5lr1920 CF 5lr1919

# By: Delegates Barve, Kach, Jones, Donoghue, Arnick, Boschert, Bozman, Burns, Cadden, G. Clagett, V. Clagett, Conway, Costa, DeBoy, Glassman, Hammen, Hixson, Howard, Hubbard, Hurson, James, Kirk, Kullen, Love, Madaleno, Mandel, McDonough, Menes, Morhaim, Petzold, Rudolph, Stern, Trueschler, Weir, and Zirkin

Introduced and read first time: February 11, 2005 Assigned to: Judiciary

#### A BILL ENTITLED

1 AN ACT concerning

2

#### **Courts - Medical Injury Claims - Damages**

3 FOR the purpose of providing that a medical injury award or verdict be reduced to the

4 extent of certain payments, reimbursements, or indemnification for past

5 medical expenses, less certain costs, under certain circumstances; prohibiting

6 certain recovery and certain claims of subrogation relating to certain payments,

7 reimbursements, or indemnification under certain circumstances; requiring that

8 an award or verdict of economic damages for a medical injury exclude certain

9 amounts for past or future loss of earnings; requiring that an award or verdict

10 for past or future loss of earnings shall be limited to a certain percentage;

11 requiring periodic payments of certain damages in excess of a certain amount for

12 certain causes of action; establishing procedures and requirements relating to

periodic payments and annuities for funding periodic payments; exempting
 certain health care providers from civil liability for certain acts or omissions in

15 providing assistance or medical aid to a victim in a medical facility under certain

16 circumstances; creating a Task Force on Administrative Compensation for

Patient Injury Claims; providing for the membership, cochairs, and staffing of

18 the Task Force; prohibiting a member of the Task Force from receiving certain

19 compensation; authorizing a member of the Task Force to be reimbursed for

20 certain expenses; providing for the duties of the Task Force; requiring the Task

21 Force to submit a certain report to the Governor and the General Assembly by a

certain date; providing for the termination of the Task Force; providing for the

22 eventual date, providing for the evinimation of the Fask Force, providing for the 23 application of this Act; and generally relating to the payment of damages in

24 medical injury claims.

25 BY repealing and reenacting, without amendments,

- 26 Article Court and Judicial Proceedings
- 27 Section 3-2A-05(h)
- 28 Annotated Code of Maryland
- 29 (2002 Replacement Volume and 2004 Supplement)
- 30 (As enacted by Chapter 5 of the Acts of the General Assembly of the 2004 Special

D3

# Session)

- 2 BY repealing and reenacting, with amendments,
- 3 Article Courts and Judicial Proceedings
- 4 Section 3-2A-06(f), 3-2A-09, and 3-2A-10
- 5 Annotated Code of Maryland
- 6 (2002 Replacement Volume and 2004 Supplement)
- 7 (As enacted by Chapter 5 of the Acts of the General Assembly of the 2004 Special
- 8 Session)

# 9 BY adding to

- 10 Article Courts and Judicial Proceedings
- 11 Section 3-2A-10
- 12 Annotated Code of Maryland
- 13 (2002 Replacement Volume and 2004 Supplement)
- 14 BY repealing and reenacting, with amendments,
- 15 Article Courts and Judicial Proceedings
- 16 Section 5-603
- 17 Annotated Code of Maryland
- 18 (2002 Replacement Volume and 2004 Supplement)

# 19 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF

20 MARYLAND, That the Laws of Maryland read as follows:

# 21

# **Article - Courts and Judicial Proceedings**

22 3-2A-05.

23 (h) (1) A party may apply to the arbitration panel to modify or correct an 24 award as to liability, damages, or costs in accordance with § 3-222 of this title.

25 (2) (i) The application may include a request that damages be reduced 26 to the extent that the claimant has been or will be paid, reimbursed, or indemnified 27 under statute, insurance, or contract for all or part of the damages assessed.

(ii) The panel chairman shall receive such evidence in support and
opposition to a request for reduction, including evidence of the cost to obtain such
payment, reimbursement, or indemnity.

31 (iii) After hearing the evidence in support and opposition to the 32 request, the panel chairman may modify the award if satisfied that modification is 33 supported by the avidance

33 supported by the evidence.

