollars (\$300.00) per day per juror
628	beginning on the eleventh day of jury service. In addition, for
629	any jurors who qualify for payment by virtue of having served on a
630	jury for more than ten (10) days, the court, upon finding that
631	such service posed a significant financial hardship to a juror,
632	even in light of payments made with respect to jury service after
633	the tenth day, may award replacement or supplemental wages of up
634	to One Hundred Dollars (\$100.00) per day from the fourth to the
635	tenth day of jury service.
636	(d) Any juror who is serving or has served on a jury
637	that qualifies for payment from the Lengthy Trial Fund, provided
638	the service commenced on or after the July 1, 2004, may submit a
639	request for payment from the Lengthy Trial Fund on a form that the
640	administrator provides. Payment shall be limited to the
641	difference between the state-paid jury fee and the actual amount
642	of wages a juror earns, up to the maximum level payable, minus any
643	amount the juror actually receives from the employer during the
644	same time period.
	H. B. No. 5 *HRO3/R26* 041E/HR03/R26 PAGE 19 (CJR\LH)

645	(i) The form shall disclose the juror's regular
646	wages, the amount the employer will pay during the term of jury
647	service starting on the eleventh day and thereafter, the amount of
648	replacement or supplemental wages requested, and any other
649	information the administrator deems necessary for proper payment.
650	(ii) The juror also shall be required to submit
651	verification from the employer as to the wage information provided
652	to the administrator, for example, the employee's most recent
653	earnings statement or similar document, prior to initiation of
654	payment from the fund.
655	(iii) If an individual is self-employed or
656	receives compensation other than wages, the individual may provide
657	a sworn affidavit attesting to his or her approximate gross weekly
658	income, together with such other information as the administrator
659	may require, in order to verify weekly income.
660	SECTION 13. Section 33-1-5, Mississippi Code of 1972, is
661	amended as follows:
662	33-1-5. Any member of the Mississippi National Guard $\underline{\text{on}}$
663	active duty shall be exempt from jury duty upon presenting a
664	current written statement from his superior officer that such jury
665	service will be likely to interfere with his military duties.
666	SECTION 14. Section 41-17-7, Mississippi Code of 1972, which
667	provides for the exemption from jury service of state insane
668	hospital personnel, is repealed.
669	SECTION 15. Section 47-5-55, Mississippi Code of 1972, which
670	provides for the exemption from jury service of state correctional
671	system employees and officers, is repealed.
672	SECTION 16. The Legislature recognizes the importance of
673	assuring adequate health care services for all Mississippians, and
674	it acknowledges that physicians are a vital component of providing
675	such services. The Legislature finds that because of the makeup
676	of the citizenry of the state and the percentage of citizens who
677	are (a) Medicaid recipients, (b) State and School Employees Health
	H. B. No. 5 *HRO3/R26* 041E/HR03/R26 PAGE 20 (CJR\LH)

- 678 Insurance Plan participants and (c) Children's Health Insurance
- 679 Program participants, physicians who provide health care services
- 680 to such individuals are providing an essential public service and
- 681 that it is in the public interest to provide funding to further
- 682 address medical malpractice insurance needs of these physicians.
- 683 **SECTION 17.** Section 11-46-1, Mississippi Code of 1972, is
- 684 amended as follows:
- 685 11-46-1. As used in this chapter the following terms shall
- 686 have the meanings herein ascribed unless the context otherwise
- 687 requires:
- 688 (a) "Claim" means any demand to recover damages from a
- 689 governmental entity as compensation for injuries.
- (b) "Claimant" means any person seeking compensation
- 691 under the provisions of this chapter, whether by administrative
- 692 remedy or through the courts.
- 693 (c) "Board" means the Mississippi Tort Claims Board.
- (d) "Department" means the Department of Finance and
- 695 Administration.
- (e) "Director" means the executive director of the
- 697 department who is also the executive director of the board.
- (f) "Employee" means:
- (i) Any officer, employee or servant of the State
- 700 of Mississippi or a political subdivision of the state, including
- 701 elected or appointed officials and persons acting on behalf of the
- 702 state or a political subdivision in any official capacity,
- 703 temporarily or permanently, in the service of the state or a
- 704 political subdivision whether with or without compensation. The
- 705 term "employee" shall not mean a person or other legal entity
- 706 while acting in the capacity of an independent contractor under
- 707 contract to the state or a political subdivision; provided,
- 708 however, that for purposes of the limits of liability provided for
- 709 in Section 11-46-15, the term "employee" shall include physicians
- 710 under contract to provide health services with the State Board of

```
Health, the State Board of Mental Health or any county or
711
712
     municipal jail facility while rendering services under such
713
     contract. The term "employee" shall also include any physician,
714
     dentist or other health care practitioner employed by the
715
     University of Mississippi Medical Center (UMMC) and its
716
     departmental practice plans who is a faculty member and provides
     health care services only for patients at UMMC or its affiliated
717
     practice sites. The term "employee" shall also include any
718
719
     physician, dentist or other health care practitioner employed by
     any university under the control of the Board of Trustees of State
720
721
     Institutions of Higher Learning who practices only on the campus
     of any university under the control of the Board of Trustees of
722
723
     State Institutions of Higher Learning. The term "employee" shall
724
     also include any physician, dentist or other health care
725
     practitioner employed by the State Veterans Affairs Board and who
726
     provides health care services for patients for the State Veterans
727
     Affairs Board. The term "employee" shall also include Mississippi
728
     Department of Human Services licensed foster parents for the
729
     limited purposes of coverage under the Tort Claims Act as provided
730
     in Section 11-46-8. For the purposes of the limits of liability
     provided for in Section 11-46-15 and for no other purpose under
731
732
     this chapter, the term "employee" also shall include any physician
733
     who provides health care services to Medicaid recipients, State
     and School Employees Health Insurance Plan participants and
734
735
     Children's Health Insurance Program participants, provided that at
     least thirty-five percent (35%) of the physician's patients, as
736
737
     determined by the board, are Medicaid recipients, however, not to
     exceed one hundred twenty-five (125) physicians; and
738
                    (ii) Any retired physician who provides volunteer
739
740
     unpaid health care services to any public entity or private
     entity. For the purposes of this subparagraph (ii), "public
741
742
     entity" means any agency, department, institution, instrumentality
743
     or political subdivision of the state, or any agency, department,
                       *HR03/R26*
     H. B. No.
```

041E/HR03/R26 PAGE 22 (CJR\LH)

