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## A BILL FOR AN ACT

RELATING TO MEDICAL CLAIM CONCILIATION.

## BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1	SECTION 1. The legislature finds that many claims now
2	filed with medical claim conciliation panels tend to function
3	more as inquiries rather than actual claims, and patients or
4	their families tend to use these proceedings to seek information
5	regarding adverse events that they associate with medical
6	treatment. Most matters filed with medical claim conciliation
7	panels are eventually resolved in favor of the medical provider,
8	but they have unintended consequences for health professionals
9	because the proceedings are treated as claims rather than
10	inquiries for the purposes of reporting incidents to medical
11	malpractice insurers.
12	The legislature further finds that provisions in the Hawaii
13	Revised Statutes relating to medical claims conciliation should
14	be amended to reflect that the actual nature of many filings,
15	particularly by pro se parties, are inquisitive in nature and
16	based on lack of information, rather than based on substantive
17	analysis of the applicable standard of care. The legislature
18	finds that proceedings with medical claim conciliation panels

- 1 should be conducted in a non-adversarial way and structured to
- 2 facilitate conveying information rather than assigning blame.
- 3 The legislature believes that increased transparency and
- 4 education for those who perceive fault on the part of medical
- 5 providers will assist in the amicable resolution of their
- 6 concerns without the need for formal claims. Medical claim
- 7 conciliation panels should endeavor to provide a prompt exchange
- 8 of information and serve a facilitation and conciliation role
- 9 for these inquiries. However, these panel proceedings are
- 10 intended to provide a forum of last resort and are not intended
- 11 as a substitute for informal direct communications between
- 12 patients and providers. Accordingly, statutory provisions
- 13 relating to filing fees and certificates of consultations should
- 14 be retained to assure that the panel process is not taken
- 15 lightly and to encourage patients and providers to attempt
- 16 informal resolution of their concerns.
- 17 The legislature further finds that making medical claim
- 18 conciliation panel proceedings advisory in nature would allow
- 19 the panels' role to become more conciliatory rather than
- 20 adjudicatory. To this end, the current law would be amended to
- 21 reflect this practice by deleting the decision-making function

- 1 of the panels and, instead, emphasizing conciliation and
- 2 mediation to resolve matters that are before them.
- 3 The legislature further finds that there is much that the
- 4 medical claim conciliation panel process may do to narrow and
- 5 define claims when complete resolution cannot be achieved during
- 6 panel proceedings and litigation subsequently must be commenced.
- 7 The legislature does not intend for deletion of the panels'
- 8 decision-making function to eliminate panels' ability to
- 9 consider and discuss liability, causation, or damages with the
- 10 parties; rather, it is intended to focus discussion of those
- 11 issues in the context of conciliation or mediation that better
- 12 reflects the panels' advisory nature. The legislature foresees
- 13 that this conciliatory approach would better assist parties in
- 14 fully understanding the nature of claims, defenses, and damages
- 15 and encourage parties to reach a voluntary settlement. Medical
- 16 claim conciliation panels should continue to express their
- 17 opinions on liability, causation, and damages to the parties to
- 18 assist them in evaluating their positions, however, panels would
- 19 no longer render formal decisions in order to give the panels
- 20 greater flexibility in handling true claims. Panels would
- 21 continue to have the authority to require adversarial
- 22 proceedings when adversarial proceedings would be more helpful

- 1 for the ultimate resolution of claims, but only after
- 2 consultation with or agreement by the parties and only if the
- 3 panel finds that further proceedings would be helpful to the
- 4 resolution of important issues of the claim.
- 5 The legislature also finds that resolution of medical
- 6 claims will be encouraged by allowing parties to agree to engage
- 7 in alternative dispute resolution without the need to first file
- 8 a claim with a medical claim conciliation panel. This will
- 9 allow the parties to use moneys for alternative dispute
- 10 resolution that otherwise would have been spent on filing fees.
- 11 In addition, filing fees for those inquiries initially filed
- 12 with the panel would be refunded, less a nominal administrative
- 13 fee, if all parties agree to alternative dispute resolution
- 14 instead of the medical claim conciliation panel process.
- The legislature also finds that medical malpractice
- 16 insurers should be prohibited from increasing premiums based on
- 17 medical claim conciliation panel filings since these filings
- 18 would be properly recognized as inquiries rather than true
- 19 claims, and panel records would be expunded if and when there is
- 20 an insufficient basis to support findings of medical torts
- 21 against providers.