34 (iv) The award may not be modified as to any sums paid or payable
35 to a claimant under any workers' compensation act, criminal injuries compensation
36 act, employee benefit plan established under a collective bargaining agreement

2

1 between an employer and an employee or a group of employers and a group of

2 employees that is subject to the provisions of the federal Employee Retirement

3 Income Security Act of 1974, program of the Department of Health and Mental

4 Hygiene for which a right of subrogation exists under §§ 15-120 and 15-121.1 of the

5 Health - General Article, or as a benefit under any contract or policy of life insurance

6 or Social Security Act of the United States.

7 (v) An award may not be modified as to any damages assessed for 8 any future expenses, costs, and losses unless:

9 1. The panel chairman orders the defendant or the 10 defendant's insurer to provide adequate security; or

11 2. The insurer is authorized to do business in this State and

12 maintains reserves in compliance with rules of the Insurance Commissioner to assure

13 the payment of all such future damages up to the amount by which the award has

14 been modified as to such future damages in the event of termination.

15 (vi) Except as expressly provided by federal law, no person may 16 recover from the claimant or assert a claim of subrogation against a defendant for any 17 sum included in the modification of an award.

18 3-2A-06.

(f) (1) [Upon] EXCEPT AS PROVIDED IN PARAGRAPHS (4) AND (5) OF THIS
SUBSECTION, ON timely request, the trier of fact shall by special verdict or specific
findings itemize by category and amount any damages assessed for incurred medical
expenses, rehabilitation costs, and loss of earnings. Damages assessed for any future
expenses, costs, and losses shall be itemized separately. If the verdict or findings
include any amount for such expenses, costs, and losses, a party filing a motion for a
new trial may object to the damages as excessive on the ground that the plaintiff has
been or will be paid, reimbursed, or indemnified to the extent and subject to the limits
stated in § 3-2A-05(h) of this subtitle.

28 (2) The court shall hold a hearing and receive evidence on the objection.

(3) (i) If the court finds from the evidence that the damages are
excessive on the grounds stated in § 3-2A-05(h) of this subtitle, subject to the limits
and conditions stated in § 3-2A-05(h) of this subtitle, it may grant a new trial as to
such damages or may deny a new trial if the plaintiff agrees to a remittitur of the
excess and the order required adequate security when warranted by the conditions

34 stated in § 3-2A-05(h) of this subtitle.

(ii) In the event of a new trial granted under this subsection,
evidence considered by the court in granting the remittitur shall be admissible if
offered at the new trial and the jury shall be instructed to consider such evidence in
reaching its verdict as to damages.

39(iii)Upon a determination of those damages at the new trial, no40further objection to damages may be made exclusive of any party's right of appeal.

1 (4) (I) THIS PARAGRAPH APPLIES TO A VERDICT FOR A CAUSE OF 2 ACTION ARISING ON OR AFTER JUNE 1, 2005.

3 (II) ON MOTION BY A PARTY, DAMAGES FOR PAST MEDICAL
4 EXPENSES IN A VERDICT SHALL BE REDUCED ON THE GROUND THAT THE CLAIMANT
5 WILL BE PAID, REIMBURSED, OR INDEMNIFIED TO THE EXTENT AND SUBJECT TO
6 THE LIMITS STATED IN § 3-2A-05(H) OF THIS SUBTITLE.

7 (III) THE COURT SHALL HOLD A HEARING AND RECEIVE EVIDENCE 8 ON THE MOTION.

9 (IV) IF THE COURT FINDS FROM THE EVIDENCE THAT THE
10 DAMAGES FOR PAST MEDICAL EXPENSES HAVE BEEN OR WILL BE PAID,
11 REIMBURSED, OR INDEMNIFIED AS DESCRIBED IN § 3-2A-05(H) OF THIS SUBTITLE,
12 SUBJECT TO THE LIMITATIONS AND CONDITIONS STATED IN § 3-2A-05(H) OF THIS
13 SUBTITLE, THE COURT SHALL MODIFY THE DAMAGES FOR THE PAST MEDICAL
14 EXPENSES IN THE VERDICT.

(5) [Except] NOTWITHSTANDING ANY OTHER PROVISION OF LAW,
EXCEPT as expressly provided by federal law, no person may recover from the plaintiff
or assert a claim of subrogation against a defendant for any sum included:

18 (I) [in] IN a remittitur or awarded in a new trial on damages
19 granted under this subsection; OR

20 (II) IN A CAUSE OF ACTION ARISING ON OR AFTER JUNE 1, 2005, IN A 21 MODIFICATION FOR DAMAGES FOR PAST MEDICAL EXPENSES IN A VERDICT.

22 [(5)] (6) Nothing in this subsection shall be construed to otherwise limit 23 the common law grounds for remittitur.