- 744 institution or instrumentality of any political subdivision of the
- 745 state; and "private entity" means any business, organization,
- 746 corporation, association or other legal entity which is not a
- 747 public entity.
- 748 (g) "Governmental entity" means and includes the state
- 749 and political subdivisions as herein defined.
- 750 (h) "Injury" means death, injury to a person, damage to
- 751 or loss of property or any other injury that a person may suffer
- 752 that is actionable at law or in equity.
- 753 (i) "Political subdivision" means any body politic or
- 754 body corporate other than the state responsible for governmental
- 755 activities only in geographic areas smaller than that of the
- 756 state, including, but not limited to, any county, municipality,
- 757 school district, community hospital as defined in Section
- 758 41-13-10, Mississippi Code of 1972, airport authority or other
- 759 instrumentality thereof, whether or not such body or
- 760 instrumentality thereof has the authority to levy taxes or to sue
- 761 or be sued in its own name.
- 762 (j) "State" means the State of Mississippi and any
- 763 office, department, agency, division, bureau, commission, board,
- 764 institution, hospital, college, university, airport authority or
- 765 other instrumentality thereof, whether or not such body or
- 766 instrumentality thereof has the authority to levy taxes or to sue
- 767 or be sued in its own name.
- 768 (k) "Law" means all species of law including, but not
- 769 limited to, any and all constitutions, statutes, case law, common
- 770 law, customary law, court order, court rule, court decision, court
- 771 opinion, court judgment or mandate, administrative rule or
- 772 regulation, executive order, or principle or rule of equity.
- 773 **SECTION 18.** There is created in the State Treasury a special
- 774 fund to the credit of the Mississippi Tort Claims Board, which
- 775 shall be comprised of any funds that may be made available for the
- 776 fund by the Legislature. Monies in the fund shall be expended by

the Mississippi Tort Claims Board, upon appropriation by the 777 778 Legislature, only for the purpose of providing additional funds 779 for prior acts extended reporting period coverage and for paying 780 the medical malpractice premiums for those physicians described in 781 Section 11-46-1(f)(ii). Unexpended amounts remaining in the 782 special fund at the end of a fiscal year shall not lapse into the 783 State General Fund, and any interest earned or investment earnings 784 on amounts in the special fund shall be deposited to the credit of 785 the special fund. SECTION 19. The Tort Claims Board shall develop methods and 786 787 promulgate rules and regulations to verify whether a physician 788 meets the percentage requirement under Section 11-46-1(f) to 789 qualify as an employee. There is created an advisory council to 790 assist the Mississippi Tort Claims Board in determining whether a 791 physician meets the percentage requirement under Section 792 11-46-1(f) to qualify as an employee. The advisory council shall 793 be composed of the Executive Director of the Mississippi Medical 794 Association or his designee; the President of the Mississippi 795 Medical and Surgical Association or his designee; the 796 administrator of the Mississippi Tort Claims Board or his designee; two (2) physicians appointed by the Lieutenant Governor; 797 798 two (2) physicians appointed by the Speaker of the House of 799 Representatives and three (3) nonphysician members, one (1) from each Supreme Court district, appointed by the Governor. 800 801 SECTION 20. Short title.

Sections 20 through 29 of this act shall be known and may be cited as the Medical Practice Disclosure Act.

SECTION 21. Legislative intent.

The State of Mississippi hereby recognizes the necessity of allowing individuals to make informed and educated choices regarding health care services and the essential need to provide information to facilitate these important decisions. It further recognizes that public disclosure of certain health care

H. B. No. 5 *HRO3/R26*

041E/HR03/R26 PAGE 24 (CJR\LH)

- 810 information would lower the cost of health care through the use of
- 811 the most appropriate provider and improve the quality of health
- 812 care services by mandating the reporting of information regarding
- 813 health care providers.
- It is the intention of the Legislature to establish a
- 815 procedure by which the general public may obtain essential and
- 816 basic information concerning potential health care providers,
- 817 while ensuring the accuracy and disclosure of all relevant
- 818 information that would enable individuals to informatively select
- 819 their health care provider.
- 820 SECTION 22. Collection of information.
- 821 (1) The State Board of Medical Licensure (board) and the
- 822 State Department of Health (department) shall collect for each
- 823 physician licensed or otherwise practicing medicine in the State
- 824 of Mississippi the following information, in a format developed by
- 825 the department that shall be available for dissemination to the
- 826 public:
- 827 (a) A description of any criminal convictions for
- 828 felonies and violent misdemeanors as determined by the department.
- 829 For the purposes of this paragraph, a person shall be deemed to be
- 830 convicted of a crime if that person pleaded guilty or if that
- 831 person was found or adjudged guilty by a court of competent
- 832 jurisdiction.
- 833 (b) A description of any charges to which a physician
- 834 pleads nolo contendere or where sufficient facts of guilt were
- 835 found and the matter was continued without a finding by a court of
- 836 competent jurisdiction.
- 837 (c) A description of any final disciplinary actions
- 838 taken by the State Board of Medical Licensure.
- 839 (d) A description of any final disciplinary actions by
- 840 licensing boards in other states or reported in the National
- 841 Practitioner Data Bank.

- (e) A description of revocation or involuntary
 restriction of hospital privileges that have been taken by a
 hospital's governing body and any other official of a hospital
 after procedural due process has been afforded, or the resignation
 from or nonrenewal of medical staff membership or the restriction
 of privileges at a hospital taken in lieu of or in settlement of a
 pending disciplinary case.
- 849 Notwithstanding any law to the contrary, all 850 medical malpractice court judgments and all medical malpractice arbitration awards in which a payment is awarded to a complaining 851 852 party and all settlements of medical malpractice claims in which a payment is made to a complaining party. Settlement of a claim may 853 854 occur for a variety of reasons which do not necessarily reflect 855 negatively on the professional competence or conduct of the 856 physician. A payment in settlement of a medical malpractice 857 action or claim should not be construed as creating a presumption that medical malpractice has occurred. 858
- (g) All civil court awards or settlements arising from allegations of sexual misconduct filed by patients, employees or hospital staff.
- (h) A paragraph describing the malpractice experience of each medical specialty and an explanation that some high risk specialties experience more malpractice claims than less risky specialties. This information shall be updated on an annual basis to reflect the most recent malpractice claims experience of each specialty.
- 868 (i) Names of medical schools and dates of graduation.
- (j) Graduate medical education.
- 870 (k) Specialty board certification(s).
- 871 (1) Number of years in practice.
- 872 (m) Name of hospitals where the physician has
- 873 privileges.

874	(n)	Appointments	to medical	school	faculties an	.d
875	indication as	to whether the	e physician	has a	responsibilit	y for
876	graduate medic	al education.				

- 877 (o) Information regarding publications in peer-reviewed 878 medical literature.
- 879 (p) Information regarding professional or community 880 service activities and awards.
- (q) The location of the physician's primary practice location.
- 883 (r) The indication of any translating services that may 884 be available at the physician's primary practice location.
- 885 (s) An indication of whether the physician participates 886 in the Medicaid program.
- 887 (2) The department shall provide each physician with a copy 888 of that physician's profile prior to the release to the public.
- 889 (3) A physician shall be provided a reasonable time, not to 890 exceed sixty (60) days, to correct factual inaccuracies or 891 omissions that may appear in the profile.
- (4) (a) A physician may petition the board for permission to temporarily omit certain information for a period not to exceed one (1) year.
- (b) If the physician demonstrates to the board that
 disclosure of the information would represent an undue risk of
 injury to the physician or the property of the physician, the
 board may grant the request and the information shall be withheld
 until such time as the situation is resolved, based on the
 presentation of evidence to the board, for a period not to exceed
 one (1) year.
- 902 (5) The board or the department shall not disclose any 903 pending malpractice claims to the public, and nothing in this 904 section shall be construed to prohibit the board or the department 905 from investigating and disciplining a physician on the basis of

906 pending medical malpractice claim information obtained under this 907 act.

908 <u>SECTION 23.</u> Report of criminal convictions and pleas of nolo 909 contendere.