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         The purpose of this Act is to amend laws relating to
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    medical claim conciliation to more closely reflect actual
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    practice and the original intent that the panels serve in a
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    conciliatory role.
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         SECTION 2. Section 453-5, Hawaii Revised Statutes, is
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    amended by amending subsection (b) to read as follows:
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               The department shall employ, not subject to chapter
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    76, an executive secretary to administer the board's activities
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    and an employee to administer the medical [claim] inquiry and
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    conciliation panels established under chapter 671. The employee
    responsible for administration of the medical [claim] inquiry
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    and conciliation panels shall have no duties in administration
    of the board's activities."
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         SECTION 3. Section 453-7.5, Hawaii Revised Statutes, is
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    amended by amending subsection (a) to read as follows:
               The department of commerce and consumer affairs shall
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    review each complaint, inquiry, and information, as applicable,
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    received under sections 92-17, 329-44, 453-8.7, 663-1.7, and
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    671-5[, and 671-15]. The department shall investigate the
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    complaint, inquiry, or information if it appears that the
    physician or osteopathic physician who is the subject of the
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    complaint, inquiry, or information has violated this chapter.
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- 1 If the department determines that the physician or osteopathic
- 2 physician has violated this chapter, the department shall
- 3 present the results of its investigation to the Hawaii medical
- 4 board for appropriate disciplinary proceedings."
- 5 SECTION 4. Part II of Hawaii Revised Statutes, is amended
- 6 to read as follows:
- 7 "PART II. MEDICAL [CLAIM] INQUIRY AND CONCILIATION
- 8 §671-11 Medical [claim] inquiry and conciliation panels;
- 9 composition, selection, compensation. (a) There are
- 10 established medical [claim] inquiry and conciliation panels
- 11 which shall [review and render findings and advisory opinions on
- 12 the issues of liability and damages in medical tort claims
- 13 against health care providers.] facilitate the resolution of
- 14 inquiries regarding the rendering of professional services by
- 15 health care providers that involve injury, death, or other
- 16 damages to a patient.
- 17 (b) A medical [claim] inquiry and conciliation panel shall
- 18 be formed for each [claim] inquiry filed pursuant to section
- 19 671-12 and [after each panel renders its decision or the claim
- 20 is otherwise disposed of it shall be disbanded[-] after an
- 21 inquiry is resolved, a notice of termination is filed, or a suit
- 22 based on the circumstances of the injury is filed in a court of



- 1 competent jurisdiction. Each medical [claim] inquiry and conciliation panel shall consist of one chairperson [selected 2 from among persons who are familiar with and experienced in the 3 personal injury claims settlement process, one] who shall be an 4 5 attorney licensed to practice in the courts of the State and 6 experienced in trial practice [ ] and the personal injury claims 7 settlement process and one physician, osteopathic physician, or 8 surgeon licensed to practice under chapter 453. The chairperson 9 shall be appointed by the director of [the department of] 10 commerce and consumer affairs from a list of eligible persons 11 approved by the chief justice of the supreme court of Hawaii. 12 [The attorney shall be appointed by the chairperson from a list 13 of not less than thirty five attorneys experienced in trial 14 practice submitted annually by the supreme court.] physician, osteopathic physician, or surgeon shall be appointed 15 16 by the chairperson and shall be [currently] licensed and in good standing under chapter 453. 17 The chairperson shall preside at the meetings of the 18
- panel. The chairperson, all panel members, and any consultant called by the panel to appear before the panel shall be compensated at the rate of [\$300] \$450 per [claim] inquiry which will become payable [when the decision of the panel is

