By: Representatives Blackmon, Simpson, Compretta, Smith (39th), Franks, Watson, Moak

To: Judiciary A

HOUSE BILL NO. 13

```
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 BRING FORWARD SECTIONS 11-1-63 AND 11-1-64,
 3
    MISSISSIPPI CODE OF 1972, FOR PURPOSES OF AMENDMENT RELATED TO
    INNOCENT SELLER REVISIONS; TO AMEND SECTION 11-1-65, MISSISSIPPI
 7
    CODE OF 1972, TO REVISE PUNITIVE DAMAGES; TO AMEND SECTION
    11-1-66, MISSISSIPPI CODE OF 1972, TO REVISE PREMISES LIABILITY; TO AMEND SECTION 85-5-7, MISSISSIPPI CODE OF 1972, TO REVISE JOINT
 8
9
    AND SEVERAL LIABILITY; TO BRING FORWARD SECTIONS 13-5-23, 13-5-25,
10
    13-5-28, 13-5-34, 25-7-61 AND 33-1-5, MISSISSIPPI CODE OF 1972,
11
    REGARDING SELECTION OF JURORS FOR PURPOSES OF AMENDMENT; TO AMEND
12
13
    SECTION 83-48-5, MISSISSIPPI CODE OF 1972, TO EXPAND THE MEDICAL
    MALPRACTICE AVAILABILITY PLAN THAT IS ADMINISTERED BY THE TORT
14
    CLAIMS BOARD FOR PRIOR ACTS COVERAGE PURPOSES; TO AMEND SECTION
15
    11-46-1, MISSISSIPPI CODE OF 1972, TO REVISE THE DEFINITION OF
16
     "EMPLOYEE" FOR PURPOSES OF LIMITED LIABILITY UNDER THE TORT CLAIMS
17
18
    BOARD TO INCLUDE THOSE PHYSICIANS WHO PROVIDE HEALTH CARE SERVICES
    TO MEDICAID RECIPIENTS, STATE AND SCHOOL EMPLOYEES HEALTH
19
20
    INSURANCE PLAN PARTICIPANTS AND CHILDREN'S HEALTH INSURANCE
    PROGRAM PARTICIPANTS IF AT LEAST THIRTY-FIVE PERCENT OF THE
21
    PHYSICIAN'S PATIENTS ARE MEDICAID RECIPIENTS, OR NOT TO EXCEED ONE
22
    HUNDRED TWENTY-FIVE PHYSICIANS; TO INCLUDE CERTAIN RETIRED
23
    PHYSICIANS WHO PROVIDE VOLUNTEER UNPAID HEALTH CARE SERVICES TO
24
25
    ANY PUBLIC ENTITY OR PRIVATE ENTITY; TO CREATE IN THE STATE
    TREASURY A SPECIAL FUND TO THE CREDIT OF THE MISSISSIPPI TORT CLAIMS BOARD WHICH SHALL BE COMPRISED OF ANY FUNDS MADE AVAILABLE
26
27
    FOR THE FUND BY THE LEGISLATURE; TO PROVIDE THAT MONIES IN THE
28
    SPECIAL FUND SHALL BE EXPENDED BY THE MISSISSIPPI TORT CLAIMS
29
   BOARD TO PROVIDE ADDITIONAL FUNDS FOR PRIOR ACT COVERAGE FOR PLAN
30
31
    PARTICIPANTS AND TO PAY THE MEDICAL MALPRACTICE PREMIUMS FOR THOSE
32
    RETIRED PHYSICIANS DESCRIBED HEREIN; TO CREATE AN ADVISORY COUNCIL
    TO ASSIST THE MISSISSIPPI TORT CLAIMS BOARD IN DETERMINING WHETHER
33
    A PHYSICIAN MEETS THE PERCENTAGE REQUIREMENT NECESSARY TO QUALIFY
35
    AS AN EMPLOYEE FOR LIMITED LIABILITY PURPOSES; TO PROVIDE RATES
    FOR COPIES OF MEDICAL RECORDS THAT MAY BE CHARGED BY MEDICAL PROVIDERS AND FACILITIES; TO AMEND SECTION 73-25-27, MISSISSIPPI
36
37
    CODE OF 1972, TO PROVIDE THE RIGHT FOR HARMED PATIENTS TO ATTEND
38
39
    DISCIPLINARY PROCEEDINGS INVOLVING THE PHYSICIAN RESPONSIBLE FOR
40
    THE HARM; TO PROVIDE FOR A WAIVER OF THE MEDICAL PRIVILEGE IN
    CERTAIN CASES; TO REQUIRE STATEWIDE PUBLICATION OF RECALL NOTICES; TO ALLOW BENCH TRIALS IN CERTAIN CASES IF THE PARTIES AGREE; TO
41
42
    PROVIDE THAT ALL MALPRACTICE CLAIMS SHALL BE REVIEWED BY A MEDICAL
43
    REVIEW PANEL; TO ALLOW PARTIES TO MUTUALLY AGREE TO OPT OUT OF
44
    THIS REQUIREMENT; TO ESTABLISH THE MEMBERSHIP OF THE REVIEW PANEL; TO PROVIDE WHAT EVIDENCE MAY BE CONSIDERED BY THE PANEL; TO
45
46
    PROVIDE THE FORM OF THE DECISION; TO PROVIDE FOR PANELIST IMMUNITY
47
48
    AND COMPENSATION; TO AMEND SECTION 11-46-19, MISSISSIPPI CODE OF
    1972, IN CONFORMITY THERETO; AND FOR RELATED PURPOSES.
49
```

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

H. B. No. 13 *HRO3/R48* 041E/HR03/R48 PAGE 1 (CJR\LH)

- 51 **SECTION 1.** Section 11-11-3, Mississippi Code of 1972, is
- 52 amended as follows:
- 53 11-11-3. (1) (a) (i) Civil actions of which the circuit
- 54 court has original jurisdiction shall be commenced in the county
- 55 where the defendant resides, or, if a corporation, in the county
- of its principal place of business, or in the county where a
- 57 substantial alleged act or omission occurred or where a
- 58 substantial event that caused the injury occurred.
- 59 (ii) Civil actions alleging a defective product
- 60 may also be commenced in the county where the plaintiff obtained
- 61 the product.
- (b) If venue in a civil action against a nonresident
- 63 defendant cannot be asserted under paragraph (a) of this
- 64 subsection (1), a civil action against a nonresident may be
- 65 commenced in the county where the plaintiff resides or is
- 66 domiciled.
- 67 (2) In any civil action where more than one (1) plaintiff is
- 68 joined, each plaintiff shall independently establish proper venue;
- 69 it is not sufficient that venue is proper for any other plaintiff
- 70 joined in the civil action.
- 71 **SECTION 2.** Section 11-1-60, Mississippi Code of 1972, is
- 72 amended as follows:
- 73 11-1-60. (1) For the purposes of this section, the
- 74 following words and phrases shall have the meanings ascribed
- 75 herein unless the context clearly requires otherwise:
- 76 (a) "Noneconomic damages" means subjective,
- 77 nonpecuniary damages arising from death, pain, suffering,
- 78 inconvenience, mental anguish, worry, emotional distress, loss of
- 79 society and companionship, loss of consortium, bystander injury,
- 80 physical impairment, disfigurement, injury to reputation,
- 81 humiliation, embarrassment, loss of the enjoyment of life, hedonic
- 82 damages, other nonpecuniary damages, and any other theory of
- 83 damages such as fear of loss, illness or injury. The term

HR03/R48

H. B. No.

- 84 "noneconomic damages" shall not include * * * punitive or
- 85 exemplary damages.
- 86 (b) "Actual economic damages" means objectively
- 87 verifiable pecuniary damages arising from medical expenses and
- 88 medical care, rehabilitation services, custodial care,
- 89 disabilities, loss of earnings and earning capacity, loss of
- 90 income, burial costs, loss of use of property, costs of repair or
- 91 replacement of property, costs of obtaining substitute domestic
- 92 services, loss of employment, loss of business or employment
- 93 opportunities, and other objectively verifiable monetary losses.
- 94 * * *
- 95 (2) (a) In any cause of action filed on or after July 1,
- 96 2004, for injury based on malpractice or breach of standard of
- 97 care against a provider of health care, including institutions for
- 98 the aged or infirm, in the event the trier of fact finds the
- 99 defendant liable, they shall not award the plaintiff more than the
- 100 following for noneconomic damages:
- 101 (i) For claims for causes of action filed on or
- 102 after passage of Chapter 2, Third Extraordinary Session 2002, but
- 103 before July 1, 2011, the sum of Five Hundred Thousand Dollars
- 104 (\$500,000.00);
- 105 (ii) For claims for causes of action filed on or
- 106 after July 1, 2011, but before July 1, 2017, the sum of Seven
- 107 Hundred Fifty Thousand Dollars (\$750,000.00);
- 108 (iii) For claims for causes of action filed on or
- 109 after July 1, 2017, the sum of One Million Dollars
- 110 (\$1,000,000.00).
- 111 (b) In any civil action filed on or after January 1,
- 112 2005, other than those actions described in paragraph (a) of this
- 113 subsection, in the event the trier of fact finds the defendant
- 114 liable, they shall not award the plaintiff more than Four Million
- 115 Dollars (\$4,000,000.00) for noneconomic damages.
- 116 * * *