- of any crime or in which any unregistered practitioner is
 convicted of holding himself out as a practitioner of medicine or
 of practicing medicine shall, within one (1) week thereafter,
 report the same to the State Medical Licensure Board, together
 with a copy of the court proceedings in the case.
- 916 (2) For the purposes of this section, a person shall be 917 deemed to be convicted of a crime if he pleaded guilty or was 918 found or adjudged guilty by a court of competent jurisdiction.
- 919 (3) Upon review, the State Board of Medical Licensure shall 920 provide the information to the department for purposes consistent 921 with this act.
 - (4) If a physician pleads nolo contendere to charges or where sufficient facts of guilt were found and the matter was continued without a finding by a court of competent jurisdiction, the clerk shall, within one (1) week thereafter, report the same to the Medical Licensure Board, together with a copy of the court proceedings in the case. Upon review, the Medical Licensure Board shall provide the information to the department for purposes consistent with this act.

SECTION 24. Reports to hospitals and health care facilities.

Each licensed hospital or health care facility shall 931 932 report to the board and the department if the hospital or facility 933 denies, restricts, revokes or fails to renew staff privileges or accepts the resignation of a physician for any reason related to 934 935 the physician's competence to practice medicine or for any other 936 reason related to a complaint or allegation regarding any 937 violation of law, regulation, rule or bylaw of the hospital or 938 facility regardless of whether the complaint or allegation *HR03/R26* H. B. No.

922

923

924

925

926

927

928

929

- 939 specifically states a violation of a specific law, regulation,
- 940 rule or bylaw. The report shall be filed within thirty (30) days
- 941 of the occurrence of the reportable action and include details
- 942 regarding the nature and circumstances of the action, its date and
- 943 the reasons for it.
- 944 (2) Each licensed hospital or health care facility shall
- 945 file an annual disciplinary report with the board no later than
- 946 January 31 and shall send the report by certified or registered
- 947 mail. The report shall summarize the action reports submitted for
- 948 the previous calendar year and shall be signed under oath. If the
- 949 hospital or facility submitted no action reports for the previous
- 950 calendar year, then the report required by this subsection shall
- 951 state that no action reports were required.
- 952 (3) No hospital, health care facility or person reporting
- 953 information to the board or the department under this section
- 954 shall be liable to the physician referenced in the report for
- 955 making the report, provided that the report is made in good faith
- 956 and without malice.
- 957 SECTION 25. Reports of disciplinary action by professional
- 958 medical organizations.
- 959 (1) A professional medical association, society, body,
- 960 professional standards review organization or similarly
- 961 constituted professional organization, whether or not such
- 962 association, society, body or organization is local, regional,
- 963 state, national or international in scope, shall report to the
- 964 Medical Licensure Board the disciplinary action taken against any
- 965 physician. Such report of disciplinary action shall be filed with
- 966 the board within thirty (30) days of such disciplinary action,
- 967 shall be in writing and shall be mailed to the board by certified
- 968 or registered mail.
- 969 (2) As used in this section, the term "disciplinary action"
- 970 includes, but is not limited to, revocation, suspension, censure,
- 971 reprimand, restriction, nonrenewal, denial or restriction of

- privileges or a resignation shall be reported only when the 972 973 resignation or the denial or restriction of privileges is related 974 in any way to: 975 (a) The physician's competence to practice medicine; or 976 (b) A complaint or allegation regarding any violation 977 of law or regulation, including, but not limited to, the 978 regulations of the department or the Medical Licensure Board or 979 hospital, health care facility or professional medical association 980 bylaws, whether or not the complaint or allegation specifically cites violation of a specified law, regulation or by law. 981 982 SECTION 26. Reports by insurers of malpractice claims or 983 actions. 984 (1)Every insurer or risk management organization which 985 provides professional liability insurance to a physician shall 986 report to the department any claim or action for damages for 987 personal injuries alleged to have been caused by error, omission 988 or negligence in the performance of the physician's professional 989 services where the claim resulted in: 990 (a) Final judgment in any amount; 991 (b) Settlement in any amount; or 992 Final disposition not resulting in payment on (C) 993 behalf of the insured. (2) Reports shall be filed with the board no later than 994 995 thirty (30) days following the occurrence of any event listed 996 under this section. 997 The reports shall be in writing on a form prescribed by
- 999 (a) The name, address, specialty coverage and policy 1000 number of the physician against whom the claim is made.

the department and shall contain the following information.

- 1001 The name, address and age of the claimant or (b) 1002 plaintiff.
- 1003 (C) The nature and substance of the claim.
- 1004 The date when and place where the claim arose. (d) *HR03/R26*

H. B. No. 041E/HR03/R26 PAGE 30 (CJR\LH)

5

1005	(e)	The a	amounts	paid,	if	any,	and	the	date,	manner	of
1006	disposition.	iudamer	nt and s	settlen	ent	-					

- 1007 (f) The date and reason for final disposition, if no 1008 judgment or settlement.
- 1009 (g) Such additional information as the department shall 1010 require. No insurer or its agents or employees shall be liable in 1011 any cause of action arising from reporting to the department as 1012 required in this section.

1013 <u>SECTION 27.</u> Reports by physicians of settlements or 1014 arbitration awards.

- 1015 A physician who does not possess professional liability 1016 insurance shall report to the department every settlement or 1017 arbitration award of a claim or action for damages for death or personal injury caused by negligence, error or omission in 1018 practice, or the unauthorized rendering of professional services 1019 1020 by the physician. The report shall be made within thirty (30) 1021 days after the settlement agreement has been reduced to writing or 1022 thirty (30) days after service of the arbitration award on the 1023 parties as long as it is signed by all the parties.
- 1024 (2) (a) Except as otherwise provided in this section, a
 1025 physician who fails to comply with the provisions of this section
 1026 shall be subject to a civil penalty of not more than Five Hundred
 1027 Dollars (\$500.00).
- 1028 (b) A physician who makes a knowing or intentional
 1029 failure to comply with the provisions of this section, or
 1030 conspires or colludes not to comply with the provisions of this
 1031 section, or hinders or impedes any other person in such
 1032 compliance, shall be subject to a civil penalty of not less than
 1033 Five Thousand Dollars (\$5,000.00) nor more than Fifty Thousand
 1034 Dollars (\$50,000.00).
- 1035 SECTION 28. Public access to information.