will become payable (when the accipton of the paner



- 1 submitted.] at the conclusion of panel proceedings. At the discretion of the director, the chairperson, panel members, and 2 3 any consultant called by the panel to appear before the panel, may be compensated at one-half the amount of compensation 4 5 specified in this section, if the [claim] inquiry is disposed of 6 by any means prior to [the hearing by] a meeting of the panel [-] and the parties or their legal representatives. 7 8 chairperson, all panel members, and any consultant called by the panel to appear before the panel also shall be paid allowances 9 10 for travel and living expenses which may be incurred as a result of the performance of their duties on or for the panel. 11 12 costs shall be paid by the department of commerce and consumer affairs from the filing fees paid by the parties. 13 The [claimant] party initiating an inquiry shall pay a 14 (d) filing fee of \$450 to the department upon the filing of the 15 [claim] inquiry, and the failure to do so shall result in the 16 17 [claim] inquiry being rejected for filing. Each health care provider and other parties to the [claim] inquiry shall pay a 18 filing fee of \$450 to the department within twenty days of being 19 20 served with the [claim.] inquiry. Each party to [a claim] an inquiry shall be assessed a non-refundable processing fee by the 21 22 department in the amount of \$50. The non-refundable processing
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- 1 fee shall be retained from each party's filing fee, and shall be
- 2 used to defray the administrative costs of the medical [claims]
- 3 inquiry and conciliation panel program.
- 4 (e) After the panel has [made a final decision on a
- 5 claim, filed a notice of termination, or after a final
- 6 disposition of the [claim] inquiry has been made without [a
- 7 hearing proceedings before the panel, the department shall
- 8 return any moneys remaining after all panel costs have been
- 9 paid, to the respective parties on a pro rata basis.
- 10 (f) The office and meeting space, secretarial and clerical
- 11 assistance, office equipment, and office supplies for the panel
- 12 shall be furnished by the department. The chairperson may
- 13 designate any alternative meeting place or site for the
- 14 [hearing.] proceedings.
- 15 (q) The Hawaii medical board shall prepare a list of
- 16 physicians, osteopathic physicians, surgeons, and podiatrists,
- 17 as the case may be, along with their respective specialties.
- 18 These physicians, osteopathic physicians, [and] surgeons, and
- 19 podiatrists shall be eligible to serve as consultants to the
- 20 medical inquiry and conciliation panel in their respective
- 21 fields. Panel members may consult with other legal, medical,
- 22 and insurance specialists.

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- 1 [+] \$671-11.5[+] Waiver of filing fee. (a) If any party 2 to [a claim] an inquiry cannot pay the required filing fee, the party may file with the director a motion to waive the filing 3 The motion to waive the filing fee shall be accompanied by 4 5 an affidavit in a format prescribed by the department, showing 6 in detail: The party's inability to pay the filing fee; 7 (1) The party's belief that the party is entitled to 8 (2) redress: and 9 A statement of the issues that the party intends to 10 (3) present at [the hearing] proceedings before a medical 11 12 [claims] inquiry and conciliation panel. The director shall decide on the motion to waive the 13 filing fee as expeditiously as possible, and no oral arguments 14 shall be permitted. 15 16 If the director grants the motion to waive the filing
- fee, the party may proceed without further application to the
  director or panel, and without payment of the filing fee. If
  the motion is denied, the director shall state the reasons for
  the denial in writing. The director shall promptly provide the
  party with a filed copy of the director's order granting or
  denying the motion.
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- 1 (d) If a motion to waive the filing fee is denied by the
- 2 director, the party may seek judicial review under section 91-
- 3 14.
- 4 (e) If the director denies a party's motion to waive the
- 5 filing fee, the party shall pay the filing fee within thirty
- 6 days after the denial of the motion, unless the party has filed
- 7 an appeal under section 91-14. If the party has filed an appeal
- 8 under section 91-14, the party may proceed without payment of
- 9 the filing fee, until [such time as] the time that a final
- 10 judicial determination is rendered.
- 11 (f) If the party files an appeal under section 91-14, and
- 12 the court upholds the director's denial of the aggrieved party's
- 13 motion to waive the filing fee, the party shall pay the filing
- 14 fee within thirty days after the court's affirmation of the
- 15 denial. If the court determines that the party's motion for
- 16 waiver of the filing fee was improperly denied, the party shall
- 17 be entitled to proceed without payment of the filing fee.
- 18 §671-12 Review by panel required; notice; presentation of
- 19 [claims;] inquiry; request for a more definite statement of the
- 20 [claim.] inquiry. (a) Effective July 1, 1976, any person or
- 21 the person's representative [claiming that a medical tort has
- 22 been committed] having concerns regarding the existence or