24 3-2A-09.

(a) [This] EXCEPT AS PROVIDED IN SUBSECTION (D)(2) OF THIS SECTION,
THIS section applies to an award under § 3-2A-05 of this subtitle or a verdict under
§ 3-2A-06 of this subtitle for a cause of action arising on or after January 1, 2005.

(b) (1) (i) Except as provided in paragraph (2)(ii) of this subsection, an
award or verdict under this subtitle for noneconomic damages for a cause of action
arising between January 1, 2005, and December 31, 2008, inclusive, may not exceed
\$650,000.

32 (ii) The limitation on noneconomic damages provided under 33 subparagraph (i) of this paragraph shall increase by \$15,000 on January 1 of each

34 year beginning January 1, 2009. The increased amount shall apply to causes of action

35 arising between January 1 and December 31 of that year, inclusive.

36 (2) (i) Except as provided in subparagraph (ii) of this paragraph, the
37 limitation under paragraph (1) of this subsection shall apply in the aggregate to all

claims for personal injury and wrongful death arising from the same medical injury,
 regardless of the number of claims, claimants, plaintiffs, beneficiaries, or defendants.

3 (ii) If there is a wrongful death action in which there are two or 4 more claimants or beneficiaries, whether or not there is a personal injury action 5 arising from the same medical injury, the total amount awarded for noneconomic 6 damages for all actions may not exceed 125% of the limitation established under paragraph (1) of this subsection, regardless of the number of claims, claimants, 7 8 plaintiffs, beneficiaries, or defendants. 9 In a jury trial, the jury may not be informed of the limitation under (c) (1)10 subsection (b) of this section. 11 (2)If the jury awards an amount for noneconomic damages that exceeds 12 the limitation established under subsection (b) of this section, the court shall reduce 13 the amount to conform to the limitation. 14 (3)In a wrongful death action in which there are two or more claimants 15 or beneficiaries, if the jury awards an amount for noneconomic damages that exceeds 16 the limitation under subsection (b) of this section or a reduction under paragraph (4) of this subsection, the court shall: 17 18 If the amount of noneconomic damages for the primary (i) claimants, as described under § 3-904(d) of this title, equals or exceeds the limitation 19 20 under subsection (b) of this section or a reduction under paragraph (4) of this 21 subsection: 22 1. Reduce each individual award of a primary claimant 23 proportionately to the total award of all primary claimants so that the total award to 24 all claimants or beneficiaries conforms to the limitation or reduction; and 25 Reduce each award, if any, to a secondary claimant as 2. 26 described under § 3-904(e) of this title to zero dollars; or 27 If the amount of noneconomic damages for the primary (ii) 28 claimants does not exceed the limitation under subsection (b) of this section or a 29 reduction under paragraph (4) of this subsection or if there is no award to a primary 30 claimant: 31 1. Enter an award to each primary claimant, if any, as 32 directed by the verdict; and 33 2. Reduce each individual award of a secondary claimant 34 proportionately to the total award of all of the secondary claimants so that the total 35 award to all claimants or beneficiaries conforms to the limitation or reduction. 36 (4)In a case in which there is a personal injury action and a wrongful 37 death action, if the total amount awarded by the jury for noneconomic damages for 38 both actions exceeds the limitation under subsection (b) of this section, the court shall

reduce the award in each action proportionately so that the total award for
 noneconomic damages for both actions conforms to the limitation.

3 (d) (1) A verdict for past medical expenses shall be limited to:

4 (i) The total amount of past medical expenses paid by or on behalf 5 of the plaintiff; and

6 (ii) The total amount of past medical expenses incurred but not 7 paid by or on behalf of the plaintiff for which the plaintiff or another person on behalf 8 of the plaintiff is obligated to pay.

9 (2) (I) THIS PARAGRAPH APPLIES TO AN AWARD UNDER § 3-2A-05 OF 10 THIS SUBTITLE OR A VERDICT UNDER § 3-2A-06 OF THIS SUBTITLE FOR A CAUSE OF 11 ACTION ARISING ON OR AFTER JUNE 1, 2005.

(II) THE VERDICT FOR PAST OR FUTURE LOSS OF EARNINGS SHALL
EXCLUDE ANY AMOUNT FOR FEDERAL, STATE, OR LOCAL INCOME TAXES OR
PAYROLL TAXES, INCLUDING SOCIAL SECURITY AND MEDICARE, THAT THE
PLAINTIFF WOULD HAVE PAID ON THESE EARNINGS, DETERMINED AT THE TAX
RATES IN EFFECT FOR THE PLAINTIFF AT THE TIME THE VERDICT IS ENTERED.