- 1036 (1) The department shall make available to the public, upon 1037 request by any person or entity, the information compiled by the 1038 board in Section 22 of this act.
- 1039 (2) Each physician shall make available to the public, free 1040 of charge, information compiled by the board in Section 22 of this 1041 act. All physicians shall conspicuously post at their primary 1042 place of practice a notice stating, "free background information 1043 available upon request."
- 1044 (3) The department shall disseminate information of Section 1045 22 of this act by posting the information on the state's website 1046 on the Internet.
- 1047 SECTION 29. Rules and regulations.
- The board and the department shall in the manner provided by law promulgate the rules and regulations necessary to carry out the provisions of this act, including, but not limited to, the exchange of information between the board and the department and other relevant state agencies, insurance carriers, hospitals and judicial administrative offices.
- 1054 **SECTION 30.** Section 73-43-11, Mississippi Code of 1972, is 1055 amended as follows:
- 1056 73-43-11. The State Board of Medical Licensure shall have 1057 the following powers and responsibilities:
- 1058 (a) Setting policies and professional standards

 1059 regarding the medical practice of physicians, osteopaths,

 1060 podiatrists and physician assistants practicing with physician

 1061 supervision;
- 1062 (b) Considering applications for licensure;
- 1063 (c) Conducting examinations for licensure;
- 1064 (d) Investigating alleged violations of the medical 1065 practice act;
- 1066 (e) Conducting hearings on disciplinary matters
- 1067 involving violations of state and federal law, probation,
- 1068 suspension and revocation of licenses;

H. B. No. 5 *HRO3/R26* 041E/HR03/R26 PAGE 32 (CJR\LH)

- 1069 (f) Considering petitions for termination of 1070 probationary and suspension periods, and restoration of revoked 1071 licenses;
- 1072 (g) To promulgate and publish reasonable rules and
 1073 regulations necessary to enable it to discharge its functions and
 1074 to enforce the provisions of law regulating the practice of
 1075 medicine;
- (h) To enter into contracts with any other state or
 federal agency, or with any private person, organization or group
 capable of contracting, if it finds such action to be in the
 public interest and in the furtherance of its
 responsibilities; * * *
- 1081 (i) Perform the duties prescribed by Sections 73-26-1 1082 through 73-26-5; and
- 1083 (j) Perform the duties prescribed by the Medical
 1084 Practice Disclosure Act.
- 1085 **SECTION 31.** Section 73-25-27, Mississippi Code of 1972, is 1086 amended as follows:
- 1087 73-25-27. The Mississippi State Board of Medical Licensure 1088 after notice and opportunity for a hearing to the licentiate, is 1089 authorized to suspend or revoke for any cause named herein any 1090 license it has issued, or the renewal thereof, that authorizes any person to practice medicine, osteopathy, or any other method of 1091 1092 preventing, diagnosing, relieving, caring for, or treating, or 1093 curing disease, injury or other bodily condition. The procedure 1094 for suspension of a license for being out of compliance with an 1095 order for support, and the procedure for the reissuance or 1096 reinstatement of a license suspended for that purpose, and the payment of any fees for the reissuance or reinstatement of a 1097 1098 license suspended for that purpose, shall be governed by Section 1099 93-11-157 or 93-11-163, as the case may be. If there is any 1100 conflict between any provision of Section 93-11-157 or 93-11-163

1101 and any provision of this chapter, the provisions of Section 1102 93-11-157 or 93-11-163, as the case may be, shall control. 1103 Such notice shall be effected by registered mail or personal 1104 service setting forth the particular reasons for the proposed 1105 action and fixing a date not less than thirty (30) days or more 1106 than sixty (60) days from the date of such mailing or such service, at which time the licentiate shall be given an 1107 1108 opportunity for a prompt and fair hearing. For the purpose of such hearing the board, acting by and through its executive 1109 1110 office, may subpoen persons and papers on its own behalf and on 1111 behalf of licentiate, including records obtained pursuant to Section 73-25-28, may administer oaths and such testimony when 1112 1113 properly transcribed, together with such papers and exhibits, 1114 shall be admissible in evidence for or against the licentiate. At 1115 such hearing licentiate may appear by counsel and personally in his own behalf. Any person sworn and examined as a witness in 1116 1117 such hearing shall not be held to answer criminally, nor shall any 1118 papers or documents produced by such witness be competent evidence 1119 in any criminal proceedings against such witness other than for 1120 perjury in delivering his evidence. Any patient or a representative of the patient who has suffered harm by a physician 1121 1122 subject to a hearing under this section shall have the right to attend all proceedings regarding such physician. Notice shall be 1123 provided to the patient or his representative at the same time and 1124 1125 in the same manner as the notice is made to the physician. On the 1126 basis of any such hearing, or upon default of the licentiate, the 1127 Board of Medical Licensure shall make a determination specifying 1128 its findings of fact and conclusions of law. 1129 A copy of such determination shall be sent by registered mail or served personally upon the licentiate. The decision of the 1130 1131 Board of Medical Licensure revoking or suspending the license 1132 shall become final thirty (30) days after so mailed or served unless within said period the licentiate appeals the decision to 1133

HR03/R26

H. B. No. 5
041E/HR03/R26
PAGE 34 (CJR\LH)

```
1134
      the chancery court, pursuant to the provisions hereof, and the
1135
      proceedings in chancery shall be conducted as other matters coming
1136
      before the court. All proceedings and evidence, together with
1137
      exhibits, presented at such hearing before the Board of Medical
1138
      Licensure in the event of appeal shall be admissible in evidence
1139
      in said court.
1140
           The Board of Medical Licensure may subpoena persons and
      papers on its own behalf and on behalf of the respondent,
1141
      including records obtained pursuant to Section 73-25-28, may
1142
1143
      administer oaths, and may compel the testimony of witnesses.
1144
      may issue commissions to take testimony, and testimony so taken
      and sworn to shall be admissible in evidence for and against the
1145
1146
      respondent.
                   The Board of Medical Licensure shall be entitled to
1147
      the assistance of the chancery court or the chancellor in
      vacation, which, on petition by the board, shall issue ancillary
1148
      subpoenas and petitions and may punish as for contempt of court in
1149
1150
      the event of noncompliance therewith.
1151
         Unless the court otherwise decrees, a license that has been
      suspended by the Board of Medical Licensure for a stated period of
1152
      time shall automatically become valid on the expiration of that
1153
1154
      period and a license that has been suspended for an indefinite
1155
      period shall become again valid if and when the Board of Medical
      Licensure so orders, which it may do on its own motion or on the
1156
      petition of the respondent. A license that has been revoked shall
1157
1158
      not be restored to validity except: (1) after a rehearing by the
1159
      Board of Medical Licensure, on petition of the respondent, for
1160
      good cause shown, filed within ten (10) days, immediately
1161
      following the service on him of the order or judgment of the Board
      of Medical Licensure revoking his license or (2) by order of the
1162
      court, on petition as aforesaid. Any licentiate whose license
1163
1164
      becomes again valid after a period of suspension or after it has
1165
      been restored to validity after a rehearing or by an order of the
1166
      court, shall record it again in the office of the clerk of the
```

HR03/R26

H. B. No.

041E/HR03/R26 PAGE 35 (CJR\LH)

circuit court of the county in which he resides in conformity with 1167 1168 the requirements of Section 73-25-13. Nothing in this chapter 1169 shall be construed as limiting or revoking the authority of any 1170 court or of any licensing or registering officer or board, other 1171 than the State Board of Medical Licensure, to suspend, revoke and 1172 reinstate licenses and to cancel registrations under the provisions of Section 41-29-311. 1173 SECTION 32. Any product sold or distributed in Mississippi 1174 by any manufacturer or distributor licensed to do business or 1175 1176 doing business in Mississippi shall publish statewide notice of 1177 any recall of any product or its component parts within thirty (30) days of the recall. Any manufacturer or distributor who 1178 1179 fails to provide notice of a recall as required by this section shall, upon conviction, be fined Fifty Thousand Dollars 1180 (\$50,000.00) for each violation. The Attorney General shall 1181 enforce compliance with the provisions of this section. 1182 1183 **SECTION 33.** (1) No policy or contract of liability 1184 insurance shall be issued or delivered in this state unless it contains provisions to the effect that the insolvency or 1185 1186 bankruptcy of the insured shall not release the insurer from the payment of damages for injuries sustained or loss occasioned 1187 1188 during the existence of the policy. Any judgment which may be rendered against the insured for which the insurer is liable which 1189 1190 shall have become executory shall be deemed prima facie evidence 1191 of the insolvency of the insured, and an action may thereafter be 1192 maintained within the terms and limits of the policy by the 1193 injured person or his or her survivors or heirs against the 1194 insurer. The injured person or his or her survivors or heirs 1195 (2) (a) mentioned in subsection (1) of this section, at their option, 1196 1197 shall have a right of direct action against the insurer within the 1198 terms and limits of the policy; and such action may be brought against the insurer alone, or against both the insured and insurer

