## **Department of Legislative Services**

Maryland General Assembly 2015 Session

#### FISCAL AND POLICY NOTE

House Bill 470 Judiciary (Delegate Dumais)

### **Health Care Malpractice - Certificates and Reports of Qualified Experts**

This bill requires that, in health care malpractice cases, any objection to the sufficiency of a certificate of a qualified expert or report or a supplemental certificate of a qualified expert must be filed within 30 days after the service of the certificate or report. The bill further specifies that, if the arbitration panel chairman or the court rules that a party's certificate or report is legally insufficient, the party must file a legally sufficient certificate and report of an attesting expert within 30 days of the order's entry.

## **Fiscal Summary**

**State Effect:** None. The changes are procedural in nature and are not expected to materially affect governmental finances.

Local Effect: None.

**Small Business Effect:** None.

# **Analysis**

**Bill Summary:** For both a certificate of a qualified expert or report and a supplemental certificate of a qualified expert, if the arbitration panel chairman or court rules that the certificate or report is legally sufficient, no further collateral attacks as to the legal sufficiency of the certificate or report are allowed. However, parties are not precluded from subsequently challenging by motion or at trial (1) the qualifications of the expert; (2) the appropriateness of the expert's testimony on a particular subject; (3) whether a sufficient factual basis exists to support the expert's testimony in accordance with the

Maryland Rules; or (4) the admissibility of the expert's testimony on any other appropriate grounds.

Current Law/Background: Except for a claim seeking damages within the limit of the District Court's concurrent civil jurisdiction (\$30,000 or less), a claim for medical injury against a health care provider is required to be filed with the Director of the Health Care Alternative Dispute Resolution Office (although the parties may elect mutually or unilaterally to waive arbitration of the claim).

Unless the sole issue in a health care malpractice claim is lack of informed consent, a claim before the office or an action filed in a court must be dismissed without prejudice if the claimant or plaintiff fails to file with the director, within 90 days from the date of the complaint, a certificate of a qualified expert attesting (1) to a departure from standards of care and (2) that the departure is the proximate cause of the alleged injury. (This certificate is commonly referred to as a "certificate of merit.") However, an extension of at most 90 days for filing the certificate must be granted if (1) the limitations period applicable to the claim or action has expired and (2) the failure to file the certificate was neither willful nor the result of gross negligence. Each party must file the appropriate certificate with an attached report of the attesting expert.

A health care malpractice claim may be adjudicated in favor of the claimant or plaintiff on the issue of liability if the defendant disputes liability and fails to timely file a certificate of a qualified expert attesting (1) to compliance with standards of care or (2) that the departure from standards of care is not the proximate cause of the alleged injury. (This is commonly referred to as a "certificate of meritorious defense.")

A party is required to file with the court, within 15 days after the discovery deadline, a supplemental certificate of a qualified expert, for each defendant, that attests specifically to various matters. An extension of time for filing a supplemental certificate must be granted for good cause shown. On motion by a defendant, the court may dismiss without prejudice the action as to the defendant if a plaintiff fails to file a supplemental certificate. On motion by a plaintiff, the court may adjudicate in favor of the plaintiff on the issue of liability if a defendant fails to file a supplemental certificate.

A health care provider who attests in a certificate of a qualified expert (or who testifies in relation to a proceeding before an arbitration panel or a court concerning compliance with or departure from standards of care) may not devote annually more than 20% of the expert's professional activities to activities that directly involve testimony in personal injury claims. A party may not serve as a party's expert, and the certificate may not be signed by a party, an employee or partner of a party, or an employee or stockholder of any professional corporation of which the party is a stockholder.

Failure to file a proper certificate of a qualified expert is tantamount to not having filed a certificate at all. *D'Angelo v. St. Agnes Healthcare, Inc.*, 157 Md. App. 631, cert. denied, 384 Md. 158 (2004). A certificate of a qualified expert is a condition precedent to a medical malpractice action and must, at a minimum, identify with specificity the licensed professionals against whom the claims are brought, a statement that the licensed professionals breached the standards of care, and that this breach was the proximate cause of the plaintiff's injury; if the certificate is insufficient, the action must be dismissed. *Carroll v. Konits*, 400 Md. 167 (2007).

Maryland courts have repeatedly interpreted the State's health care malpractice claims statute as the General Assembly's attempt to limit the filing of frivolous malpractice claims. *Carroll v. Konits*, 400 Md. 167 (2007). The certificate of a qualified expert, in particular, is intended to help "weed out" nonmeritorious medical malpractice claims. *D'Angelo v. St. Agnes Healthcare, Inc.*, 157 Md. App. 631, cert. denied, 384 Md. 158 (2004). According to the National Conference of State Legislatures, 28 states have requirements for filing an affidavit or certificate of merit in order for a medical liability and malpractice claim to move forward.

#### **Additional Information**

**Prior Introductions:** None.

**Cross File:** None.

**Information Source(s):** Maryland Health Claims Alternative Dispute Resolution Office, Department of Health and Mental Hygiene, Judiciary (Administrative Office of the Courts), National Conference of State Legislatures, Department of Legislative Services

**Fiscal Note History:** First Reader - March 9, 2015

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