(III) 1. EXCEPT AS OTHERWISE PROVIDED IN THIS
 SUBSUBPARAGRAPH, THERE IS A REBUTTABLE PRESUMPTION THAT THE MEDICARE
 REIMBURSEMENT RATES IN EFFECT ON THE DATE OF THE VERDICT FOR THE
 LOCALITY IN WHICH THE CARE IS TO BE PROVIDED, ADJUSTED FOR INFLATION AS
 PROVIDED IN SUBSUBPARAGRAPH 5 OF THIS SUBPARAGRAPH, ARE FAIR AND
 REASONABLE AMOUNTS FOR FUTURE MEDICAL EXPENSES.

2. IF ON THE DATE OF THE VERDICT, THE MEDICARE
 24 WAIVER UNDER § 1814(B) OF THE FEDERAL SOCIAL SECURITY ACT IS IN EFFECT,
 25 THERE IS A REBUTTABLE PRESUMPTION THAT THE RATES APPROVED BY THE
 26 HEALTH SERVICES COST REVIEW COMMISSION IN EFFECT ON THE DATE OF THE
 27 VERDICT FOR THE HOSPITAL FACILITY IN WHICH SERVICES ARE TO BE PROVIDED,
 28 ADJUSTED FOR INFLATION AS PROVIDED IN THE ANNUAL RATE UPDATES APPROVED
 29 BY THE HEALTH SERVICES COST REVIEW COMMISSION, ARE FAIR AND REASONABLE
 30 AMOUNTS FOR FUTURE MEDICAL EXPENSES FOR HOSPITAL FACILITY SERVICES.

3. THERE IS A REBUTTABLE PRESUMPTION THAT THE
 STATEWIDE AVERAGE PAYMENT RATE FOR THE MEDICAL ASSISTANCE PROGRAM
 DETERMINED BY THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE IN EFFECT
 ON THE DATE OF THE VERDICT, ADJUSTED FOR INFLATION AS PROVIDED IN
 SUBSUBPARAGRAPH 5 OF THIS SUBPARAGRAPH, IS A FAIR AND REASONABLE
 AMOUNT FOR FUTURE MEDICAL EXPENSES FOR NURSING HOME FACILITIES.

A VERDICT FOR FUTURE MEDICAL EXPENSES FOR WHICH
 THERE IS NO MEDICARE REIMBURSEMENT RATE, HOSPITAL FACILITY RATE, OR
 STATEWIDE AVERAGE PAYMENT RATE SHALL BE BASED ON ACTUAL COST ON THE
 DATE OF THE VERDICT, ADJUSTED FOR INFLATION AS PROVIDED IN
 SUBSUBPARAGRAPH 5 OF THIS SUBPARAGRAPH.

5. A. FUTURE MEDICAL EXPENSES SHALL BE ADJUSTED
 FOR INFLATION FOR THE EXPENDITURE CATEGORY OF THE CONSUMER PRICE INDEX
 PUBLISHED BY THE BUREAU OF LABOR STATISTICS TO WHICH THE EXPENSE
 APPLIES.

5 B. THE ADJUSTMENT FOR INFLATION IN THIS 6 SUBSUBPARAGRAPH SHALL BE BASED ON THE AVERAGE RATE OF INFLATION FOR 7 THE 5 YEARS IMMEDIATELY PRECEDING THE AWARD OR VERDICT.

8 [(2)] (3) (i) A court may on its own motion, or on motion of a party, 9 employ a neutral expert witness to testify on the issue of a plaintiff's future medical 10 expenses or future loss of earnings.

11 (ii) Unless otherwise agreed to by the parties, the costs of a neutral 12 expert witness shall be divided equally among the parties.

13(iii)Nothing contained in this subsection limits the authority of a14court concerning a court's witness.

15 3-2A-10.

16 (A) THIS SECTION APPLIES TO AN AWARD UNDER § 3-2A-05 OF THIS SUBTITLE 17 OR A VERDICT UNDER § 3-2A-06 OF THIS SUBTITLE FOR A CAUSE OF ACTION ARISING 18 ON OR AFTER JUNE 1, 2005.