It is the intent of this section to limit all noneconom.
--

- 118 damages to the above.
- (c) The trier of fact shall not be advised of the
- 120 limitations imposed by this subsection (2) and the judge shall
- 121 appropriately reduce any award of noneconomic damages that exceeds
- 122 the applicable limitation.
- 123 (3) The limitation on noneconomic damages set forth in
- 124 subsection (2) shall not apply in cases where the judge determines
- 125 that a jury may impose punitive damages.
- 126 (4) Nothing in this section shall be construed to impose a
- 127 limitation on damages for blindness, third degree burns, loss of
- 128 reproductive capabilities or actual economic damages.
- 129 (5) Nothing contained in subsection (1) of this section
- 130 shall be construed as creating a cause of action or as setting
- 131 forth elements of or types of damages that are or are not
- 132 recoverable in any type of cause of action.
- 133 **SECTION 3.** Section 11-1-63, Mississippi Code of 1972, is
- 134 brought forward as follows:
- 135 11-1-63. Subject to the provisions of Section 11-1-64, in
- 136 any action for damages caused by a product except for commercial
- 137 damage to the product itself:
- 138 (a) The manufacturer or seller of the product shall not
- 139 be liable if the claimant does not prove by the preponderance of
- 140 the evidence that at the time the product left the control of the
- 141 manufacturer or seller:
- 142 (i) 1. The product was defective because it
- 143 deviated in a material way from the manufacturer's specifications
- 144 or from otherwise identical units manufactured to the same
- 145 manufacturing specifications, or
- 146 2. The product was defective because it
- 147 failed to contain adequate warnings or instructions, or
- 148 3. The product was designed in a defective
- 149 manner, or

150	4. The product breached an express warranty
151	or failed to conform to other express factual representations upon
152	which the claimant justifiably relied in electing to use the
153	product; and
154	(ii) The defective condition rendered the product
155	unreasonably dangerous to the user or consumer; and
156	(iii) The defective and unreasonably dangerous
157	condition of the product proximately caused the damages for which
158	recovery is sought.
159	(b) A product is not defective in design or formulation
160	if the harm for which the claimant seeks to recover compensatory
161	damages was caused by an inherent characteristic of the product
162	which is a generic aspect of the product that cannot be eliminated
163	without substantially compromising the product's usefulness or
164	desirability and which is recognized by the ordinary person with
165	the ordinary knowledge common to the community.
166	(c) (i) In any action alleging that a product is
167	defective because it failed to contain adequate warnings or
168	instructions pursuant to paragraph (a)(i)2 of this section, the
169	manufacturer or seller shall not be liable if the claimant does
170	not prove by the preponderance of the evidence that at the time
171	the product left the control of the manufacturer or seller, the
172	manufacturer or seller knew or in light of reasonably available
173	knowledge should have known about the danger that caused the
174	damage for which recovery is sought and that the ordinary user or
175	consumer would not realize its dangerous condition.
176	(ii) An adequate product warning or instruction is
177	one that a reasonably prudent person in the same or similar
178	circumstances would have provided with respect to the danger and
179	that communicates sufficient information on the dangers and safe
180	use of the product, taking into account the characteristics of,

and the ordinary knowledge common to an ordinary consumer who

purchases the product; or in the case of a prescription drug,

181

- 183 medical device or other product that is intended to be used only
- 184 under the supervision of a physician or other licensed
- 185 professional person, taking into account the characteristics of,
- 186 and the ordinary knowledge common to, a physician or other
- 187 licensed professional who prescribes the drug, device or other
- 188 product.
- 189 (d) In any action alleging that a product is defective
- 190 pursuant to paragraph (a) of this section, the manufacturer or
- 191 seller shall not be liable if the claimant (i) had knowledge of a
- 192 condition of the product that was inconsistent with his safety;
- 193 (ii) appreciated the danger in the condition; and (iii)
- 194 deliberately and voluntarily chose to expose himself to the danger
- 195 in such a manner to register assent on the continuance of the
- 196 dangerous condition.
- 197 (e) In any action alleging that a product is defective
- 198 pursuant to paragraph (a)(i)2 of this section, the manufacturer or
- 199 seller shall not be liable if the danger posed by the product is
- 200 known or is open and obvious to the user or consumer of the
- 201 product, or should have been known or open and obvious to the user
- 202 or consumer of the product, taking into account the
- 203 characteristics of, and the ordinary knowledge common to, the
- 204 persons who ordinarily use or consume the product.
- 205 (f) In any action alleging that a product is defective
- 206 because of its design pursuant to paragraph (a)(i)3 of this
- 207 section, the manufacturer or product seller shall not be liable if
- 208 the claimant does not prove by the preponderance of the evidence
- 209 that at the time the product left the control of the manufacturer
- 210 or seller:
- 211 (i) The manufacturer or seller knew, or in light
- 212 of reasonably available knowledge or in the exercise of reasonable
- 213 care should have known, about the danger that caused the damage
- 214 for which recovery is sought; and

- (ii) The product failed to function as expected 215 216 and there existed a feasible design alternative that would have to a reasonable probability prevented the harm. A feasible design 217 218 alternative is a design that would have to a reasonable 219 probability prevented the harm without impairing the utility, 220 usefulness, practicality or desirability of the product to users
- 221 or consumers.

(g) (i) The manufacturer of a product who is found

- 223 liable for a defective product pursuant to paragraph (a) shall indemnify a product seller for the costs of litigation, any 224 225 reasonable expenses, reasonable attorney's fees and any damages
- awarded by the trier of fact unless the seller exercised 226 227 substantial control over that aspect of the design, testing,
- manufacture, packaging or labeling of the product that caused the 228
- 229 harm for which recovery of damages is sought; the seller altered
- 230 or modified the product, and the alteration or modification was a
- 231 substantial factor in causing the harm for which recovery of
- 232 damages is sought; the seller had actual knowledge of the
- defective condition of the product at the time he supplied same; 233
- 234 or the seller made an express factual representation about the
- 235 aspect of the product which caused the harm for which recovery of
- 236 damages is sought.
- 237 Subparagraph (i) shall not apply unless the (ii)
- 238 seller has given prompt notice of the suit to the manufacturer
- 239 within ninety (90) days of the service of the complaint against
- 240 the seller.

- 241 Nothing in this section shall be construed to
- 242 eliminate any common law defense to an action for damages caused
- 243 by a product.
- 244 SECTION 4. Section 11-1-64, Mississippi Code of 1972, is
- 245 brought forward as follows:

- 11-1-64. (1) A defendant whose liability is based solely on his status as a seller in the stream of commerce may be dismissed from a products liability claim as provided in this section.
- 249 (2) This section shall apply to any products liability claim 250 in which another defendant, including the manufacturer, is 251 properly before the court and from whom recovery may be had for 252 plaintiff's claim.
 - (3) A defendant may move for dismissal under this section within one hundred eighty (180) days from the date an answer or other responsive pleading is due to be filed or at such later time as may be permitted by the court for good cause shown. The motion shall be accompanied by an affidavit which shall be made under oath and shall state that the defendant is aware of no facts or circumstances upon which a verdict might be reached against him, other than his status as a seller in the stream of commerce.
 - (4) The parties shall have sixty (60) days in which to conduct discovery on the issues raised in the motion and affidavit. The court for good cause shown, may extend the time for discovery, and may enter a protective order pursuant to the rules of civil procedure regarding the scope of discovery on other issues.
 - (5) Any party may move for a hearing on a motion to dismiss under this section. If the requirements of subsections (2) and (3) of this section are met, and no party comes forward at such a hearing with evidence of facts which would render the defendant seeking dismissal under this section liable on some basis other than his status as a seller in the stream of commerce, the court shall dismiss without prejudice the claim as to that defendant.
- (6) No order of dismissal under this section shall operate to divest a court of venue or jurisdiction otherwise proper at the time the action was commenced. A defendant dismissed pursuant to this section shall be considered to remain a party to such action only for such purposes.

253

254

255

256

257

258

259

260

261

262

263

264

265

266

267

268

269

270

271

272

- 279 (7) An order of dismissal under this section shall be 280 interlocutory until final disposition of plaintiff's claim.
- 281 **SECTION 5.** Section 11-1-65, Mississippi Code of 1972, is amended as follows:
- 283 11-1-65. (1) In any action in which punitive damages are 284 sought:
- 285 (a) Punitive damages may not be awarded if the claimant
 286 does not prove by clear and convincing evidence that the defendant
 287 against whom punitive damages are sought acted with actual malice,
 288 gross negligence which evidences a willful, wanton or reckless
 289 disregard for the safety of others, or committed actual fraud.
- 290 (b) In any action in which the claimant seeks an award
 291 of punitive damages, the trier of fact shall first determine
 292 whether compensatory damages are to be awarded and in what amount,
 293 before addressing any issues related to punitive damages.
- (c) If, but only if, an award of compensatory damages
 has been made against a party, the court shall promptly commence
 an evidentiary hearing * * * to determine whether punitive damages
 may be considered by the same trier of fact.
- 298 (d) The court shall determine whether the issue of 299 punitive damages may be submitted to the trier of fact; and, if 300 so, the trier of fact shall determine whether to award punitive 301 damages and in what amount.
- In all cases involving an award of punitive 302 303 damages, the fact finder, in determining the amount of punitive damages, shall consider, to the extent relevant, the following: 304 the defendant's financial condition and net worth; the nature and 305 306 reprehensibility of the defendant's wrongdoing, for example, the 307 impact of the defendant's conduct on the plaintiff, or the 308 relationship of the defendant to the plaintiff; the defendant's awareness of the amount of harm being caused and the defendant's 309 310 motivation in causing such harm; the duration of the defendant's 311 misconduct and whether the defendant attempted to conceal such