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- nonexistence of a medical tort shall submit [a statement of the claim] an inquiry to the medical [claim] inquiry and conciliation panel before a suit based on the [claim] circumstances of the inquiry may be commenced in any court of this State. [Claims] Inquiries shall be submitted to the medical [claim] inquiry and conciliation panel in writing[. The
- the [claim] inquiry is based and [shall include] the names of all parties against whom the [claim] inquiry is or may be made

claimant shall set forth] and shall include the facts upon which

- 10 who are then known to the [elaimant.] person or the person's
  11 representative.
  - (b) Within five business days thereafter the panel shall give notice of the [elaim] inquiry and the statement of the [elaim,] inquiry, by certified mail, to all health care providers and others who are or may be parties to the [elaim] inquiry and shall furnish copies of written [elaims] inquiries to [such] those persons. [Such] The notice shall set forth a date, not more than twenty days after mailing the notice, within which any health care provider against whom [a claim] an inquiry is made shall file a written response [to the claim,] and a date and time, not less than five days following the last date for
- 22 filing a response, for [a hearing of] an inquiry by the panel[-





1 Such] and the parties. The notice shall describe the nature and 2 purpose of the panel's proceedings and shall designate the place 3 of the meeting. The times originally set forth in the notice may be enlarged by the chairperson, on due notice to all 4 5 parties, for good cause. If the statement of the [claim] inquiry in the notice 6 is so vague or ambiguous that any party receiving notice of the 7 8 [claim] inquiry cannot reasonably be required to frame a written response, the party may submit a written request to the director 9 10 of commerce and consumer affairs for a more definite statement before filing the written response. Copies of the request shall 11 12 be provided to the panel[, the claimant,] and [other] all affected parties. The request, which shall be ex parte and stay 13 14 the proceedings of the panel until notice of the director's decision is given to the panel and all parties, shall specify 15 16 the defects complained of and the details desired. The director may deny, grant, or modify the request at the director's own 17 discretion, without the necessity of a hearing, although the **18** 19 director may reach a decision after consulting with the panel or 20 [the claimant.] any party or parties. The director shall

provide notice of the decision to the panel [, the claimant,] and

[other] all affected parties. If the request is granted and

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1	(the claimant) any party so directed falls to provide a more
2	definite statement of the [claim] inquiry within five days after
3	notice of the decision, the panel may make [such] an order as it
4	deems just. This subsection shall not be used as a tactic to
5	delay the proceedings.
6	[+]§671-12.5[+] Certificate of consultation. (a) Any
7	[claim] inquiry filed with the medical [claim] inquiry and
8	conciliation panel under this chapter shall be accompanied by a
9	certificate [which] that declares one of the following:
10	(1) That the [ <del>claimant or the claimant's</del> ] party initiating
11	the inquiry or the party's attorney has consulted with
12	at least one physician who is licensed to practice in
13	this State or any other state, and who is
14	knowledgeable or experienced in the same medical
15	specialty as the health care professional against whom
16	the $[elaim]$ inquiry is made, and that the $[elaimant or$
17	claimant's] party or the party's attorney has
18	concluded on the basis of [such] the consultation that
19	there is a reasonable and meritorious cause for filing
20	the [claim.] inquiry. If the [claimant or the
21	elaimant's] party initiating the inquiry or the
22	party's attorney is not able to consult with a

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physician in the same medical specialty as the health
care professional against whom the [claim] inquiry is
made, [the claimant or claimant's] that party or the
party's attorney may consult with a physician who is
licensed in this State or in any other state who is
knowledgeable and experienced in a medical specialty
that is as closely related as practicable to the
medical specialty of the health care professional
against whom the [claim] inquiry is made. The
physician or physicians consulted [by the claimant or
the claimant's attorney] may not be a party to the
[case,] inquiry, nor be compelled to testify or
otherwise participate in [the hearing before]
proceedings related to the medical [claim] inquiry and
conciliation panel;
That the [claimant or the claimant's] party initiating
the inquiry or the party's attorney was unable to
obtain the consultation required by paragraph (1)
because a statute of limitations would impair the
action and that the certificate required by paragraph

(1) could not be obtained before the impairment of the

If a certificate is executed pursuant to this

action.