HR03/R26

1199

H. B. No. 041E/HR03/R26 PAGE 36 (CJR\LH)

- 1200 jointly and in solido, in the county in which the accident or
- 1201 injury occurred or in the county in which an action could be
- 1202 brought against either the insured or the insurer under the
- 1203 general rules of venue prescribed by the Rules of Civil Procedure
- 1204 only. However, such action may be brought against the insurer
- 1205 alone only when:
- 1206 (i) The insured has been adjudged a bankrupt by a
- 1207 court of competent jurisdiction or when proceedings to adjudge an
- 1208 insured a bankrupt have been commenced before a court of competent
- 1209 jurisdiction;
- 1210 (ii) The insured is insolvent;
- 1211 (iii) Service of citation or other process cannot
- 1212 be made on the insured;
- 1213 (iv) When the cause of action is for damages as a
- 1214 result of an offense or quasi-offense between children and their
- 1215 parents or between married persons; or
- 1216 (v) When the insurer is an uninsured motorist
- 1217 carrier.
- 1218 (b) This right of direct action shall exist whether or
- 1219 not the policy of insurance sued upon was written or delivered in
- 1220 the State of Mississippi and whether or not such policy contains a
- 1221 provision forbidding such direct action, provided the accident or
- 1222 injury occurred within the State of Mississippi. Nothing
- 1223 contained in this section shall be construed to affect the
- 1224 provisions of the policy or contract if such provisions are not in
- 1225 violation of the laws of this state.
- 1226 (3) The policy or contract of liability insurance shall be
- 1227 admissible into evidence in any proceeding regarding such policy
- 1228 or contract of liability insurance.
- 1229 (4) It is the intent of this section that any action brought
- 1230 under the provisions of this section shall be subject to all of
- 1231 the lawful conditions of the policy or contract and the defenses
- 1232 which could be urged by the insurer to a direct action brought by

- the insured, provided the terms and conditions of such policy or contract are not in violation of the laws of this state.
- 1235 (5) It is also the intent of this section that all liability
- 1236 policies within their terms and limits are executed for the
- 1237 benefit of all injured persons and their survivors or heirs to
- 1238 whom the insured is liable and that it is the purpose of all
- 1239 liability policies to give protection and coverage to all
- 1240 insureds, whether they are named insureds or additional insureds
- 1241 under the omnibus clause, for any legal liability such insured may
- 1242 have as or for a tort-feasor within the terms and limits of such
- 1243 policy.
- 1244 SECTION 34. Medical review panel.
- 1245 (1) Claims; statute of limitations.
- 1246 (a) **Definitions.** For purposes of this section:
- 1247 (i) "Board" means the Tort Claims Board
- 1248 established by Section 11-46-18, Mississippi Code of 1972.
- 1249 (ii) "Health care provider" means a person,
- 1250 partnership, limited liability partnership, limited liability
- 1251 company, corporation, facility, or institution licensed by this
- 1252 state to provide health care or professional services as a
- 1253 physician, hospital, institution for the aged or infirm, community
- 1254 blood center, tissue bank, dentist, registered or licensed
- 1255 practical nurse or certified nurse assistant, ambulance service,
- 1256 certified registered nurse anesthetist, nurse-midwife, licensed
- 1257 midwife, pharmacist, optometrist, podiatrist, chiropractor,
- 1258 physical therapist, occupational therapist, psychologist, social
- 1259 worker, licensed professional counselor, or any nonprofit facility
- 1260 considered tax-exempt under Section 501(c)(3), Internal Revenue
- 1261 Code, pursuant to 26 USC 501(c)(3), for the diagnosis and
- 1262 treatment of cancer or cancer-related diseases, whether or not
- 1263 such a facility is required to be licensed by this state, or any
- 1264 professional corporation a health care provider is authorized to
- 1265 form under the Mississippi Code of 1972, or any partnership,

```
limited liability partnership, limited liability company, or
1266
1267
      corporation whose business is conducted principally by health care
1268
      providers, or an officer, employee, partner, member, shareholder,
1269
      or agent thereof acting in the course and scope of his employment.
1270
                      (iii)
                             "Malpractice" means any unintentional tort
1271
      or any breach of contract based on health care or professional
      services rendered, or which should have been rendered, by a health
1272
      care provider, to a patient, including failure to render services
1273
      timely and the handling of a patient, including loading and
1274
      unloading of a patient, and also includes all legal responsibility
1275
1276
      of a health care provider arising from acts or omissions in the
      training or supervision of health care providers, or from defects
1277
1278
      in blood, tissue, transplants, drugs and medicines, or from
      defects in or failures of prosthetic devices, implanted in or used
1279
      on or in the person of a patient.
1280
1281
                          All malpractice claims against health care
                 (b) (i)
1282
      providers, other than claims validly agreed for submission to a
1283
      lawfully binding arbitration procedure, shall be reviewed by a
      medical review panel as provided in this section unless all
1284
1285
      parties specifically waive the use of the medical review panel.
1286
                      (ii) An action against a health care provider or
1287
      his insurer commenced in any court shall be presented to a medical
      review panel and an opinion rendered by the panel pursuant to this
1288
1289
      section, and the court's request for review shall constitute a
```

(iii) The request for review of a malpractice
claim under this section shall be made by the court on its own
motion or on the motion of any party.

stay pending the panel's decision.

1290

- 1294 (c) (i) The request for review must be in writing,
 1295 delivered to the board in person or by certified or registered
 1296 United States mail, and include as an exhibit the complaint filed.
- 1297 (ii) Each defendant shall file a written answer

 1298 within thirty (30) days of service of the request. If the

 H. B. No. 5 *HRO3/R26*
 041E/HR03/R26
 PAGE 39 (CJR\LH)

1299 defendant fails to file an answer as required, the board shall 1300 notify the defendant of the obligation to file and penalty for 1301 failure to file; notice shall be by certified or registered United 1302 States mail. If the defendant has not filed within thirty (30) 1303 days of the receipt of the notice specified in this subparagraph 1304 (ii), the request for review shall be dismissed; the panel, if formed, shall be dissolved, and the plaintiff shall be allowed to 1305 proceed in court upon the complaint filed. 1306

(2) Dismissal of review; dissolution of panel.

1307

1318

- 1308 (a) During the pendency of proceedings under this
 1309 section, a health care provider against whom a claim has been
 1310 filed may raise any exception or defenses available pursuant to
 1311 Mississippi law, whether a procedural, statute of limitations or
 1312 other exception or defense, at any time without need for
 1313 completion of the review process by the medical review panel.
- 1314 (b) If the court finds for the party raising the
 1315 exception or defense, that party shall be dismissed. If there are
 1316 no defendants remaining, the panel, if established, shall be
 1317 dissolved.