H. B. No.

- 312 misconduct; and any other circumstances shown by the evidence that
- 313 bear on determining a proper amount of punitive damages. The
- 314 trier of fact shall be instructed that the primary purpose of
- 315 punitive damages is to punish the wrongdoer and deter similar
- 316 misconduct in the future by the defendant and others while the
- 317 purpose of compensatory damages is to make the plaintiff whole.
- 318 (f) (i) Before entering judgment for an award of
- 319 punitive damages the trial court shall ascertain that the award is
- 320 reasonable in its amount and rationally related to the purpose to
- 321 punish what occurred giving rise to the award and to deter its
- 322 repetition by the defendant and others.
- 323 (ii) In determining whether the award is
- 324 excessive, the court shall take into consideration the following
- 325 factors:
- 326 1. Whether there is a reasonable relationship
- 327 between the punitive damage award and the harm likely to result
- 328 from the defendant's conduct as well as the harm that actually
- 329 occurred;
- 330 2. The degree of reprehensibility of the
- 331 defendant's conduct, the duration of that conduct, the defendant's
- 332 awareness, any concealment, and the existence and frequency of
- 333 similar past conduct;
- 3. The financial condition and net worth of
- 335 the defendant; and
- 4. In mitigation, the imposition of criminal
- 337 sanctions on the defendant for its conduct and the existence of
- 338 other civil awards against the defendant for the same conduct.
- 339 (2) The seller of a product other than the manufacturer
- 340 shall not be liable for punitive damages unless the seller
- 341 exercised substantial control over that aspect of the design,
- 342 testing, manufacture, packaging or labeling of the product that
- 343 caused the harm for which recovery of damages is sought; the
- 344 seller altered or modified the product, and the alteration or

```
345 modification was a substantial factor in causing the harm for
```

- 346 which recovery of damages is sought; the seller had actual
- 347 knowledge of the defective condition of the product at the time he
- 348 supplied same * * *.
- 349 (3) (a) In any civil action where an entitlement to
- 350 punitive damages shall have been established under applicable
- 351 laws, no award of punitive damages shall exceed the following:
- 352 (i) Twenty Million Dollars (\$20,000,000.00) for a
- 353 defendant with a net worth of more than One Billion Dollars
- 354 (\$1,000,000,000.00);
- 355 (ii) Fifteen Million Dollars (\$15,000,000.00) for
- 356 a defendant with a net worth of more than Seven Hundred Fifty
- 357 Million Dollars (\$750,000,000.00) but not more than One Billion
- 358 Dollars (\$1,000,000,000.00);
- 359 (iii) Five Million Dollars (\$5,000,000.00) for a
- 360 defendant with a net worth of more than Five Hundred Million
- 361 Dollars (\$500,000,000.00) but not more than Seven Hundred Fifty
- 362 Million Dollars (\$750,000,000.00);
- 363 (iv) Three Million Seven Hundred Fifty Thousand
- 364 Dollars (\$3,750,000.00) for a defendant with a net worth of more
- 365 than One Hundred Million Dollars (\$100,000,000.00) but not more
- than Five Hundred Million Dollars (\$500,000,000.00);
- 367 (v) <u>Two Million Five Hundred Thousand Dollars</u>
- 368 (\$2,500,000.00) for a defendant with a net worth of more than
- 369 Fifty Million Dollars (\$50,000,000.00) but not more than One
- 370 Hundred Million Dollars (\$100,000,000.00); or
- 371 (vi) Two percent (2%) of the defendant's net worth
- 372 for a defendant with a net worth of Fifty Million Dollars
- 373 (\$50,000,000.00) or less.
- 374 (b) For the purposes of determining the defendant's net
- 375 worth in paragraph (a), the amount of the net worth shall be
- 376 determined in accordance with Generally Accepted Accounting
- 377 Principles.

- 378 (c) The limitation on the amount of punitive damages 379 imposed by this subsection (3) shall not be disclosed to the trier 380 of fact, but shall be applied by the court to any punitive damages 381 verdict.
- 382 (d) The limitation on the amount of punitive damages 383 imposed by this subsection (3) shall not apply to actions brought 384 for damages or an injury resulting from an act or failure to act 385 by the defendant:
- (i) If the defendant was convicted of a felony
 under the laws of this state or under federal law which caused the
 damages or injury; or
- (ii) While the defendant was under the influence of alcohol or under the influence of drugs other than lawfully prescribed drugs administered in accordance with a prescription.
- 392 (e) The exceptions provided in paragraph (d) shall not 393 apply to an employer of a person acting outside the scope of such 394 person's employment or responsibility as an agent or employee.
- 395 (4) Nothing in this section shall be construed as creating a
 396 right to an award of punitive damages or to limit the duty of the
 397 court, or the appellate courts, to scrutinize all punitive damage
 398 awards, ensure that all punitive damage awards comply with
 399 applicable procedural, evidentiary and constitutional
 400 requirements, and to order remittitur where appropriate.
- 401 * * *
- 402 **SECTION 6.** Section 11-1-66, Mississippi Code of 1972, is 403 amended as follows:
- of property shall be civilly liable for the criminal acts of a third party, unless such owner, occupant, lessee or managing agent knew or, with the exercise of reasonable care, should have known of the risk of criminal conduct on such property and the failure to exercise reasonable care to deter such foreseeable conduct is a proximate cause of damages to an individual or entity.

- 411 (2) No owner, occupant, lessee or managing agent of property
- 412 shall be liable for the death or injury of an independent
- 413 contractor or the independent contractor's employees resulting
- 414 from dangers of which the contractor knew or reasonably should
- 415 have known.
- 416 **SECTION 7.** Section 85-5-7, Mississippi Code of 1972, is
- 417 amended as follows:
- 418 85-5-7. (1) As used in this section "fault" means an act or
- 419 omission of a person which is a proximate cause of injury or death
- 420 to another person or persons, damages to property, tangible or
- 421 intangible, or economic injury, including, but not limited to,
- 422 negligence, malpractice, strict liability, absolute liability or
- 423 failure to warn. "Fault" shall not include any tort which results
- 424 from an act or omission committed with a specific wrongful intent.
- **4**25 *** * ***
- 426 (2) Except as otherwise provided in subsection (4) of this
- 427 section, in any civil action based on fault, the liability for
- 428 damages caused by two (2) or more persons shall be several only,
- 429 and not joint and several and a joint tort-feasor shall be liable
- 430 only for the amount of damages allocated to him in direct
- 431 proportion to his percentage of fault. In assessing percentages
- 432 of fault an employer and the employer's employee or a principal
- 433 and the principal's agent shall be considered as one (1) defendant
- 434 when the liability of such employer or principal has been caused
- 435 by the wrongful or negligent act or omission of the employee or
- 436 agent.
- **4**37 *** * ***
- 438 (3) Nothing in this section shall eliminate or diminish any
- 439 defenses or immunities which currently exist, except as expressly
- 440 noted herein.
- 441 (4) Joint and several liability shall be imposed on all who
- 442 consciously and deliberately pursue a common plan or design to
- 443 commit a tortious act, or actively take part in it. Any person
 - H. B. No. 13 *HRO3/R48* 041E/HR03/R48

- 444 held jointly and severally liable under this section shall have a
- 445 right of contribution from his fellow defendants acting in
- 446 concert.
- 447 (5) In actions involving joint tort-feasors, the trier of
- 448 fact shall determine the percentage of fault for each party
- 449 alleged to be at fault.
- 450 * * *
- 451 (6) Nothing in this section shall be construed to create a
- 452 cause of action. Nothing in this section shall be construed, in
- 453 any way, to alter the immunity of any person.
- 454 **SECTION 8.** Section 13-5-23, Mississippi Code of 1972, is
- 455 brought forward as follows:
- 456 13-5-23. All qualified persons shall be liable to serve as
- 457 jurors, unless excused by the court for one (1) of the following
- 458 causes:
- 459 (a) When the juror is ill, or when on account of
- 460 serious illness in the juror's family, the presence of the juror
- 461 is required at home,
- 462 (b) When the juror's attendance would cause a serious
- 463 financial loss to the juror or to the juror's business, or
- 464 (c) When the juror is under an emergency, fairly
- 465 equivalent to those mentioned in the foregoing clauses (a) and
- 466 (b).
- An excuse of illness under clause (a) may be made to the
- 468 clerk of court outside of open court by providing the clerk with
- 469 either a certificate of a licensed physician or an affidavit of
- 470 the juror, stating that the juror is ill or that there is a
- 471 serious illness in the juror's family. The test of an excuse
- 472 under clause (b) shall be whether, if the juror were incapacitated
- 473 by illness or otherwise for a week, some other persons would be
- 474 available or could reasonably be procured to carry on the business
- 475 for the week, and the test of an excuse under clause (c) shall be
- 476 such as to be the fair equivalent, under the circumstances of that

```
477 prescribed under clause (b). In cases under clauses (b) and (c)
```

- 478 the excuse must be made by the juror, in open court, under oath.
- It shall be unlawful for any employer or other person to
- 480 persuade or attempt to persuade any juror to avoid jury service,
- 481 or to intimidate or to threaten any juror in that respect. So to
- 482 do shall be deemed an interference with the administration of
- 483 justice and a contempt of court and punishable as such.
- But a tales juror, save when drawn and retained for the week,
- 485 shall not be compelled to serve two (2) days successively unless
- 486 the case in which the juror is impaneled continues longer than one
- 487 (1) day. Grand jurors shall serve until discharged by the court.
- 488 **SECTION 9.** Section 13-5-25, Mississippi Code of 1972, is
- 489 brought forward as follows:
- 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
- 492 actual trial of one or more litigated cases within two (2) years,
- 493 shall be exempt from service if he claims the privilege; but the
- 494 latter class shall serve as talesmen, and on special venire, and
- 495 on the regular panel, if there be a deficiency of jurors. No
- 496 qualified juror shall be excluded because of any such reasons, but
- 497 the same shall be a personal privilege to be claimed by any person
- 498 selected for jury duty. Any citizen over sixty-five (65) years of
- 499 age may claim this personal privilege outside of open court by
- 500 providing the clerk of court with information that allows the
- 501 clerk to determine the validity of the claim.
- Provided, however, that no person who has served on the
- 503 regular panel as a juror in the actual trial of one or more
- 104 litigated cases in one (1) court may claim the exemption in any
- 505 other court where he may be called to serve.
- 506 **SECTION 10.** Section 13-5-28, Mississippi Code of 1972, is
- 507 brought forward as follows:
- 508 13-5-28. If a grand, petit or other jury is ordered to be
- 509 drawn, the clerk thereafter shall cause each person drawn for jury