1		paragraph, the certificate required by paragraph (1)
2		shall be filed by the [claimant or the claimant's]
3		party initiating the inquiry or the party's attorney
4		within ninety days after filing the [claim;] inquiry;
5		or
6	(3)	That the [elaimant or the claimant's] party initiating
7		the inquiry or the party's attorney was unable to
8		obtain the consultation required by paragraph (1)
9		after the [claimant or the claimant's] party or the
10		party's attorney had made a good faith attempt to
11		obtain [such] the consultation and the physician
12	ı	contacted would not agree to [such a] the
13		consultation. For purposes of this paragraph, "good
14		faith attempt" refers to the responsibility of a
15		[claimant or claimant's] party initiating an inquiry
16		or the party's attorney to make reasonable efforts to
17		contact a physician for the purpose of reviewing the
18		circumstances upon which [a claim] an inquiry is
19		based. The [claimant or claimant's] party initiating
20		the inquiry or the party's attorney may contact
21		physicians by letter, telephone, facsimile, or other
22		electronic means of communication. If the physician

does not respond within a reasonable time, the
[claimant or claimant's] party initiating the inquiry
or the party's attorney may submit [its claim] the
inquiry to the medical [claim] inquiry and
conciliation panel along with a certificate declaring
[such] the nonresponse to [claimant's] the party or
the party's attorney's good faith attempt. A "good
faith attempt" shall ultimately be evaluated in light
of the goal of having a qualified physician assist the
[claimant or claimant's] party initiating the inquiry
or the party's attorney in understanding the basis of
the [claim,] inquiry and [such] the determination
shall depend upon the circumstances of each individual
case.

(b) Where a [claimant or the claimant's] party initiating an inquiry or the party's attorney intends to rely solely on a failure to inform of the consequences of a procedure (informed consent), this section shall be inapplicable. The [claimant or the claimant's] party initiating an inquiry or the party's attorney shall certify upon filing of the [claim] inquiry that [the claimant or the claimant's attorney is] the party or the party's attorney is relying solely on the failure to inform of

- 1 the consequences of a procedure and for that reason is not
- 2 filing a certificate as required by this section.
- 3 (c) For the purposes of this section, the [claimant or the
- 4 claimant's] party initiating an inquiry or the party's attorney
- 5 shall not be required to disclose the names of any physician
- 6 consulted to fulfill the requirements of subsection (a) to any
- 7 of the other parties to the [claim.] inquiry. The medical
- 8 [claim] inquiry and conciliation panel may require the [claimant
- 9 or the claimant's] party initiating an inquiry or the party's
- 10 attorney to disclose the name of any physician consulted to
- 11 fulfill the requirements of subsection (a). No disclosure of
- 12 the name of any physician consulted to fulfill the requirements
- 13 of subsection (a) shall be made to any of the other parties to
- 14 the [claim;] inquiry; provided that the medical [claim] inquiry
- 15 and conciliation panel may contact [any such] the physician to
- 16 determine if the requirements of subsection (a) were met.
- 17 (d) Unless a certificate is filed pursuant to subsection
- 18 (a) or (b), the [claim] inquiry shall not be received for filing
- 19 by the medical [claim] inquiry and conciliation panel.
- 20 §671-13 Medical [claim] inquiry and conciliation panel
- 21 [hearing; fact-finding; evidence;] proceedings; voluntary
- 22 settlement. Every [claim of] inquiry regarding a medical tort