19 (B) SUBJECT TO THE PROVISIONS OF THIS SUBTITLE, A DEFENDANT SHALL
20 PAY AN AWARD OR VERDICT FOR NONECONOMIC DAMAGES AND FUTURE ECONOMIC
21 DAMAGES OF \$250,000 OR LESS AS A LUMP SUM WITH PAYMENTS FOR PAST
22 ECONOMIC DAMAGES.

23 (C) EXCEPT AS PROVIDED IN SUBSECTION (F) OF THIS SECTION, FOR AN
24 AWARD OR VERDICT FOR NONECONOMIC DAMAGES AND FUTURE ECONOMIC
25 DAMAGES OF MORE THAN \$250,000, THE ARBITRATION PANEL OR COURT SHALL:

26 (1) ORDER THE DEFENDANT TO PAY \$100,000 OF THE FUTURE ECONOMIC
27 DAMAGES AND NONECONOMIC DAMAGES AS A LUMP SUM WITH PAST ECONOMIC
28 DAMAGES;

(2) ORDER THE DEFENDANT TO PAY FUTURE ECONOMIC DAMAGES AND
 NONECONOMIC DAMAGES OF MORE THAN \$100,000 PERIODICALLY TO THE CLAIMANT
 OR PLAINTIFF IN THE FORM OF AN ANNUITY; AND

32 (3) ENTER AS THE AMOUNT OF THE AWARD OR VERDICT FOR FUTURE
33 ECONOMIC DAMAGES AND NONECONOMIC DAMAGES OF MORE THAN \$100,000, THE
34 PURCHASE PRICE OF AN ANNUITY PURCHASED BY THE DEFENDANT OR THE
35 DEFENDANT'S INSURER UNDER THIS SUBSECTION.

36 (D) SUBJECT TO SUBSECTION (F) OF THIS SECTION, TO FUND FULLY FUTURE
37 ECONOMIC DAMAGES AND NONECONOMIC DAMAGES IN EXCESS OF \$250,000, THE
38 DEFENDANT OR THE DEFENDANT'S INSURER SHALL PURCHASE AN ANNUITY FOR

THE AMOUNT OF THE FUTURE ECONOMIC DAMAGES AND NONECONOMIC DAMAGES
 LESS THE \$100,000 PAID UNDER SUBSECTION (C)(1) OF THIS SECTION, WHICH
 PRODUCES PERIODIC PAYMENTS FOR:

4 (1) FUTURE MEDICAL EXPENSES AND NONECONOMIC DAMAGES,
5 DIVIDED BY THE LESSER OF THE NUMBER OF YEARS FOR WHICH THE CLAIMANT OR
6 PLAINTIFF WILL NEED MEDICAL TREATMENT OR THE LIFE EXPECTANCY OF THE
7 CLAIMANT OR PLAINTIFF AS DETERMINED UNDER SUBSECTION (E)(2)(I) OF THIS
8 SECTION; AND

9 (2) FUTURE LOSS OF EARNINGS, DIVIDED BY THE LESSER OF THE
10 NUMBER OF YEARS FOR WHICH THE CLAIMANT OR PLAINTIFF WILL SUFFER A LOSS
11 OF EARNINGS OR THE WORKING LIFE OF THE CLAIMANT OR PLAINTIFF AS
12 DETERMINED UNDER SUBSECTION (E)(2)(I) OF THIS SECTION.

13 (E) (1) THE PERIODIC PAYMENTS FOR FUTURE LOSS OF EARNINGS MAY NOT
14 COMMENCE UNTIL THE COMMENCEMENT DATE OF THE WORKING LIFE OF THE
15 CLAIMANT OR PLAINTIFF.

16 (2) (I) FOR PURPOSES OF SUBSECTION (D) OF THIS SECTION AND 17 PARAGRAPH (1) OF THIS SUBSECTION, THE LIFE EXPECTANCY OF THE CLAIMANT OR 18 PLAINTIFF, THE WORKING LIFE OF THE CLAIMANT OR PLAINTIFF, THE 19 COMMENCEMENT DATE OF THE WORKING LIFE OF THE CLAIMANT OR PLAINTIFF, OR 20 THE DURATION OF THE MEDICAL EXPENSES AND LOST WAGES SHALL BE THOSE 21 ASSERTED BY THE CLAIMANT OR PLAINTIFF TO THE ARBITRATION PANEL OR AT 22 TRIAL IN SUPPORT OF THE CLAIM FOR FUTURE ECONOMIC DAMAGES.