(3) Composition and selection of panel.

- The medical review panel shall consist of two (2) 1319 (a) 1320 physicians who each hold an unlimited license to practice medicine in Mississippi, one (1) patient advocate appointed by the Tort 1321 1322 Claims Board and one (1) attorney who shall be the nonvoting chair 1323 of the panel. The parties may agree on the attorney member of the medical review panel within thirty (30) days after the filing of 1324 1325 the answer; if no agreement can be reached, then the attorney member of the medical review panel shall be selected as follows: 1326
- (i) The board shall draw five (5) names at random from the list of attorneys maintained by the board who have medical malpractice experience. The names of judges, magistrates, district attorneys and assistant district attorneys shall be excluded if drawn and new names drawn in their place. After

selection of the attorney names, the board shall notify the 1332 1333 parties of the attorney names from which the parties, within five 1334 (5) days, may choose the attorney member of the panel. 1335 agreement can be reached within five (5) days, the parties shall 1336 immediately initiate a procedure of selecting the attorney by each 1337 striking two (2) names alternately, with the plaintiff striking 1338 first and so advising the defendant of the name of the attorney so stricken; thereafter, the defendant and the plaintiff shall 1339 alternately strike until both sides have stricken two (2) names 1340 1341 and the remaining name shall be the attorney member of the panel. 1342 If either the plaintiff or defendant fails to strike, the board shall strike for that party within five (5) additional days. 1343 1344 (ii) After the striking, the board shall notify the attorney and all parties of the name of the selected attorney. 1345 An attorney who has a conflict of interest shall decline to serve. 1346 The attorney shall act as chairman of the panel and 1347 1348 shall have no vote. The chairman shall preside at panel meetings, 1349 advise the panel as to questions of law, and shall prepare the opinion of the panel as required in subsection (7) of this 1350 section. It is the duty of the chairman to expedite the selection 1351 of the other panel members, to convene the panel and expedite the 1352 1353 panel's review of the proposed complaint. The attorney chairman shall establish, by order, a reasonable schedule for submission of 1354 evidence to the medical review panel, but must allow sufficient 1355 1356 time for the parties to make full and adequate presentation of related facts and authorities within one hundred twenty (120) days 1357 1358 following selection of the panel.

1359 (c) The qualification and selection of physician 1360 members of the medical review panel shall be as follows:

1361 (i) All physicians who hold a license to practice
1362 medicine in the State of Mississippi and who are engaged in the
1363 active practice of medicine in this state, whether in the teaching
1364 profession or otherwise, shall be available for selection and,

- 1365 unless excused for cause, required to serve upon selection.
- 1366 (ii) Each party to the action shall have the right
- 1367 to select one (1) physician and upon selection the physician shall
- 1368 be required to serve.
- 1369 (iii) When there are multiple plaintiffs or
- 1370 defendants, there shall be only one (1) physician selected per
- 1371 side. The plaintiff, whether single or multiple, shall have the
- 1372 right to select one (1) physician, and the defendant, whether
- 1373 single or multiple, shall have the right to select one (1)
- 1374 physician.
- 1375 (iv) If any defendant is a physician, the
- 1376 physicians selected must be of the same specialty as at least one
- 1377 (1) physician defendant.
- 1378 (v) Parties and their attorneys are absolutely
- 1379 prohibited from contact with the physician whose name is
- 1380 submitted, either before or after submission. No physician may be
- 1381 informed of the method of any panel member's selection.
- 1382 (vi) No physician may be selected to serve on more
- 1383 than four (4) medical review panels in a twelve-month period.
- 1384 (vii) The physician selection process shall be
- 1385 completed within thirty (30) days of the selection of the attorney
- 1386 chairman.
- 1387 (d) Attorneys and physicians with any financial,
- 1388 employment, or personal or family ties to any party or attorney
- 1389 for a party shall not serve on a panel. Any conflict that cannot
- 1390 be resolved shall be decided by the court upon the motion of any
- 1391 party.
- 1392 (4) **Evidence.**
- 1393 (a) The evidence to be considered by the medical review
- 1394 panel shall be promptly submitted by the respective parties in
- 1395 written form only.
- 1396 (b) The evidence may consist of:
- 1397 (i) Medical records;

H. B. No. 5 041E/HR03/R26 *HR03/R26*

- 1398 (ii) Sworn statements;
- 1399 (iii) Expert reports signed by experts;
- 1400 (iv) Deposition transcripts;
- 1401 (v) Any other evidence allowed by the medical
- 1402 review panel or submitted by the parties.
- 1403 (c) Depositions of the parties only may be taken, and
- 1404 may be taken prior to the convening of the panel.
- 1405 (d) Upon request of any party or panel member, the
- 1406 board shall issue subpoenas and subpoenas duces tecum in aid of
- 1407 the taking of depositions and the production of documentary
- 1408 evidence for inspection, copying or both.
- 1409 (e) The plaintiff must sign a valid authorization
- 1410 allowing defendants to obtain the plaintiff's medical records.
- 1411 The defendant shall treat all medical records in a confidential
- 1412 manner and shall not disclose the contents of the records to
- 1413 anyone other than the panel or other experts; all other experts
- 1414 must treat the plaintiff's records as confidential.
- 1415 (f) The board shall send a copy of the evidence to each
- 1416 member of the panel.
- 1417 (5) **Hearings.** (a) After submission of all evidence and
- 1418 upon ten (10) days' notice to the other side, either party or the
- 1419 panel shall have the right to convene the panel at a time and
- 1420 place agreeable to the members of the panel; each party is
- 1421 entitled to request only one (1) hearing. The panel may hold as
- 1422 many hearings as it chooses. The purpose of a hearing is to ask
- 1423 questions as to additional evidence needed and to afford an
- 1424 opportunity to make oral presentation of the facts. The chairman
- 1425 of the panel shall preside at all hearings, which shall be
- 1426 informal.
- 1427 (b) The following are locations where hearings may be
- 1428 held:

1429	(i)	⊼ +	a	courthouse	or	other	available	public
エモム フ	(エ)	ΑL	a	Cour chouse	O_{T}	OCHEL	avallable	Public

- 1430 building in the county where the act or omission is alleged to
- 1431 have occurred.
- 1432 (ii) The attorney chairman shall decide the
- 1433 location in the event of any dispute.
- 1434 (iii) Private offices in the county where the act
- 1435 or omission is alleged to have occurred may be used if there is no
- 1436 cost or if the parties pay for the cost.
- 1437 (6) Panel deliberations and decision. After receiving all
- 1438 evidence from the parties, the panel shall convene to discuss the
- 1439 evidence presented not less than one (1) time, and, not later than
- 1440 sixty (60) days after receiving all evidence from the parties,
- 1441 shall render a written decision signed by the panelists, together
- 1442 with written reasons for their conclusions, as follows:
- 1443 (a) There was a breach of the appropriate standard of
- 1444 care;
- 1445 (b) There was not a breach of the appropriate standard
- 1446 of care; or
- 1447 (c) Whether the defendant or defendants failed to
- 1448 comply with the appropriate standard of care cannot be determined.
- 1449 (7) Form of decision. The decision reached by the medical
- 1450 review panel shall be in writing, shall state the facts upon which
- 1451 it is based, shall be of public record, and shall be admissible as
- 1452 evidence in the civil case filed.
- 1453 (8) Panelist immunity. A panelist shall have absolute
- 1454 immunity from civil liability for all communications, findings,
- 1455 opinions and conclusions made in the course and scope of duties
- 1456 prescribed by this section.
- 1457 (9) Panelist compensation.
- 1458 (a) (i) Each physician member of the medical review
- 1459 panel shall be paid a fee of Five Hundred Dollars (\$500.00) for
- 1460 all work performed as a member of the panel, and in addition
- 1461 thereto, per diem as provided in Section 25-3-69, Mississippi Code