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    shall be [heard] processed by the medical [claim] inquiry and
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    conciliation panel within thirty days after the last date for
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    filing a response. No persons other than the panel, witnesses,
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    and consultants called by the panel, and the persons listed in
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    section 671-14 shall be present except with the permission of
    the chairperson. The panel may, in its discretion, conduct an
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    inquiry of a party, witness, or consultant without the presence
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    of any or all parties.
         The [hearing] proceedings shall be informal. Chapters 91
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    and 92 shall not apply. The panel may require a stenographic
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    record of all or part of its proceedings for the use of the
    panel, but [such] the record shall not be made available to the
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    parties. The panel may receive any oral or documentary
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               [Questioning of parties, witnesses, and consultants
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    evidence.
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    may be conducted by the panel, and the panel may, in its
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    discretion, permit any party, or any counsel for a party to
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    guestion other parties, witnesses, or consultants. The panel
    may designate who, among the parties, shall have the burden of
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    going forward with the evidence with respect to such issues as
    it may consider, and unless otherwise designated by the panel,
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    when medical and hospital records have been provided to the
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    claimant for the claimant's proper review, such burden shall
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- 1 initially rest with the claimant at the commencement of the
- 2 hearing.] The panel shall conduct proceedings in a manner
- 3 appropriate to the circumstances of the inquiry and to
- 4 facilitate resolution of the matter. The panel shall conduct
- 5 proceedings in a non-adversarial manner consistent with the
- 6 primary purpose of conciliation.
- 7 The panel shall have the power to require by subpoena the
- 8 appearance and testimony of witnesses and the production of
- 9 documentary evidence. When [such] the subpoena power is
- 10 utilized, notice shall be given to all parties. The testimony
- 11 of witnesses may be taken either orally before the panel or by
- 12 deposition. In cases of refusal to obey a subpoena issued by
- 13 the panel, the panel may invoke the aid of any circuit court in
- 14 the State, which may issue an order requiring compliance with
- 15 the subpoena. Failure to obey [such] an order may be punished
- 16 by the court as a contempt thereof. Any member of the panel,
- 17 the director of [the department,] commerce and consumer affairs,
- 18 or any person designated by the director [of the department] may
- 19 sign subpoenas. Any member of the panel may administer oaths
- 20 and affirmations, examine witnesses, and receive evidence.
- 21 Notwithstanding [such] these powers, the panel shall attempt to

1 secure the voluntary appearance, testimony, and cooperation of 2 parties, witnesses, and consultants without coercion. 3 At [the hearing of the] panel proceedings and [in arriving 4 at its opinion] to assist in its conciliation role, the panel 5 [shall] may consider, but not be limited to, statements or 6 testimony of witnesses, hospital and medical records, nurses' 7 notes, x-rays, and other records kept in the usual course of the 8 practice of the health care provider without the necessity for 9 other identification or authentication, statement of fact, or 10 opinion on a subject contained in a published treatise, periodical, book, or pamphlet, or statements of experts without 11 12 the necessity of the experts appearing at the [hearing.] 13 proceeding. The panel may upon the application of any party or 14 upon its own decision appoint as a consultant, an impartial and 15 qualified physician, surgeon, physician and surgeon, or other 16 professional person or expert to testify before the panel or to 17 conduct any necessary professional or expert examination of the 18 [claimant] party initiating the inquiry or relevant evidentiary 19 matter and to report to or testify as a witness thereto. 20 a] The consultant shall not be compensated or reimbursed except 21 for travel and living expenses to be paid as provided in section 22 Except for the production of hospital and medical

records, nurses' notes, x-rays, and other records kept in the 1 usual course of the practice of the health care provider, 2 3 discovery by the parties shall not be allowed. 4 During the [hearing and at any time prior to the rendition 5 of an advisory decision pursuant to section 671-15,] proceedings or at any time before termination, the panel may encourage the 6 parties to settle or otherwise dispose of the [case] inquiry 7 8 voluntarily. §671-14 Same; persons attending [hearings] proceedings of 9 10 Unless excluded or excused by the panel, the following persons shall attend [hearings] proceedings before the panel: 11 12 The party or parties [making the claim;] submitting (1) 13 the inquiry; 14 (2) The health care provider or providers against whom the [claim is made] inquiry is submitted or 15 16 representatives thereof, other than counsel, 17 authorized to act for [such] the health care provider 18 or providers; and 19 Counsel for the parties, if any. §671-15 [Same, decisions.] Panel termination. [(a) 20 21 Within thirty days after the completion of a hearing, the