- 510 service to be served with a summons, either personally or by mail,
- 511 addressed to him at his usual residence, business or post office
- 512 address, requiring him to report for jury service at a specified
- 513 time and place.
- 514 **SECTION 11.** Section 13-5-34, Mississippi Code of 1972, is
- 515 brought forward as follows:
- 516 13-5-34. A person summoned for jury service who fails to
- 517 appear or to complete jury service as directed shall be ordered by
- 518 the court to appear forthwith and show cause for his failure to
- 519 comply with the summons. If he fails to show good cause for
- 520 noncompliance with the summons he is guilty of criminal contempt
- 521 and upon conviction may be fined not more than One Hundred Dollars
- 522 (\$100.00) or imprisoned not more than three (3) days, or both.
- 523 **SECTION 12.** Section 25-7-61, Mississippi Code of 1972, is
- 524 brought forward as follows:
- 525 25-7-61. (1) Fees of jurors shall be payable as follows:
- 526 (a) Grand jurors and petit jurors in the chancery,
- 527 county, circuit and special eminent domain courts shall be paid an
- 528 amount to be set by the board of supervisors, not to be less than
- 529 Twenty-five Dollars (\$25.00) per day and not to be greater than
- 530 Forty Dollars (\$40.00) per day, plus mileage authorized in Section
- 531 25-3-41. In the trial of all cases where jurors are in charge of
- 532 bailiffs and are not permitted to separate, the sheriff with the
- 533 approval of the trial judge may pay for room and board of jurors
- 534 on panel for actual time of trial.
- No grand juror shall receive any compensation except mileage
- 536 unless he shall have been sworn as provided by Section 13-5-45;
- 537 and no petit juror except those jurors called on special venires
- 538 shall receive any compensation authorized under this subsection
- 539 except mileage unless he shall have been sworn as provided by
- 540 Section 13-5-71.
- 541 (b) Jurors making inquisitions of idiocy, lunacy or of
- 542 unsound mind and jurors on coroner's inquest shall be paid Five

- 543 Dollars (\$5.00) per day plus mileage authorized in Section 25-3-41
- 544 by the county treasurer on order of the board of supervisors on
- 545 certificate of the clerk of the chancery court in which such
- 546 inquisition is held.
- 547 (c) Jurors in the justice courts shall be paid an
- 548 amount of not less than Ten Dollars (\$10.00) per day and not more
- 549 than Fifteen Dollars (\$15.00) per day, to be established by the
- 550 board of supervisors. In all criminal cases in the justice court
- 551 wherein the prosecution fails, the fees of jurors shall be paid by
- 552 the county treasurer on order of the board of supervisors on
- 553 certificate of the county attorney in all counties that have
- 554 county attorneys, otherwise by the justice court judge.
- 555 (2) Any juror may return the fees provided as compensation
- 556 for service as a juror to the county which paid for such person's
- 557 service as a juror. The fees returned to the county may be
- 558 earmarked for a particular purpose to be selected by the juror,
- 559 including:
- 560 (a) The local public library;
- 561 (b) Local law enforcement;
- 562 (c) The Mississippi Fire Fighters Memorial Burn Center
- 563 Fund created in Section 7-9-70, Mississippi Code of 1972; or
- (d) Any other governmental agency.
- SECTION 13. Section 33-1-5, Mississippi Code of 1972, is
- 566 brought forward as follows:
- 33-1-5. Any member of the Mississippi National Guard shall
- 568 be exempt from jury duty upon presenting a current written
- 569 statement from his superior officer that such jury service will be
- 570 likely to interfere with his military duties.
- 571 **SECTION 14.** The Legislature recognizes the importance of
- 572 assuring adequate health care services for all Mississippians, and
- 573 it acknowledges that physicians are a vital component of providing
- 574 such services. The Legislature finds that because of the makeup
- 575 of the citizenry of the state and the percentage of citizens who
 - H. B. No. 13 *HRO3/R48* 041E/HR03/R48

```
are (a) Medicaid recipients, (b) State and School Employees Health
576
577
     Insurance Plan participants and (c) Children's Health Insurance
578
     Program participants, physicians who provide health care services
579
     to such individuals are providing an essential public service and
     that it is in the public interest to provide funding to further
580
581
     address medical malpractice insurance needs of these physicians.
582
          SECTION 15. Section 83-48-5, Mississippi Code of 1972, is
583
     amended as follows:
584
          83-48-5. (1) There is created the Medical Malpractice
585
     Insurance Availability Plan that shall be funded by the
586
     participants in the plan. The plan shall be administered by the
587
     Tort Claims Board created under Section 11-46-18.
588
          (2) (a) The plan shall provide coverage for medical
589
     malpractice to hospitals, institutions for the aged or infirm, or
     other health care facilities licensed by the State of Mississippi,
590
     physicians, nurses or other personnel who are duly licensed to
591
592
     practice in a hospital or other health care facility licensed by
593
     the State of Mississippi. Participation in the plan shall be
     voluntary for any hospital, institution for the aged or infirm, or
594
595
     other health care facilities licensed by the State of Mississippi,
596
     physicians, nurses and any other personnel who are duly licensed
597
     to practice in a hospital or other health care facility licensed
598
     by the State of Mississippi. However, no state entity may
599
     participate in the plan. The term "state" as used in this
600
     subsection has the meaning ascribed to that term under Section
     11-46-1. The plan shall make available tail (extended reporting
601
602
     period) coverage for participants of the plan at an additional
603
     premium assessment for such coverage.
                                            The plan shall make
604
     available prior acts extended reporting period coverage
605
     (retroactive to the inception date of the physician's last medical
606
     malpractice policy) for participants of the plan at an additional
     premium assessment for such coverage. The board shall encourage
607
608
     participation in the insurance industry market. Any duly licensed
```

HR03/R48

H. B. No.

041E/HR03/R48 PAGE 18 (CJR\LH)

```
609 qualified Mississippi agent who writes a policy under the plan may
```

- 610 receive a commission not to exceed five percent (5%) of the
- 611 premium assessment as full compensation.
- (b) The limits of coverage under the plan shall be as
- 613 follows:
- (i) For participants who are "political
- 615 subdivisions" and participants who are "employees" of political
- 616 subdivisions, as such terms are defined under Section 11-46-1, a
- 617 maximum of Five Hundred Thousand Dollars (\$500,000.00), per single
- 618 occurrence, and Two Million Dollars (\$2,000,000.00), in the
- 619 aggregate, per year, for all occurrences;
- 620 (ii) For all other participants, a maximum of One
- 621 Million Dollars (\$1,000,000.00), per single occurrence, and Three
- 622 Million Dollars (\$3,000,000.00), in the aggregate, per year, for
- 623 all occurrences; and
- 624 (iii) For tail coverage, the plan shall provide
- 625 the same limits of coverage as designated in subparagraphs (i) and
- 626 (ii) of this paragraph (b).
- 627 (iv) For prior acts extended reporting period
- 628 coverage, the plan shall provide the same limits of coverage as
- 629 designated in subparagraphs (i) and (ii) of this paragraph (b).
- 630 For the purpose of providing funds, in addition to assessments,
- 631 for prior acts extending reporting period coverage, the
- 632 Mississippi Tort Claims Board shall use monies in the special fund
- 633 created under Section 17 of House Bill No. _____, First
- 634 Extraordinary Session of 2004.
- 635 (3) Policies may be underwritten based on participant
- 636 history. All rates applicable to the coverage provided herein
- 637 shall be on an actuarially sound basis and calculated to be
- 638 self-supporting. Policies for prior acts extended reporting
- 639 period coverage shall be underwritten at the lowest premium rates
- 640 possible on an actuarially sound basis.
- 641 $\underline{(4)}$ Every participant in the plan shall:

H. B. No. 13 *HRO3/R48*

- 642 File with the board a written agreement, the form 643 and substance of which shall be determined by the board, signed by a duly authorized representative of the participant, that the 644 645 participant will provide services to (i) Medicaid recipients, (ii) 646 State and School Employees Health Insurance Plan participants, and 647 (iii) Children's Health Insurance Program participants. 648 agreement must provide, among other things, that the participant 649 will provide services to Medicaid recipients, State and School 650 Employees Health Insurance Plan participants, and Children's 651 Health Insurance Program participants in a manner that is 652 comparable to the services provided to all other patients and shall be made without balance billing to the patient; and 653 654 Pay all assessments and premiums established by the (b) 655 board.
- 656 (5) This chapter shall not preclude any hospital,
 657 institution for the aged or infirm, or other health care
 658 facilities licensed by the State of Mississippi, physician, nurse
 659 or other personnel who are duly licensed to practice in a hospital
 660 or other health care facility licensed by the State of Mississippi
 661 from procuring medical malpractice insurance from any source other
 662 than the plan.
- (6) Notwithstanding any other provision of this section to
 the contrary, the Mississippi Tort Claims Board shall use so much
 of the monies in the special fund created in Section 17 of House
 Bill No. _____, First Extraordinary Session of 2004, as may be
 necessary to pay all medical malpractice insurance premiums for
 not more than an aggregate of twenty-five (25) physicians
 described in Section 11-46-1(f)(ii).
- 670 $\underline{(7)}$ The Tort Claims Board shall have the following powers 671 and duties:
- 672 (a) To expend money from a loan from the Tort Claims 673 Fund in an amount not to exceed Five Hundred Thousand Dollars