- 1462 of 1972, and travel expenses as would be calculated for a state
- 1463 employee pursuant to Section 25-3-41, Mississippi Code of 1972.
- 1464 (ii) The attorney chairman of the medical review
- 1465 panel shall be paid at the rate of One Hundred Fifty Dollars
- 1466 (\$150.00) per hour, not to exceed a total of Three Thousand
- 1467 Dollars (\$3,000.00), for all work performed as a member of the
- 1468 panel, and in addition thereto, per diem as provided in Section
- 1469 25-3-69, Mississippi Code of 1972, and travel expenses as would be
- 1470 calculated for a state employee pursuant to Section 25-3-41,
- 1471 Mississippi Code of 1972.
- 1472 (b) The costs of the medical review panel shall be
- 1473 split between the parties. The panel members shall by affidavit
- 1474 request the payment due under this subsection (9) from the board,
- 1475 which in turn shall bill the parties for the proportionate share
- 1476 of each party.
- 1477 (10) **Delivery and effect of decision.** The chairman shall
- 1478 submit a copy of the panel's report to the board and all parties
- 1479 and attorneys by registered or certified mail within five (5) days
- 1480 after the panel renders its opinion. The panel's report shall be
- 1481 of public record.
- 1482 (11) Allocation of attorney fees and expenses.
- 1483 (a) If the decision of the panel finds for the
- 1484 defendant and the defendant prevails in court, the plaintiff shall
- 1485 pay reasonable attorney fees and expenses of the defendant to be
- 1486 determined by the court.
- 1487 (b) If the decision of the panel finds for the
- 1488 plaintiff:
- 1489 (i) The plaintiff may submit a written settlement
- 1490 offer for a sum certain to the defendant. If the defendant
- 1491 rejects the settlement offer, the plaintiff prevails in court, and
- 1492 the judgment is equal to or greater than the settlement offer, the
- 1493 defendant shall pay reasonable attorney fees and expenses of the
- 1494 plaintiff to be determined by the court.

1495	(ii) The defendant also may submit a written
1496	settlement offer for a sum certain to the plaintiff. If the
1497	plaintiff rejects the settlement offer and the defendant prevails
1498	in the subsequent court action, or the plaintiff prevails but the
1499	judgment is less than the defendant's settlement offer, the
1500	plaintiff shall pay reasonable attorney fees and expenses of the
1501	defendant to be determined by the court.

1502 **SECTION 35.** Section 11-46-19, Mississippi Code of 1972, is 1503 amended as follows:

[Until July 1, 2005, this section shall read as follows:]

- 1505 11-46-19. (1) The board shall have the following powers:
- 1506 (a) To provide oversight over the Tort Claims Fund;
- 1507 (b) To approve any award made from the Tort Claims
- 1508 Fund;

1504

1512

- 1509 (c) To pay all necessary expenses attributable to the 1510 operation of the Tort Claims Fund from such fund;
- 1511 (d) To assign litigated claims against governmental
- 1513 unless such governmental entity has a staff attorney who is
- 1514 competent to represent the governmental entity and is approved by

entities other than political subdivisions to competent attorneys

- 1515 the board; the board shall give primary consideration to attorneys
- 1516 practicing in the jurisdiction where the claim arose in assigning
- 1517 cases; attorneys hired to represent a governmental entity other
- 1518 than a political subdivision shall be paid according to the
- 1519 department fee schedule;
- 1520 (e) To approve all claimants' attorney fees in claims
- 1521 against the state;
- 1522 (f) To employ on a full-time basis a staff attorney who
- 1523 shall possess the minimum qualifications required to be a member
- 1524 of The Mississippi Bar, and such other staff as it may deem
- 1525 necessary to carry out the purposes of this chapter; the employees
- 1526 in the positions approved by the board shall be hired by the

- 1527 director, shall be employees of the department, and shall be
- 1528 compensated from the Tort Claims Fund;
- 1529 (g) To contract with one or more reputable insurance
- 1530 consulting firms as may be necessary;
- 1531 (h) To purchase any policies of liability insurance and
- 1532 to administer any plan of self-insurance or policies of liability
- 1533 insurance required for the protection of the state against claims
- 1534 and suits brought under this chapter;
- 1535 (i) To expend money from the Tort Claims Fund for the
- 1536 purchase of any policies of liability insurance and the payment of
- 1537 any award or settlement of a claim against the state under the
- 1538 provisions of this chapter or of a claim against any school
- 1539 district, junior college or community college district, or state
- 1540 agency, arising from the operation of school buses or other
- 1541 vehicles, under the provisions of Section 37-41-42;
- 1542 (j) To cancel, modify or replace any policy or policies
- 1543 of liability insurance procured by the board;
- 1544 (k) To issue certificates of coverage to governmental
- 1545 entities, including any political subdivision participating in any
- 1546 plan of liability protection approved by the board;
- 1547 (1) To review and approve or reject any plan of
- 1548 liability insurance or self-insurance reserves proposed or
- 1549 provided by political subdivisions if such plan is intended to
- 1550 serve as security for risks of claims and suits against them for
- 1551 which immunity has been waived under this chapter;
- 1552 (m) To administer disposition of claims against the
- 1553 Tort Claims Fund;
- 1554 (n) To withhold issuance of any warrants payable from
- 1555 funds of a participating state entity should such entity fail to
- 1556 make required contributions to the Tort Claims Fund in the time
- 1557 and manner prescribed by the board;
- 1558 (o) To develop a comprehensive statewide list of
- 1559 attorneys who are qualified to represent the state and any

1560	employee thereof named as a defendant in a claim brought under
1561	this chapter against the state or such employee;
1562	(p) To develop a schedule of fees for paying attorneys
1563	defending claims against the state or an employee thereof;
1564	(q) To adopt and promulgate such reasonable rules and
1565	regulations and to do and perform all such acts as are necessary
1566	to carry out its powers and duties under this chapter;
1567	(r) To establish and assess premiums to be paid by
1568	governmental entities required to participate in the Tort Claims
1569	Fund;
1570	(s) To contract with a third-party administrator to
1571	process claims against the state under this chapter;
1572	(t) To annually submit its budget request to the
1573	Legislature as a state agency;
1574	(u) To dispose of salvage obtained in settlement or
1575	payment of any claim at fair market value by such means and upon
1576	such terms as the board may think best; * * *
1577	(v) To administer the Medical Malpractice Insurance
1578	Availability Plan under Section 83-48-5; and
1579	(w) To act as the board as required under House Bill
1580	No, 2004 First Extraordinary Session, dealing with medical
1581	malpractice claims as follows:
1582	(i) To accept filings under the act;
1583	(ii) To coordinate the selection of panels;
1584	(iii) To maintain lists of attorneys eligible for
1585	appointment as attorney chairmen;
1586	(iv) To promulgate rules in reference to the
1587	qualifications of attorneys serving as panel members;
1588	(v) To promulgate rules and regulations necessary
1589	to implement the provisions of Section 34 of House Bill No,
1590	2004 First Extraordinary Session; and
1591	(vi) To provide general administrative support.