(II) NOTWITHSTANDING SUBPARAGRAPH (I) OF THIS PARAGRAPH,
IN AN ACTION SUBJECT TO THIS SUBTITLE, THE DEFENDANT MAY INTRODUCE
EVIDENCE OF THE LIFE EXPECTANCY OF THE CLAIMANT OR PLAINTIFF, THE
WORKING LIFE OF THE CLAIMANT OR PLAINTIFF, AND THE COMMENCEMENT OF THE
WORKING LIFE OF THE CLAIMANT OR PLAINTIFF, OR THE DURATION OF THE
MEDICAL EXPENSES AND LOST WAGES.

29 (F) FOR A SURVIVAL OR WRONGFUL DEATH ACTION:

30(1)NONECONOMIC DAMAGES SHALL BE PAID AT THE SAME TIME AS31PAST ECONOMIC DAMAGES; AND

32 (2) THE PROVISIONS OF THIS SECTION APPLY ONLY TO FUTURE
 33 ECONOMIC DAMAGES EXCEEDING \$250,000.

(G) THE DEFENDANT OR THE DEFENDANT'S INSURER MAY PURCHASE
MULTIPLE ANNUITIES IF, IN THE AGGREGATE, THE ANNUITIES FULLY FUND THE
PORTION OF THE AWARD OR VERDICT FOR FUTURE ECONOMIC DAMAGES AND
NONECONOMIC DAMAGES IN EXCESS OF \$100,000.

38 (H) AN ANNUITY PURCHASED UNDER THIS SECTION SHALL HAVE A39 GUARANTEED TERM EQUAL TO THE LESSER OF:

1(1)THE LIFE EXPECTANCY OF THE CLAIMANT OR PLAINTIFF AS2ASSERTED BY THE CLAIMANT OR PLAINTIFF TO THE ARBITRATION PANEL OR AT3TRIAL IN SUPPORT OF THE CLAIM FOR FUTURE ECONOMIC DAMAGES; OR

4 (2) (I) FOR FUTURE MEDICAL EXPENSES, THE NUMBER OF YEARS FOR 5 WHICH THE CLAIMANT OR PLAINTIFF WILL NEED MEDICAL TREATMENT; AND

6 (II) FOR FUTURE LOSS OF EARNINGS, THE NUMBER OF YEARS FOR 7 WHICH THE CLAIMANT OR PLAINTIFF WILL SUFFER A LOSS OF EARNINGS.

8 (I) THE DEFENDANT'S INSURER SHALL BE OBLIGATED TO PURCHASE AN
9 ANNUITY UNDER THIS SECTION ONLY TO THE EXTENT OF THE COVERAGE THE
10 INSURER IS OBLIGATED TO PROVIDE UNDER THE INSURANCE POLICY ISSUED TO THE
11 DEFENDANT.

12 (J) THE DEFENDANT OR THE DEFENDANT'S INSURER SHALL PURCHASE AN
13 ANNUITY FROM AN INSURER THAT HAS ONE OF THE FOLLOWING RATINGS FROM
14 TWO OF THE FOLLOWING RATING ORGANIZATIONS:

15 (1) A.M. BEST COMPANY: A++ OR A+;

16 (2) FITCH INC.: AAA, AA+, AA, OR AA-;

17(3)MOODY'S INVESTORS SERVICE CLAIMS PAYING RATING: AAA, AA1,18AA2, OR AA3;

19 (4) STANDARD & POOR'S CORPORATION INSURER CLAIMS PAYING 20 RATING: AAA, AA+, AA, OR AA-; OR

(5) IF AGREED TO BY THE CLAIMANT OR PLAINTIFF, A RATING FROM
 ANOTHER NATIONAL RATING ORGANIZATION IF THE RATING AND THE RATING
 ORGANIZATION ARE FOUND TO BE APPROPRIATE BY THE COURT.

24 (K) THE ARBITRATION PANEL OR COURT SHALL APPROVE AN ANNUITY
25 PURCHASED BY THE DEFENDANT OR THE DEFENDANT'S INSURER IF THE ANNUITY:

26 (1) MEETS THE REQUIREMENTS OF THIS SUBSECTION; AND

27 (2) WILL AT ALL TIMES BE FULLY SECURED BY ASSETS:

(I) HELD IN A VALIDLY ESTABLISHED SEPARATE ACCOUNT THAT
 MAY NOT BE CHARGEABLE WITH LIABILITIES ARISING OUT OF ANY OTHER BUSINESS
 THAT THE INSURER MAY CONDUCT; OR

31(II)IN WHICH THE CLAIMANT OR PLAINTIFF HAS A PERFECTED32SECURITY INTEREST.

