

By: Representative Aguirre

To: Judiciary A

HOUSE BILL NO. 1147

1 AN ACT TO PROVIDE THAT A HOSPITAL SHALL HAVE A LIEN AGAINST
 2 CLAIMS BY PATIENTS AND DAMAGES RECOVERED BY PATIENTS IN A LAWSUIT
 3 OR SETTLEMENT; TO REQUIRE THE LIEN TO BE FILED IN THE OFFICE OF
 4 THE CIRCUIT CLERK; TO REQUIRE NOTICE OF JUDGMENT OR AWARD; TO
 5 AMEND SECTION 83-9-47, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT A
 6 HEALTH CARE PROVIDER SHALL HAVE A LIEN, IN AN AMOUNT EQUAL TO ALL
 7 REASONABLE AND NECESSARY CHARGES FOR HOSPITAL CARE, TREATMENT AND
 8 MAINTENANCE OF ILL OR INJURED PERSONS, ON THE GROSS PROCEEDS OF
 9 THE PAYMENT MADE DIRECTLY TO THE PATIENT OR POLICYHOLDER BY ANY
 10 THIRD-PARTY PAYOR; AND FOR RELATED PURPOSES.

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

12 **SECTION 1.** (1) Every person, firm, association,
 13 corporation, institution or any governmental unit, including the
 14 State of Mississippi, any county or municipalities operating and
 15 maintaining a hospital in this state, shall have a lien in an
 16 amount equal to all reasonable and necessary charges for hospital
 17 care, treatment and maintenance of ill or injured persons,
 18 including ambulance services, upon any and all causes of action,
 19 suits, claims, counterclaims or demands accruing to the person to
 20 whom such care, treatment or maintenance was furnished, or
 21 accruing to the legal representatives of such person in the case
 22 of such person's death, whether or not such illness or injuries



23 resulted from such causes of action or claims. The attachment of
24 the lien will include, but not be limited to: third-party
25 liability settlements, first-party auto insurance benefits,
26 underinsured motorist coverage, uninsured motorist coverage and
27 wrongful death claims.

28 (2) The lien shall be filed in the office of the clerk of
29 the circuit court of the county in which the hospital is located,
30 the lien to include a verified statement in writing setting forth
31 the name and address of the patient as it appears on the records
32 of the hospital, and the name and address of the operator thereof,
33 the dates of admission and discharge of the patient therefrom, the
34 amount claimed to be due for such hospital care, and to the best
35 of the claimant's knowledge, the names and addresses of persons,
36 firms or corporations claimed by such ill or injured person or by
37 such person's legal representative, to be liable for damages
38 arising from such illness or injuries. The filing of said lien in
39 the aforementioned manner will be implied notice to all parties
40 having an interest to which the lien may attach.

41 (3) A judgment, award, settlement or compromise secured by,
42 or on behalf of, an injured person may not be satisfied without
43 the injured person or his or her authorized representative first
44 giving notice of the judgment, award, settlement or compromise to
45 the health care professional or health care provider that rendered
46 a service in the treatment, care or maintenance of the injured



47 person and no judgment, award, settlement or compromise may be
48 reached without first satisfying the hospital lien.

49 **SECTION 2.** Section 83-9-47, Mississippi Code of 1972, is
50 amended as follows:

51 83-9-47. (1) As used in this section, the following terms
52 shall be defined as follows:

53 (a) "Third-party payor" means any insurer, nonprofit
54 hospital service plan, health care service plan, health
55 maintenance organization, self-insurer or any person or other
56 entity which provides payment for medical and related services.

57 (b) "Health care provider" means a physician,
58 optometrist, chiropractor, dentist, podiatrist, pharmacist,
59 psychologist or hospital licensed by the State of Mississippi.

60 (c) "Patient" means any natural person who has received
61 medical care or services from any medical care provider within the
62 State of Mississippi.

63 (2) Any third-party payor who pays a patient or policyholder
64 on behalf of a patient directly for medical care or services
65 rendered by a health care provider shall provide information
66 concerning the amount, date and nature of any such payment to the
67 provider of services. The information may be provided by
68 telephone, facsimile or by mailing a copy of the "explanation of
69 benefits" to the provider. If the information is provided by
70 sending a copy of the "explanation of benefits" to the provider,



71 then the third-party payor may require that the reasonable cost of
72 producing and mailing the information be paid by the provider.

73 A health care provider shall have a lien, in an amount equal
74 to all reasonable and necessary charges for hospital care,
75 treatment and maintenance of ill or injured persons, on the gross
76 proceeds of the payment made directly to the patient or
77 policyholder by any third-party payor.

78 The requirements of this subsection shall not apply to the
79 following: a fixed-indemnity policy, a limited benefit health
80 insurance policy, medical payment coverage or personal injury
81 protection coverage in a motor vehicle policy, coverage issued as
82 a supplement to liability insurance or workers' compensation.

83 **SECTION 3.** This act shall take effect and be in force from
84 and after July 1, 2024.