1592	(2) Policies of liability insurance purchased for the
1593	protection of governmental entities against claims and suits
1594	brought under this chapter shall be purchased pursuant to the
1595	competitive bidding procedures set forth in Section 31-7-13.

- 1596 (3) The department shall have the following powers and 1597 duties:
- 1598 (a) To annually report to the Legislature concerning
 1599 each comprehensive plan of liability protection established
 1600 pursuant to Section 11-46-17(2). Such report shall include a
 1601 comprehensive analysis of the cost of the plan, a breakdown of the
 1602 cost to participating state entities, and such other information
 1603 as the department may deem necessary.
- 1604 (b) To provide the board with any staff and meeting 1605 facilities as may be necessary to carry out the duties of the 1606 board as provided in this chapter.
- 1607 (c) To submit the board's budget request for the
 1608 initial year of operation of the board in order to authorize
 1609 expenditures for the 1993-1994 fiscal year and for the
 1610 appropriation of such general funds as shall be required for the
 1611 commencement of its activities.
- [From and after July 1, 2005, this section shall read as follows:]
- 1614 11-46-19. (1) The board shall have the following powers:
- 1615 (a) To provide oversight over the Tort Claims Fund;
- 1616 (b) To approve any award made from the Tort Claims
- 1617 Fund;
- 1618 (c) To pay all necessary expenses attributable to the 1619 operation of the Tort Claims Fund from such fund;
- (d) To assign litigated claims against governmental entities other than political subdivisions to competent attorneys unless such governmental entity has a staff attorney who is competent to represent the governmental entity and is approved by the board; the board shall give primary consideration to attorneys

- 1625 practicing in the jurisdiction where the claim arose in assigning
- 1626 cases; attorneys hired to represent a governmental entity other
- 1627 than a political subdivision shall be paid according to the
- 1628 department fee schedule;
- 1629 (e) To approve all claimants' attorney fees in claims
- 1630 against the state;
- 1631 (f) To employ on a full-time basis a staff attorney who
- 1632 shall possess the minimum qualifications required to be a member
- 1633 of The Mississippi Bar, and such other staff as it may deem
- 1634 necessary to carry out the purposes of this chapter; the employees
- 1635 in the positions approved by the board shall be hired by the
- 1636 director, shall be employees of the department, and shall be
- 1637 compensated from the Tort Claims Fund;
- 1638 (g) To contract with one or more reputable insurance
- 1639 consulting firms as may be necessary;
- 1640 (h) To purchase any policies of liability insurance and
- 1641 to administer any plan of self-insurance or policies of liability
- 1642 insurance required for the protection of the state against claims
- 1643 and suits brought under this chapter;
- 1644 (i) To expend money from the Tort Claims Fund for the
- 1645 purchase of any policies of liability insurance and the payment of
- 1646 any award or settlement of a claim against the state under the
- 1647 provisions of this chapter or of a claim against any school
- 1648 district, junior college or community college district, or state
- 1649 agency, arising from the operation of school buses or other
- 1650 vehicles, under the provisions of Section 37-41-42;
- 1651 (j) To cancel, modify or replace any policy or policies
- 1652 of liability insurance procured by the board;
- 1653 (k) To issue certificates of coverage to governmental
- 1654 entities, including any political subdivision participating in any
- 1655 plan of liability protection approved by the board;
- 1656 (1) To review and approve or reject any plan of
- 1657 liability insurance or self-insurance reserves proposed or

1658	provided by political subdivisions if such plan is intended to
1659	serve as security for risks of claims and suits against them for
1660	which immunity has been waived under this chapter;
1661	(m) To administer disposition of claims against the
1662	Tort Claims Fund;
1663	(n) To withhold issuance of any warrants payable from
1664	funds of a participating state entity should such entity fail to
1665	make required contributions to the Tort Claims Fund in the time
1666	and manner prescribed by the board;
1667	(o) To develop a comprehensive statewide list of
1668	attorneys who are qualified to represent the state and any
1669	employee thereof named as a defendant in a claim brought under
1670	this chapter against the state or such employee;
1671	(p) To develop a schedule of fees for paying attorneys
1672	defending claims against the state or an employee thereof;
1673	(q) To adopt and promulgate such reasonable rules and
1674	regulations and to do and perform all such acts as are necessary
1675	to carry out its powers and duties under this chapter;
1676	(r) To establish and assess premiums to be paid by
1677	governmental entities required to participate in the Tort Claims
1678	Fund;
1679	(s) To contract with a third-party administrator to
1680	process claims against the state under this chapter;
1681	(t) To annually submit its budget request to the
1682	Legislature as a state agency;
1683	(u) To dispose of salvage obtained in settlement or
1684	payment of any claim at fair market value by such means and upon
1685	such terms as the board may think best; and
1686	(v) To act as the board as required under House Bill
1687	No, 2004 First Extraordinary Session, dealing with medical
1688	malpractice claims as follows:
1689	(i) To accept filings under the act;
1690	(ii) To coordinate the selection of panels;
	H. B. No. 5 *HRO3/R26* 041E/HR03/R26 PAGE 51 (CJR\LH)

(iii) To maintain lists of attorneys eligible for	-
ppointment as attorney chairmen;	
(iv) To promulgate rules in reference to the	
alifications of attorneys serving as panel members;	
(v) To promulgate rules and regulations necessary	<u></u>
o implement the provisions of Section 34 of House Bill No,	<u>-</u>
004 First Extraordinary Session; and	
(vi) To provide general administrative support.	
(2) Policies of liability insurance purchased for the	
rotection of governmental entities against claims and suits	
rought under this chapter shall be purchased pursuant to the	
ompetitive bidding procedures set forth in Section 31-7-13.	
(3) The department shall have the following powers and	
uties:	
(a) To annually report to the Legislature concerning	
ach comprehensive plan of liability protection established	
ursuant to Section 11-46-17(2). Such report shall include a	
omprehensive analysis of the cost of the plan, a breakdown of th	ıe
ost to participating state entities, and such other information	
s the department may deem necessary.	
(b) To provide the board with any staff and meeting	
acilities as may be necessary to carry out the duties of the	
pard as provided in this chapter.	
(c) To submit the board's budget request for the	
nitial year of operation of the board in order to authorize	
xpenditures for the 1993-1994 fiscal year and for the	
opropriation of such general funds as shall be required for the	
ommencement of its activities.	
SECTION 36. If any provision of this act is held by a court	:
be invalid, such invalidity shall not affect the remaining	
rovisions of this act, and to this end the provisions of this ac	:t
re declared severable.	

1723 **SECTION 37.** This act shall take effect and be in force from 1724 and after July 1, 2004, and Sections 1 through 5 of this act shall 1725 apply to all causes of action filed on or after that date.