- 674 (\$500,000.00) for the start-up costs of administering the Medical
- 675 Malpractice Insurance Availability Plan;
- (b) To approve and pay claims of participants;
- (c) To charge and collect assessments and fees from
- 678 participants in the plan;
- (d) To contract with accountants, attorneys, actuaries
- 680 and any other experts deemed necessary to carry out the
- 681 responsibilities under the plan. The outsourcing of any function
- 682 of the board shall be provided by Mississippi residents or
- 683 Mississippi domicile corporations, if available;
- (e) To employ not more than five (5) persons in
- 685 time-limited positions to assist the board in the administration
- 686 of the plan;
- (f) To contract for administration of the claims and
- 688 service of the plan to a third party. The outsourcing of any
- 689 function of the board shall be provided by Mississippi residents
- 690 or Mississippi domicile corporations, if available;
- 691 (g) To use monies in the special fund created under
- 692 <u>Section 17 of House Bill No.</u> ____, First Extraordinary Session of
- 693 2004, for the purposes provided in subsections (2)(b)(iv) and (6)
- 694 of this section.
- (h) To adopt and promulgate rules and regulations to
- 696 implement the provisions of the plan. The Tort Claims Board shall
- 697 adopt such rules and regulations as may be necessary to ensure
- 698 that the plan remains actuarially sound. The board shall retain
- 699 the limited liability established by Section 11-46-15; and
- 700 (i) To submit an annual report on or before March 1
- 701 each year to the House and Senate Insurance Committees. Such
- 702 report shall contain:
- 703 (i) Certification by a qualified actuary that the
- 704 plan is solvent;
- 705 (ii) The number of participants in the plan;

									_	
706	(iii)	The	number	of	claims	filed	and	paid	bу	the

- 707 plan; and
- 708 (iv) The amount of all assessments and fees
- 709 collected from the participants in the plan.
- 710 (8) Nothing contained in this section shall be construed as
- 711 repealing, amending or superseding the provisions of any other law
- 712 and, if the provisions of this section conflict with any other
- 713 law, then the provisions of such other law shall govern and
- 714 control to the extent of the conflict.
- 715 **SECTION 16.** Section 11-46-1, Mississippi Code of 1972, is
- 716 amended as follows:
- 717 11-46-1. As used in this chapter the following terms shall
- 718 have the meanings herein ascribed unless the context otherwise
- 719 requires:
- 720 (a) "Claim" means any demand to recover damages from a
- 721 governmental entity as compensation for injuries.
- 722 (b) "Claimant" means any person seeking compensation
- 723 under the provisions of this chapter, whether by administrative
- 724 remedy or through the courts.
- 725 (c) "Board" means the Mississippi Tort Claims Board.
- 726 (d) "Department" means the Department of Finance and
- 727 Administration.
- 728 (e) "Director" means the executive director of the
- 729 department who is also the executive director of the board.
- 730 (f) "Employee" means:
- 731 (i) Any officer, employee or servant of the State
- 732 of Mississippi or a political subdivision of the state, including
- 733 elected or appointed officials and persons acting on behalf of the
- 734 state or a political subdivision in any official capacity,
- 735 temporarily or permanently, in the service of the state or a
- 736 political subdivision whether with or without compensation. The
- 737 term "employee" shall not mean a person or other legal entity
- 738 while acting in the capacity of an independent contractor under

```
739
     contract to the state or a political subdivision; provided,
740
     however, that for purposes of the limits of liability provided for
     in Section 11-46-15, the term "employee" shall include physicians
741
742
     under contract to provide health services with the State Board of
743
     Health, the State Board of Mental Health or any county or
744
     municipal jail facility while rendering services under such
745
     contract. The term "employee" shall also include any physician,
746
     dentist or other health care practitioner employed by the
747
     University of Mississippi Medical Center (UMMC) and its
748
     departmental practice plans who is a faculty member and provides
749
     health care services only for patients at UMMC or its affiliated
     practice sites. The term "employee" shall also include any
750
751
     physician, dentist or other health care practitioner employed by
752
     any university under the control of the Board of Trustees of State
753
     Institutions of Higher Learning who practices only on the campus
754
     of any university under the control of the Board of Trustees of
     State Institutions of Higher Learning. The term "employee" shall
755
756
     also include any physician, dentist or other health care
757
     practitioner employed by the State Veterans Affairs Board and who
758
     provides health care services for patients for the State Veterans
759
     Affairs Board. The term "employee" shall also include Mississippi
     Department of Human Services licensed foster parents for the
760
761
     limited purposes of coverage under the Tort Claims Act as provided
762
     in Section 11-46-8. For the purposes of the limits of liability
763
     provided for in Section 11-46-15 and for no other purpose under
764
     this chapter, the term "employee" also shall include any physician
765
     who provides health care services to Medicaid recipients, State
766
     and School Employees Health Insurance Plan participants and
767
     Children's Health Insurance Program participants, provided that at
768
     least thirty-five percent (35%) of the physician's patients, as
769
     determined by the board, are Medicaid recipients, however, not to
770
     exceed one hundred twenty-five (125) physicians; and
```

- 771 (ii) Any retired physician who provides volunteer
- 772 unpaid health care services to any public entity or private
- 773 entity. For the purposes of this subparagraph (ii), "public
- 774 entity" means any agency, department, institution, instrumentality
- 775 or political subdivision of the state, or any agency, department,
- 776 institution or instrumentality of any political subdivision of the
- 777 state; and "private entity" means any business, organization,
- 778 corporation, association or other legal entity which is not a
- 779 public entity.
- 780 (g) "Governmental entity" means and includes the state
- 781 and political subdivisions as herein defined.
- 782 (h) "Injury" means death, injury to a person, damage to
- 783 or loss of property or any other injury that a person may suffer
- 784 that is actionable at law or in equity.
- 785 (i) "Political subdivision" means any body politic or
- 786 body corporate other than the state responsible for governmental
- 787 activities only in geographic areas smaller than that of the
- 788 state, including, but not limited to, any county, municipality,
- 789 school district, community hospital as defined in Section
- 790 41-13-10, Mississippi Code of 1972, airport authority or other
- 791 instrumentality thereof, whether or not such body or
- 792 instrumentality thereof has the authority to levy taxes or to sue
- 793 or be sued in its own name.
- 794 (j) "State" means the State of Mississippi and any
- 795 office, department, agency, division, bureau, commission, board,
- 796 institution, hospital, college, university, airport authority or
- 797 other instrumentality thereof, whether or not such body or
- 798 instrumentality thereof has the authority to levy taxes or to sue
- 799 or be sued in its own name.
- 800 (k) "Law" means all species of law including, but not
- 801 limited to, any and all constitutions, statutes, case law, common
- 802 law, customary law, court order, court rule, court decision, court

opinion, court judgment or mandate, administrative rule or 803 804 regulation, executive order, or principle or rule of equity. 805 SECTION 17. There is created in the State Treasury a special 806 fund to the credit of the Mississippi Tort Claims Board, which 807 shall be comprised of any funds that may be made available for the 808 fund by the Legislature. Monies in the fund shall be expended by 809 the Mississippi Tort Claims Board, upon appropriation by the Legislature, only for the purpose of providing additional funds 810 811 for prior acts extended reporting period coverage as provided in 812 Section 83-48-5 and for paying the medical malpractice premiums 813 for those physicians described in Section 11-46-1(f)(ii) as provided for in Section 83-48-5. Unexpended amounts remaining in 814 815 the special fund at the end of a fiscal year shall not lapse into the State General Fund, and any interest earned or investment 816 earnings on amounts in the special fund shall be deposited to the 817 818 credit of the special fund. 819 SECTION 18. The Tort Claims Board shall develop methods and 820 promulgate rules and regulations to verify whether a physician meets the percentage requirement under Section 11-46-1(f) to 821 822 qualify as an employee. There is created an advisory council to assist the Mississippi Tort Claims Board in determining whether a 823 824 physician meets the percentage requirement under Section 11-46-1(f) to qualify as an employee. The advisory council shall 825 826 be composed of the Executive Director of the Mississippi Medical 827 Association or his designee; the President of the Mississippi Medical and Surgical Association or his designee; the 828 829 administrator of the Mississippi Tort Claims Board or his designee; two (2) physicians appointed by the Lieutenant Governor; 830 two (2) physicians appointed by the Speaker of the House of 831 Representatives and three (3) nonphysician members, one (1) from 832 833 each Supreme Court district, appointed by the Governor. **SECTION 19.** (1) Any medical provider or hospital or nursing 834 home or other medical facility shall charge no more than the 835

HR03/R48

H. B. No.

041E/HR03/R48 PAGE 25 (CJR\LH)