33 (L) THE PURCHASE OF AN ANNUITY BY THE DEFENDANT OR THE
34 DEFENDANT'S INSURER IN ACCORDANCE WITH THE TERMS OF THIS SECTION SHALL
35 BE DEEMED TO HAVE FULLY SATISFIED THE PORTION OF THE AWARD OR VERDICT

# FOR FUTURE ECONOMIC DAMAGES AND NONECONOMIC DAMAGES IN EXCESS OF \$100,000.

# 3 (M) THE PROVISIONS OF §§ 11-108 AND 11-109 OF THIS ARTICLE DO NOT APPLY 4 TO AN AWARD OR VERDICT FOR DAMAGES UNDER THIS SUBTITLE IN WHICH THE 5 CAUSE OF ACTION ARISES ON OR AFTER JUNE 1, 2005.

6 [3-2A-10.] 3-2A-11.

7 Except as otherwise provided in §§ 3-2A-08A [and 3-2A-09], 3-2A-09, AND 8 3-2A-10 of this subtitle, the provisions of this subtitle shall be deemed procedural in 9 nature and may not be construed to create, enlarge, or diminish any cause of action 10 not heretofore existing, except the defense of failure to comply with the procedures 11 required under this subtitle.

12 5-603.

13 (a) A person described in subsection (b) of this section is not civilly liable for 14 any act or omission in giving any assistance or medical care, if:

15 (1) The act or omission is not one of gross negligence;

16	(2)	The assistance or medical care is provided without fee or other
17	compensation; and	

- 18 (3) The assistance or medical care is provided:
- 19 (i) At the scene of an emergency;
- 20 (ii) In transit to a medical facility; or
- 21 (iii) Through communications with personnel providing emergency 22 assistance.
- 22 assistance
- 23 (b) Subsection (a) of this section applies to the following:
- 24 (1) An individual who is licensed by this State to provide medical care;

25 (2) A member of any State, county, municipal, or volunteer fire

26 department, ambulance and rescue squad or law enforcement agency or of the

- 27 National Ski Patrol System, or a corporate fire department responding to a call
- 28 outside of its corporate premises, if the member:
- 29 (i) Has completed an American Red Cross course in advanced first
  30 aid and has a current card showing that status;
- 31 (ii) Has completed an equivalent of an American Red Cross course
  32 in advanced first aid, as determined by the Secretary of Health and Mental Hygiene;
  33 or

11	UNOI	FFICIAL COPY OF HOUSE BILL 1212				
1 2 services provider;	(iii)	Is certified or licensed by this State as an emergency medical				
3 (3) 4 members have immu		inteer fire department, ambulance and rescue squad whose				
5 (4) 6 paragraph (2) of this		A corporation when its fire department personnel are immune under ubsection.				
	7 (c) An individual who is not covered otherwise by this section is not civilly 8 liable for any act or omission in providing assistance or medical aid to a victim [at]:					
9 (1)	AT the	e scene of an emergency, if:				
10 [(1)] 11 manner;	(I)	The assistance or aid is provided in a reasonably prudent				
12 [(2)] 13 compensation; and	(II)	The assistance or aid is provided without fee or other				
14[(3)]15who is licensed or c16available to take res		The individual relinquishes care of the victim when someone by this State to provide medical care or services becomes ity; OR				
17 (2)	IN A I	MEDICAL FACILITY, IF:				
		THE VICTIM INITIALLY VISITED THE EMERGENCY DICAL FACILITY REQUESTING EXAMINATION OR TREATMENT EDICAL CONDITION;				
21 22 § 3-2A-01 OF THIS	(II) S ARTIC	THE INDIVIDUAL IS A HEALTH CARE PROVIDER AS DEFINED IN LE;				
23	(III)	THE ACT OR OMISSION IS NOT ONE OF GROSS NEGLIGENCE;				
24 25 NOT AFFECTED I	(IV) BY FINA	THE TIMING AND TYPE OF DIAGNOSIS AND TREATMENT ARE NCIAL CONSIDERATIONS; AND				
		THE INDIVIDUAL IS ACTING IN FULL COMPLIANCE WITH THE MEDICAL TREATMENT AND ACTIVE LABOR ACT (EMTALA) AND OPTED UNDER THAT ACT.				
29 SECTION 2. A	ND BE I	T FURTHER ENACTED, That:				
30(a)There31Claims.	is a Task	Force on Administrative Compensation for Patient Injury				
32 (b) The Ta	ask Force	e consists of the following members:				
33 (1) 34 the Senate;	one m	ember of the Senate of Maryland, appointed by the President of				