medical claim conciliation panel shall file a written advisory

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    decision with the insurance commissioner who shall thereupon
    mail copies to all parties concerned, their counsel, and the
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    representative of each health care provider's liability
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    insurance carrier authorized to act for such carrier, as
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    appropriate. The insurance commissioner also shall mail copies
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    of the advisory decision to the department of commerce and
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    consumer affairs, if the claim is against a physician,
    osteopathic physician, or surgeon licensed under chapter 453 or
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    a podiatrist licensed under chapter 463E. The panel shall
    decide the issue of liability and shall state its conclusions in
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    substantially the following language: "We find the health care
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    provider was actionably negligent in his or her care and
    treatment of the patient and we, therefore, find for the
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    claimant"; or "We find the health care provider was not
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    actionably negligent in his or her care and treatment of the
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    patient and we, therefore, find for the health care provider".
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         (b) After a finding of liability, the medical claim
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    conciliation panel shall decide the amount of damages, if any,
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    which should be awarded in the case. The decision as to damages
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    shall include in simple, concise terms a division as to which
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    portion of the damages recommended are attributable to economic
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losses and which to noneconomic losses; provided the panel may
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    not recommend punitive damages.
         (c) The decisions shall be signed by all members of the
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    medical claim conciliation panel; provided that any member of
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    the panel may file a written concurring or dissenting opinion.
         (d) The advisory decision required by this section need
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    not be filed if the claim is settled or otherwise disposed of
    before the decision is written or filed.] The director of
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    commerce and consumer affairs or the panel shall notify all
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    affected parties upon termination of panel proceedings. At the
    discretion of the director or the panel, a notice of termination
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    may state whether any party or parties to the matter failed to
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    meet the requirements of this part or meaningfully participate
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    in panel proceedings.
         [+] §671-15.5[+] Expungement of records; malpractice
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    insurance rates. (a) [Upon a decision by the medical claim
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    conciliation panel finding for the health care provider pursuant
17
    to section 671-15(a), the] A health care provider may apply to
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    the panel for expungement of all records of the related
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    proceedings. The panel shall expunge all records if [a majority
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    of] the panel [finds that the complaint is fraudulent or
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    frivolous.] agrees that the inquiry did not provide a sufficient
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- 1 basis to support the finding of a medical tort against the
- 2 health care provider applying for expungement.
- 3 (b) No insurer providing professional liability insurance
- 4 for a health care provider shall increase any premium rate for
- 5 the health care provider on the basis of the filing of [a
- 6 medical tort claim against] an inquiry involving the health care
- 7 provider [that is determined by] with the medical [claim]
- 8 inquiry and conciliation panel [to be fraudulent or frivolous.]
- 9 unless an indemnity payment is made to the party initiating the
- 10 inquiry or the party initiating the inquiry institutes
- 11 litigation in a court of competent jurisdiction based on the
- 12 circumstances of the inquiry.
- 13 §671-16 Subsequent litigation; excluded evidence. The
- 14 [claimant] party initiating the inquiry may institute litigation
- 15 based upon the [claim] circumstances of the inquiry in an
- 16 appropriate court only after [a party to a] the medical [claim]
- 17 inquiry and conciliation panel [hearing rejects the decision of
- 18 the panel, proceedings were terminated pursuant to section 671-