- 836 following amounts to patients or their representatives for photocopying any patient's records: Twenty Dollars (\$20.00) for 837 838 pages one (1) through twenty (20); One Dollar (\$1.00) per page for 839 the next eighty (80) pages; Fifty Cents (50¢) per page for all 840 pages thereafter. Ten percent (10%) of the total charge may be 841 added for postage and handling. Fifteen Dollars (\$15.00) may be 842 recovered by the medical provider or hospital or nursing home or other medical facility for retrieving medical records in archives 843 844 at a location off the premises where the facility/office is 845 located.
- 846 (2) A physician shall only charge normal, reasonable and 847 customary charges for a deposition related to a patient that the 848 physician is treating or has treated.
- 849 **SECTION 20.** Section 73-25-27, Mississippi Code of 1972, is 850 amended as follows:
- 851 The Mississippi State Board of Medical Licensure 73-25-27. 852 after notice and opportunity for a hearing to the licentiate, is 853 authorized to suspend or revoke for any cause named herein any 854 license it has issued, or the renewal thereof, that authorizes any 855 person to practice medicine, osteopathy, or any other method of 856 preventing, diagnosing, relieving, caring for, or treating, or 857 curing disease, injury or other bodily condition. The procedure 858 for suspension of a license for being out of compliance with an 859 order for support, and the procedure for the reissuance or 860 reinstatement of a license suspended for that purpose, and the payment of any fees for the reissuance or reinstatement of a 861 862 license suspended for that purpose, shall be governed by Section 93-11-157 or 93-11-163, as the case may be. If there is any 863 conflict between any provision of Section 93-11-157 or 93-11-163 864 865 and any provision of this chapter, the provisions of Section 93-11-157 or 93-11-163, as the case may be, shall control. 866
- Such notice shall be effected by registered mail or personal service setting forth the particular reasons for the proposed H. B. No. 13 *HRO3/R48*

action and fixing a date not less than thirty (30) days or more 869 870 than sixty (60) days from the date of such mailing or such 871 service, at which time the licentiate shall be given an 872 opportunity for a prompt and fair hearing. For the purpose of 873 such hearing the board, acting by and through its executive 874 office, may subpoena persons and papers on its own behalf and on behalf of licentiate, including records obtained pursuant to 875 Section 73-25-28, may administer oaths and such testimony when 876 877 properly transcribed, together with such papers and exhibits, shall be admissible in evidence for or against the licentiate. 878 879 such hearing licentiate may appear by counsel and personally in his own behalf. Any person sworn and examined as a witness in 880 881 such hearing shall not be held to answer criminally, nor shall any 882 papers or documents produced by such witness be competent evidence 883 in any criminal proceedings against such witness other than for perjury in delivering his evidence. Any patient or a 884 representative of the patient who has suffered harm by a physician 885 886 subject to a hearing under this section shall have the right to 887 attend any crucial proceedings conducted by the Board of Medical 888 Licensure for disciplinary purposes regarding such physician as to 889 that patient's treatment. Notice shall be provided to the patient 890 or his representative at the same time and in the same manner as 891 the notice is made to the physician. On the basis of any such hearing, or upon default of the licentiate, the Board of Medical 892 893 Licensure shall make a determination specifying its findings of 894 fact and conclusions of law. 895 A copy of such determination shall be sent by registered mail 896 or served personally upon the licentiate. The decision of the 897 Board of Medical Licensure revoking or suspending the license 898 shall become final thirty (30) days after so mailed or served 899 unless within said period the licentiate appeals the decision to 900 the chancery court, pursuant to the provisions hereof, and the 901 proceedings in chancery shall be conducted as other matters coming *HR03/R48* 13 H. B. No.

041E/HR03/R48 PAGE 27 (CJR\LH) 902 before the court. All proceedings and evidence, together with 903 exhibits, presented at such hearing before the Board of Medical 904 Licensure in the event of appeal shall be admissible in evidence 905 in said court.

906 The Board of Medical Licensure may subpoena persons and 907 papers on its own behalf and on behalf of the respondent, 908 including records obtained pursuant to Section 73-25-28, may 909 administer oaths, and may compel the testimony of witnesses. Ιt 910 may issue commissions to take testimony, and testimony so taken and sworn to shall be admissible in evidence for and against the 911 912 respondent. The Board of Medical Licensure shall be entitled to the assistance of the chancery court or the chancellor in 913 914 vacation, which, on petition by the board, shall issue ancillary 915 subpoenas and petitions and may punish as for contempt of court in the event of noncompliance therewith. 916

Unless the court otherwise decrees, a license that has been

suspended by the Board of Medical Licensure for a stated period of time shall automatically become valid on the expiration of that period and a license that has been suspended for an indefinite 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 petition of the respondent. A license that has been revoked shall not be restored to validity except: (1) after a rehearing by the Board of Medical Licensure, on petition of the respondent, for good cause shown, filed within ten (10) days, immediately 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 court, on petition as aforesaid. Any licentiate whose license becomes again valid after a period of suspension or after it has been restored to validity after a rehearing or by an order of the court, shall record it again in the office of the clerk of the circuit court of the county in which he resides in conformity with

the requirements of Section 73-25-13. Nothing in this chapter

H. B. No.

13

917

918

919

920

921

922

923

924

925

926

927

928

929

930

931

932

933

935 shall be construed as limiting or revoking the authority of any 936 court or of any licensing or registering officer or board, other 937 than the State Board of Medical Licensure, to suspend, revoke and 938 reinstate licenses and to cancel registrations under the 939 provisions of Section 41-29-311. 940 SECTION 21. In any medical malpractice action with multiple 941 defendants, the medical privilege shall be considered waived by 942 and between all defendants. 943 **SECTION 22.** Any product sold or distributed in Mississippi by any manufacturer or distributor licensed to do business or 944 945 doing business in Mississippi shall publish statewide notice of any recall of any product or its component parts within thirty 946 947 (30) days of the recall. Any manufacturer or distributor who 948 fails to provide notice of a recall as required by this section 949 shall, upon conviction, be fined Fifty Thousand Dollars 950 (\$50,000.00) for each violation. The Attorney General shall 951 enforce compliance with the provisions of this section. 952 SECTION 23. If the parties to a cause of action agree, any claim filed alleging damages may receive a bench trial which shall 953 954 be conducted in two hundred seventy (270) days or less after the cause of action has been filed. The cause of action shall be a 955 956 priority item in the court. 957 SECTION 24. Medical review panel. Claims; statute of limitations. 958 (1)959 Definitions. For purposes of this section: 960 "Board" means the Tort Claims Board 961 established by Section 11-46-18, Mississippi Code of 1972. (ii) "Health care provider" means a person, 962 partnership, limited liability partnership, limited liability 963 964 company, corporation, facility, or institution licensed by this state to provide health care or professional services as a 965 966 physician, hospital, institution for the aged or infirm, community 967 blood center, tissue bank, dentist, registered or licensed

HR03/R48

H. B. No.

041E/HR03/R48 PAGE 29 (CJR\LH)

practical nurse or certified nurse assistant, ambulance service, 968 969 certified registered nurse anesthetist, nurse-midwife, licensed 970 midwife, pharmacist, optometrist, podiatrist, chiropractor, 971 physical therapist, occupational therapist, psychologist, social 972 worker, licensed professional counselor, or any nonprofit facility 973 considered tax-exempt under Section 501(c)(3), Internal Revenue 974 Code, pursuant to 26 USC 501(c)(3), for the diagnosis and 975 treatment of cancer or cancer-related diseases, whether or not 976 such a facility is required to be licensed by this state, or any 977 professional corporation a health care provider is authorized to 978 form under the Mississippi Code of 1972, or any partnership, limited liability partnership, limited liability company, or 979 980 corporation whose business is conducted principally by health care 981 providers, or an officer, employee, partner, member, shareholder, 982 or agent thereof acting in the course and scope of his employment. 983 "Malpractice" means any unintentional tort (iii) 984 or any breach of contract based on health care or professional 985 services rendered, or which should have been rendered, by a health 986 care provider, to a patient, including failure to render services 987 timely and the handling of a patient, including loading and 988 unloading of a patient, and also includes all legal responsibility 989 of a health care provider arising from acts or omissions in the 990 training or supervision of health care providers, or from defects 991 in blood, tissue, transplants, drugs and medicines, or from 992 defects in or failures of prosthetic devices, implanted in or used 993 on or in the person of a patient. 994 (b) (i) All malpractice claims against health care 995 providers, other than claims validly agreed for submission to a

(ii) An action against a health care provider or his insurer commenced in any court shall be presented to a medical H. B. No. 13 *HRO3/R48* 041E/HR03/R48
PAGE 30 (CJR\LH)

lawfully binding arbitration procedure, shall be reviewed by a

parties specifically waive the use of the medical review panel.

medical review panel as provided in this section unless all

996

997

998

999

- 1001 review panel and an opinion rendered by the panel pursuant to this
- 1002 section, and the court's request for review shall constitute a
- 1003 stay pending the panel's decision.
- 1004 (iii) The request for review of a malpractice
- 1005 claim under this section shall be made by the court on its own
- 1006 motion or on the motion of any party.
- 1007 (c) (i) The request for review must be in writing,
- 1008 delivered to the board in person or by certified or registered
- 1009 United States mail, and include as an exhibit the complaint filed.
- 1010 (ii) Each defendant shall file a written answer
- 1011 within thirty (30) days of service of the request. If the
- 1012 defendant fails to file an answer as required, the board shall
- 1013 notify the defendant of the obligation to file and penalty for
- 1014 failure to file; notice shall be by certified or registered United
- 1015 States mail. If the defendant has not filed within thirty (30)
- 1016 days of the receipt of the notice specified in this subparagraph
- 1017 (ii), the request for review shall be dismissed; the panel, if
- 1018 formed, shall be dissolved, and the plaintiff shall be allowed to
- 1019 proceed in court upon the complaint filed.
- 1020 (2) Dismissal of review; dissolution of panel.
- 1021 (a) During the pendency of proceedings under this
- 1022 section, a health care provider against whom a claim has been
- 1023 filed may raise any exception or defenses available pursuant to
- 1024 Mississippi law, whether a procedural, statute of limitations or
- 1025 other exception or defense, at any time without need for
- 1026 completion of the review process by the medical review panel.
- 1027 (b) If the court finds for the party raising the
- 1028 exception or defense, that party shall be dismissed. If there are
- 1029 no defendants remaining, the panel, if established, shall be
- 1030 dissolved.
- 1031 (3) Composition and selection of panel.
- 1032 (a) The medical review panel shall consist of two (2)
- 1033 physicians who each hold an unlimited license to practice medicine
 - н. в. No. 13 *HRO3/R48*