1 2	the House;	(2)	one mer	nber of the House of Delegates, appointed by the Speaker of		
3		(3)	the Atto	orney General, or the Attorney General's designee;		
4 5	Appeals;	(4)	a circuit	court judge, appointed by the Chief Judge of the Court of		
6 7	the Secretary	(5) y's design		retary of the Department of Health and Mental Hygiene, or		
8 9	designee;	(6)	the Cha	irman of the State Board of Physicians, or the Chairman's		
10		(7)	the State	e Insurance Commissioner, or the Commissioner's designee;		
11 12	the Chairma	(8) an's desig		irman of the State Workers' Compensation Commission, or		
13 14		(9) esident of		owing members appointed by the Governor, in consultation te and the Speaker of the House:		
15 16	Maryland;		(i)	one representative of the Medical and Chirurgical Faculty of		
17 18	Society of M	/laryland;	(ii)	one representative of the Medical Mutual Liability Insurance		
19			(iii)	one representative of the Maryland Hospital Association;		
20			(iv)	one representative of the Maryland State Bar Association;		
21			(v)	one representative of the Maryland Defense Council, Inc.;		
22 23	and		(vi)	one representative of the Maryland Trial Lawyers Association;		
24			(vii)	one representative of the health insurance industry.		
<ul><li>25 (c) The President of the Senate and the Speaker of the House shall designate</li><li>26 the cochairs of the Task Force.</li></ul>						
27 (d) The Department of Health and Mental Hygiene and the State Workers'						

(d) The Department of Health and Mental Hygiene and the State Workers'28 Compensation Commission, in consultation with appropriate state agencies, jointly29 shall provide staff support to the Task Force.

30 (e) A member of the Task Force:

(1)

31

12

may not receive compensation; but

1 (2) is entitled to reimbursement for expenses under the Standard State 2 Travel Regulations, as provided in the State budget.

3 (f) The Task Force shall:

13

4 (1) study the feasibility of developing a statewide administrative
5 compensation system, based on a workers' compensation model, that would
6 compensate medically injured patients administratively instead of through the courts
7 by creating a quasi-governmental entity that would be the sole remedy for injured
8 patients;
9 (2) gather and analyze data on the cost of compensating medical injuries
10 through the existing tort system and compare the cost of an administrative
11 compensation system with that of the existing tort system;

12 (3) investigate the financial, policy, and legal issues critical to the design 13 of an administrative compensation system;

14 (4) study other medical administrative compensation systems such as in 15 Sweden, New Zealand, and the states of Virginia and Florida, and other medical 16 administrative compensation pilot programs as proposed in Utah, Colorado, and

17 Massachusetts; and

18 (5) study the feasibility of developing a pilot program, based on a19 workers' compensation model, that:

20 (i) would be conducted in a selected community-based hospital and

21 a hospital affiliated with an academic institution, with a second community-based

22 hospital and second hospital affiliated with an academic institution serving as the

23 control group;

24 (ii) would be limited to a high-risk medical specialty such as the 25 practice of obstetrics;

26 (iii) would use an administrative tribunal to hear medical injury 27 claims instead of a jury, with the tribunal's decision being the exclusive remedy for

28 the claim, and with the claimant having a limited right of appeal of the tribunal's

29 decision to an administrative law judge; and

30 (iv) would compensate injured patients according to a schedule of 31 damages for specific injuries.

32 (g) The Task Force shall report its findings and recommendations to the 33 Governor and, in accordance with § 2-1246 of the State Government Article, the 34 General Assembly, on or before June 30, 2007.

35 SECTION 3. AND BE IT FURTHER ENACTED, That Section 1 of this Act shall

36 be construed to apply only prospectively and may not be applied or interpreted to 37 have any effect on or application to any cause of action arising before the effective

38 date of this Act.

1 SECTION 4. AND BE IT FURTHER ENACTED, That Section 2 of this Act shall

2 remain effective for a period of 2 years, and, at the end of June 30, 2007, with no3 further action required by the General Assembly, Section 2 of this Act shall be

4 abrogated and of no further force and effect.

5 SECTION 5. AND BE IT FURTHER ENACTED, That this Act shall take effect 6 June 1, 2005.