1034 in Mississippi, one (1) patient advocate appointed by the Tort 1035 Claims Board and one (1) attorney who shall be the nonvoting chair 1036 of the panel. The parties may agree on the attorney member of the 1037 medical review panel within thirty (30) days after the filing of 1038 the answer; if no agreement can be reached, then the attorney 1039 member of the medical review panel shall be selected as follows: 1040 The board shall draw five (5) names at random (i) 1041 from the list of attorneys maintained by the board who have medical malpractice experience. The names of judges, magistrates, 1042 1043 district attorneys and assistant district attorneys shall be 1044 excluded if drawn and new names drawn in their place. After selection of the attorney names, the board shall notify the 1045 1046 parties of the attorney names from which the parties, within five 1047 (5) days, may choose the attorney member of the panel. agreement can be reached within five (5) days, the parties shall 1048 immediately initiate a procedure of selecting the attorney by each 1049 1050 striking two (2) names alternately, with the plaintiff striking 1051 first and so advising the defendant of the name of the attorney so stricken; thereafter, the defendant and the plaintiff shall 1052 1053 alternately strike until both sides have stricken two (2) names and the remaining name shall be the attorney member of the panel. 1054 1055 If either the plaintiff or defendant fails to strike, the board 1056 shall strike for that party within five (5) additional days. 1057 (ii) After the striking, the board shall notify 1058 the attorney and all parties of the name of the selected attorney. An attorney who has a conflict of interest shall decline to serve. 1059 1060 The attorney shall act as chairman of the panel and 1061 shall have no vote. The chairman shall preside at panel meetings, advise the panel as to questions of law, and shall prepare the 1062 opinion of the panel as required in subsection (7) of this 1063 1064 section. It is the duty of the chairman to expedite the selection 1065 of the other panel members, to convene the panel and expedite the 1066 panel's review of the proposed complaint. The attorney chairman *HR03/R48* 13 H. B. No. 041E/HR03/R48

PAGE 32 (CJR\LH)

1067 shall establish, by order, a reasonable schedule for submission of

1068 evidence to the medical review panel, but must allow sufficient

1069 time for the parties to make full and adequate presentation of

1070 related facts and authorities within one hundred twenty (120) days

1071 following selection of the panel.

1072 (c) The qualification and selection of physician

1073 members of the medical review panel shall be as follows:

1074 (i) All physicians who hold a license to practice

1075 medicine in the State of Mississippi and who are engaged in the

1076 active practice of medicine in this state, whether in the teaching

1077 profession or otherwise, shall be available for selection and,

1078 unless excused for cause, required to serve upon selection.

1079 (ii) Each party to the action shall have the right

to select one (1) physician and upon selection the physician shall

1081 be required to serve.

1082 (iii) When there are multiple plaintiffs or

1083 defendants, there shall be only one (1) physician selected per

1084 side. The plaintiff, whether single or multiple, shall have the

1085 right to select one (1) physician, and the defendant, whether

1086 single or multiple, shall have the right to select one (1)

1087 physician.

1080

1088 (iv) If any defendant is a physician, the

1089 physicians selected must be of the same specialty as at least one

1090 (1) physician defendant.

1091 (v) Parties and their attorneys are absolutely

1092 prohibited from contact with the physician whose name is

1093 submitted, either before or after submission. No physician may be

1094 informed of the method of any panel member's selection.

1095 (vi) No physician may be selected to serve on more

1096 than four (4) medical review panels in a twelve-month period.

1097 (vii) The physician selection process shall be

1098 completed within thirty (30) days of the selection of the attorney

1099 chairman.

1100 (d) Attorneys and physicians with any financial, 1101 employment, or personal or family ties to any party or attorney 1102 for a party shall not serve on a panel. Any conflict that cannot 1103 be resolved shall be decided by the court upon the motion of any 1104 party. 1105 (4) Evidence. The evidence to be considered by the medical review 1106 (a) panel shall be promptly submitted by the respective parties in 1107 1108 written form only. 1109 (b) The evidence may consist of: 1110 (i) Medical records; 1111 (ii) Sworn statements; 1112 (iii) Expert reports signed by experts; 1113 (iv) Deposition transcripts; Any other evidence allowed by the medical 1114 (v)review panel or submitted by the parties. 1115 1116 (c) Depositions of the parties only may be taken, and

1118 (d) Upon request of any party or panel member, the

may be taken prior to the convening of the panel.

- 1119 board shall issue subpoenas and subpoenas duces tecum in aid of
- 1120 the taking of depositions and the production of documentary
- 1121 evidence for inspection, copying or both.
- 1122 (e) The plaintiff must sign a valid authorization
- 1123 allowing defendants to obtain the plaintiff's medical records.
- 1124 The defendant shall treat all medical records in a confidential
- 1125 manner and shall not disclose the contents of the records to
- 1126 anyone other than the panel or other experts; all other experts
- 1127 must treat the plaintiff's records as confidential.
- 1128 (f) The board shall send a copy of the evidence to each
- 1129 member of the panel.

- 1130 (5) **Hearings.** (a) After submission of all evidence and
- 1131 upon ten (10) days' notice to the other side, either party or the
- 1132 panel shall have the right to convene the panel at a time and
 - H. B. No. 13 *HRO3/R48* 041E/HR03/R48

- 1133 place agreeable to the members of the panel; each party is
- 1134 entitled to request only one (1) hearing. The panel may hold as
- 1135 many hearings as it chooses. The purpose of a hearing is to ask
- 1136 questions as to additional evidence needed and to afford an
- 1137 opportunity to make oral presentation of the facts. The chairman
- 1138 of the panel shall preside at all hearings, which shall be
- 1139 informal.
- 1140 (b) The following are locations where hearings may be
- 1141 held:
- 1142 (i) At a courthouse or other available public
- 1143 building in the county where the act or omission is alleged to
- 1144 have occurred.
- 1145 (ii) The attorney chairman shall decide the
- 1146 location in the event of any dispute.
- 1147 (iii) Private offices in the county where the act
- 1148 or omission is alleged to have occurred may be used if there is no
- 1149 cost or if the parties pay for the cost.
- 1150 (6) Panel deliberations and decision. After receiving all
- 1151 evidence from the parties, the panel shall convene to discuss the
- 1152 evidence presented not less than one (1) time, and, not later than
- 1153 sixty (60) days after receiving all evidence from the parties,
- 1154 shall render a written decision signed by the panelists, together
- 1155 with written reasons for their conclusions, as follows:
- 1156 (a) There was a breach of the appropriate standard of
- 1157 care;
- 1158 (b) There was not a breach of the appropriate standard
- 1159 of care; or
- 1160 (c) Whether the defendant or defendants failed to
- 1161 comply with the appropriate standard of care cannot be determined.
- 1162 (7) Form of decision. The decision reached by the medical
- 1163 review panel shall be in writing, shall state the facts upon which
- 1164 it is based, shall be of public record, and shall be admissible as
- 1165 evidence in the civil case filed.

1166 (8) Panelist immunity. A panelist shall have absolute 1167 immunity from civil liability for all communications, findings, 1168 opinions and conclusions made in the course and scope of duties 1169 prescribed by this section.

(9) Panelist compensation.

Mississippi Code of 1972.

1170

- 1171 (a) (i) Each physician member of the medical review
 1172 panel shall be paid a fee of Five Hundred Dollars (\$500.00) for
 1173 all work performed as a member of the panel, and in addition
 1174 thereto, per diem as provided in Section 25-3-69, Mississippi Code
 1175 of 1972, and travel expenses as would be calculated for a state
 1176 employee pursuant to Section 25-3-41, Mississippi Code of 1972.
- (ii) The attorney chairman of the medical review
 panel shall be paid at the rate of One Hundred Fifty Dollars
 (\$150.00) per hour, not to exceed a total of Three Thousand
 Dollars (\$3,000.00), for all work performed as a member of the
 panel, and in addition thereto, per diem as provided in Section
 panel, and in addition thereto, per diem as provided in Section
 calculated for a state employee pursuant to Section 25-3-41,
- 1185 (b) The costs of the medical review panel shall be
 1186 split between the parties. The panel members shall by affidavit
 1187 request the payment due under this subsection (9) from the board,
 1188 which in turn shall bill the parties for the proportionate share
 1189 of each party.
- 1190 (10) **Delivery and effect of decision.** The chairman shall submit a copy of the panel's report to the board and all parties and attorneys by registered or certified mail within five (5) days after the panel renders its opinion. The panel's report shall be of public record.
- 1195 **SECTION 25.** Section 11-46-19, Mississippi Code of 1972, is 1196 amended as follows:
- [Until July 1, 2005, this section shall read as follows:]

1199	(a)	То	provide	ovei	rsight	over	the	Tort	Claims	Fund;
1200	(b)	То	approve	any	award	made	from	the	Tort (Claims

1201 Fund;

- 1202 (c) To pay all necessary expenses attributable to the 1203 operation of the Tort Claims Fund from such fund;
- 1204 To assign litigated claims against governmental 1205 entities other than political subdivisions to competent attorneys unless such governmental entity has a staff attorney who is 1206 1207 competent to represent the governmental entity and is approved by 1208 the board; the board shall give primary consideration to attorneys 1209 practicing in the jurisdiction where the claim arose in assigning 1210 cases; attorneys hired to represent a governmental entity other 1211 than a political subdivision shall be paid according to the department fee schedule; 1212
- 1213 (e) To approve all claimants' attorney fees in claims
 1214 against the state;
- (f) To employ on a full-time basis a staff attorney who shall possess the minimum qualifications required to be a member of The Mississippi Bar, and such other staff as it may deem necessary to carry out the purposes of this chapter; the employees in the positions approved by the board shall be hired by the director, shall be employees of the department, and shall be compensated from the Tort Claims Fund;
- 1222 (g) To contract with one or more reputable insurance 1223 consulting firms as may be necessary;
- (h) To purchase any policies of liability insurance and to administer any plan of self-insurance or policies of liability insurance required for the protection of the state against claims and suits brought under this chapter;
- 1228 (i) To expend money from the Tort Claims Fund for the
 1229 purchase of any policies of liability insurance and the payment of
 1230 any award or settlement of a claim against the state under the
 1231 provisions of this chapter or of a claim against any school

- 1232 district, junior college or community college district, or state
- 1233 agency, arising from the operation of school buses or other
- 1234 vehicles, under the provisions of Section 37-41-42;
- 1235 (j) To cancel, modify or replace any policy or policies
- 1236 of liability insurance procured by the board;
- 1237 (k) To issue certificates of coverage to governmental
- 1238 entities, including any political subdivision participating in any
- 1239 plan of liability protection approved by the board;
- 1240 (1) To review and approve or reject any plan of
- 1241 liability insurance or self-insurance reserves proposed or
- 1242 provided by political subdivisions if such plan is intended to
- 1243 serve as security for risks of claims and suits against them for
- 1244 which immunity has been waived under this chapter;
- 1245 (m) To administer disposition of claims against the
- 1246 Tort Claims Fund;
- 1247 (n) To withhold issuance of any warrants payable from
- 1248 funds of a participating state entity should such entity fail to
- 1249 make required contributions to the Tort Claims Fund in the time
- 1250 and manner prescribed by the board;
- 1251 (o) To develop a comprehensive statewide list of
- 1252 attorneys who are qualified to represent the state and any
- 1253 employee thereof named as a defendant in a claim brought under
- 1254 this chapter against the state or such employee;
- 1255 (p) To develop a schedule of fees for paying attorneys
- 1256 defending claims against the state or an employee thereof;
- 1257 (q) To adopt and promulgate such reasonable rules and
- 1258 regulations and to do and perform all such acts as are necessary
- 1259 to carry out its powers and duties under this chapter;
- 1260 (r) To establish and assess premiums to be paid by
- 1261 governmental entities required to participate in the Tort Claims
- 1262 Fund;
- 1263 (s) To contract with a third-party administrator to
- 1264 process claims against the state under this chapter;

1265	(t) To annually submit its budget request to the
1266	Legislature as a state agency;
1267	(u) To dispose of salvage obtained in settlement or
1268	payment of any claim at fair market value by such means and upon
1269	such terms as the board may think best; * * *
1270	(v) To administer the Medical Malpractice Insurance
1271	Availability Plan under Section 83-48-5; and
1272	(w) To act as the board as required under House Bill
1273	No, 2004 First Extraordinary Session, dealing with medical
1274	malpractice claims as follows:
1275	(i) To accept filings under the act;
1276	(ii) To coordinate the selection of panels;
1277	(iii) To maintain lists of attorneys eligible for
1278	appointment as attorney chairmen;
1279	(iv) To promulgate rules in reference to the
1280	qualifications of attorneys serving as panel members;
1281	(v) To promulgate rules and regulations necessary
1282	to implement the provisions of Section 24 of House Bill No,
1283	2004 First Extraordinary Session; and
1284	(vi) To provide general administrative support.
1285	(2) Policies of liability insurance purchased for the
1286	protection of governmental entities against claims and suits
1287	brought under this chapter shall be purchased pursuant to the
1288	competitive bidding procedures set forth in Section 31-7-13.
1289	(3) The department shall have the following powers and
1290	duties:
1291	(a) To annually report to the Legislature concerning
1292	each comprehensive plan of liability protection established
1293	pursuant to Section 11-46-17(2). Such report shall include a
1294	comprehensive analysis of the cost of the plan, a breakdown of the
1295	cost to participating state entities, and such other information
1296	as the department may deem necessary.

1297	(b) To provide the board with any staff and meeting
1298	facilities as may be necessary to carry out the duties of the
1299	board as provided in this chapter.
1300	(c) To submit the board's budget request for the

1300 (c) To submit the board's budget request for the
1301 initial year of operation of the board in order to authorize
1302 expenditures for the 1993-1994 fiscal year and for the
1303 appropriation of such general funds as shall be required for the
1304 commencement of its activities.

[From and after July 1, 2005, this section shall read as follows:]

- 1307 11-46-19. (1) The board shall have the following powers:
- 1308 (a) To provide oversight over the Tort Claims Fund;
- 1309 (b) To approve any award made from the Tort Claims
- 1310 Fund;

1305

1306

1314

- 1311 (c) To pay all necessary expenses attributable to the 1312 operation of the Tort Claims Fund from such fund;
- 1313 (d) To assign litigated claims against governmental

entities other than political subdivisions to competent attorneys

- 1315 unless such governmental entity has a staff attorney who is
- 1316 competent to represent the governmental entity and is approved by
- 1317 the board; the board shall give primary consideration to attorneys
- 1318 practicing in the jurisdiction where the claim arose in assigning
- 1319 cases; attorneys hired to represent a governmental entity other
- 1320 than a political subdivision shall be paid according to the
- 1321 department fee schedule;
- 1322 (e) To approve all claimants' attorney fees in claims
- 1323 against the state;
- 1324 (f) To employ on a full-time basis a staff attorney who
- 1325 shall possess the minimum qualifications required to be a member
- 1326 of The Mississippi Bar, and such other staff as it may deem
- 1327 necessary to carry out the purposes of this chapter; the employees
- 1328 in the positions approved by the board shall be hired by the

- 1329 director, shall be employees of the department, and shall be
- 1330 compensated from the Tort Claims Fund;
- 1331 (g) To contract with one or more reputable insurance
- 1332 consulting firms as may be necessary;
- 1333 (h) To purchase any policies of liability insurance and
- 1334 to administer any plan of self-insurance or policies of liability
- 1335 insurance required for the protection of the state against claims
- 1336 and suits brought under this chapter;
- 1337 (i) To expend money from the Tort Claims Fund for the
- 1338 purchase of any policies of liability insurance and the payment of
- 1339 any award or settlement of a claim against the state under the
- 1340 provisions of this chapter or of a claim against any school
- 1341 district, junior college or community college district, or state
- 1342 agency, arising from the operation of school buses or other
- 1343 vehicles, under the provisions of Section 37-41-42;
- 1344 (j) To cancel, modify or replace any policy or policies
- 1345 of liability insurance procured by the board;
- 1346 (k) To issue certificates of coverage to governmental
- 1347 entities, including any political subdivision participating in any
- 1348 plan of liability protection approved by the board;
- 1349 (1) To review and approve or reject any plan of
- 1350 liability insurance or self-insurance reserves proposed or
- 1351 provided by political subdivisions if such plan is intended to
- 1352 serve as security for risks of claims and suits against them for
- 1353 which immunity has been waived under this chapter;
- 1354 (m) To administer disposition of claims against the
- 1355 Tort Claims Fund;
- 1356 (n) To withhold issuance of any warrants payable from
- 1357 funds of a participating state entity should such entity fail to
- 1358 make required contributions to the Tort Claims Fund in the time
- 1359 and manner prescribed by the board;
- 1360 (o) To develop a comprehensive statewide list of
- 1361 attorneys who are qualified to represent the state and any

1362	employee thereof named as a defendant in a claim brought under
1363	this chapter against the state or such employee;
1364	(p) To develop a schedule of fees for paying attorneys
1365	defending claims against the state or an employee thereof;
1366	(q) To adopt and promulgate such reasonable rules and
1367	regulations and to do and perform all such acts as are necessary
1368	to carry out its powers and duties under this chapter;
1369	(r) To establish and assess premiums to be paid by
1370	governmental entities required to participate in the Tort Claims
1371	Fund;
1372	(s) To contract with a third-party administrator to
1373	process claims against the state under this chapter;
1374	(t) To annually submit its budget request to the
1375	Legislature as a state agency;
1376	(u) To dispose of salvage obtained in settlement or
1377	payment of any claim at fair market value by such means and upon
1378	such terms as the board may think best : and
1379	(v) To act as the board as required under House Bill
1380	No, 2004 First Extraordinary Session, dealing with medical
1381	<pre>malpractice claims as follows:</pre>
1382	(i) To accept filings under the act;
1383	(ii) To coordinate the selection of panels;
1384	(iii) To maintain lists of attorneys eligible for
1385	appointment as attorney chairmen;
1386	(iv) To promulgate rules in reference to the
1387	qualifications of attorneys serving as panel members;
1388	(v) To promulgate rules and regulations necessary
1389	to implement the provisions of Section 24 of House Bill No,
1390	2004 First Extraordinary Session; and
1391	(vi) To provide general administrative support.
1392	(2) Policies of liability insurance purchased for the
1393	protection of governmental entities against claims and suits

1394 brought under this chapter shall be purcha	ased pursuant to the
---	----------------------

- 1395 competitive bidding procedures set forth in Section 31-7-13.
- 1396 (3) The department shall have the following powers and
- 1397 duties:
- 1398 (a) To annually report to the Legislature concerning
- 1399 each comprehensive plan of liability protection established
- 1400 pursuant to Section 11-46-17(2). Such report shall include a
- 1401 comprehensive analysis of the cost of the plan, a breakdown of the
- 1402 cost to participating state entities, and such other information
- 1403 as the department may deem necessary.
- 1404 (b) To provide the board with any staff and meeting
- 1405 facilities as may be necessary to carry out the duties of the
- 1406 board as provided in this chapter.
- 1407 (c) To submit the board's budget request for the
- 1408 initial year of operation of the board in order to authorize
- 1409 expenditures for the 1993-1994 fiscal year and for the
- 1410 appropriation of such general funds as shall be required for the
- 1411 commencement of its activities.
- 1412 **SECTION 26.** If any provision of this act is held by a court
- 1413 to be invalid, such invalidity shall not affect the remaining
- 1414 provisions of this act, and to this end the provisions of this act
- 1415 are declared severable.
- 1416 SECTION 27. This act shall take effect and be in force from
- 1417 and after July 1, 2004, and Sections 1 through 7 of this act shall
- 1418 apply to all causes of action filed on or after that date.