- 19 15; a party has participated in alternative dispute resolution
- 20 pursuant to section 671-16.6; or [after] the twelve-month period
- 21 under section 671-18 has expired.

```
1
         No statement made in the course of the [hearing]
2
    proceedings of the medical [claim] inquiry and conciliation
3
    panel shall be admissible in evidence either as an admission, to
4
    impeach the credibility of a witness, or for any other purpose
5
    in any trial of the action; provided that [such] the statements
6
    may be admissible for the purpose of section 671-19[, hereof].
7
    No decision, conclusion, finding, statement, or recommendation
    of the medical [claim] inquiry and conciliation panel on the
8
9
    issue of liability or on the issue of damages shall be admitted
10
    into evidence in any subsequent trial, nor shall any party to
    the medical [claim] inquiry and conciliation panel [hearing,]
11
12
    proceeding, or the counsel or other representative of [such] a
13
    party, refer or comment thereon in an opening statement, an
14
    argument, or at any other time, to the court or jury; provided
15
    that [such] the decision, conclusion, finding, or recommendation
    may be admissible for the purpose of section 671-19[, hereof].
16
17
         [f] $671-16.5[f] Arbitration; subsequent litigation. Any
18
    person or the person's representative claiming that a medical
19
    tort has been committed or any health care provider against whom
20
    [a claim] an inquiry has been made may elect to bypass the court
21
    annexed arbitration program under section 601-20 after the
22
    [claim] inquiry has been submitted to the medical [claim]
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- inquiry and conciliation panel and the panel has [rendered a

  decision or] been terminated pursuant to section 671-15 if the

  party meaningfully participated in panel proceedings, an
- 4 alternative dispute resolution process has been terminated
- 5 pursuant to section 671-16.6, or the panel or alternative
- 6 dispute resolution process has not [reached a decision]
- 7 completed proceedings within the tolling period of the statute
- 8 of limitations under section 671-18.
- 9 [\{\}\\$671-16.6[\{\}\] Submission of [\(\frac{claim}{aim}\)] inquiry to an
- 10 alternative dispute resolution provider. (a) Any [claim]
- 11 inquiry initially filed with the medical [claim] inquiry and
- 12 conciliation panel may be subsequently submitted to an
- 13 alternative dispute resolution provider upon the written
- 14 agreement of all of the parties [to the claim] and with the
- 15 written approval of the director [-] of commerce and consumer
- 16 affairs. The director shall approve the alternative dispute
- 17 resolution provider and the alternative dispute resolution
- 18 procedures. All filing fees, less a processing fee of \$50,
- 19 shall be refunded to the appropriate parties if the panel was
- 20 not constituted or had not taken any action related to the
- 21 inquiry prior to the submission of the inquiry to an alternative
- 22 dispute resolution provider. If the panel was constituted or



- 1 took any action prior to the submission of the inquiry to an
- 2 alternative dispute resolution provider, the remaining balance
- 3 of any filing fees shall be refunded to the appropriate parties,
- 4 less a processing fee of \$50 and a pro-rata amount to be
- 5 determined by the director.
- 6 (b) The parties shall comply with the procedures
- 7 established by the alternative dispute resolution provider and
- 8 approved by the director. If a party does not comply with those
- 9 procedures, any other party may file a motion with the director
- 10 to have the [claim] inquiry resubmitted to the medical [claim]
- 11 inquiry and conciliation panel. The director may collect any
- 12 filing fees that were refunded pursuant to subsection (a) from a
- 13 party that resubmits its inquiry.
- 14 (c) Notwithstanding section 671-12, any inquiry may be
- 15 submitted directly to an alternative dispute resolution process
- 16 upon the written agreement of all parties without first
- 17 submitting the inquiry to a medical inquiry and conciliation
- 18 panel. A written agreement shall be effective as of the date of
- 19 its execution by the parties. Any inquiry submitted directly to
- 20 alternative dispute resolution need not be subsequently
- 21 submitted to a medical inquiry and conciliation panel and shall

1	not be su	bject to filing fees assessed by the director for the
2	medical i	nquiry and conciliation panel.
3	[ <del>(c)</del>	d) Within thirty days after the completion of the
4	alternati <sup>.</sup>	ve dispute resolution process, the alternative dispute
5	resolutio	n provider shall notify all parties concerned, their
6	counsel,	and the representative of each health care provider's
7	liability	insurance carrier authorized to act for the carrier,
8	as approp	riate, that the alternative dispute resolution process
9	has been	completed.
10	[ <del>-(d)-</del>	] (e) The [claimant] party submitting the inquiry may
11	institute	litigation based upon the [claim] inquiry in an
12	appropria	te court only if:
13	(1)	The parties were not able to resolve the entire
14		[claim] matter through the alternative dispute
15		resolution process and the matter has not been
16		resubmitted to the medical [claim] inquiry and
17		conciliation panel pursuant to subsection (b) [of this
18		section]; or
19	(2)	The [claim] matter has not been resolved through the
20		alternative dispute resolution process after twelve

months from the date the [claim] matter was filed with

1	the approved or agreed upon alternative dispute
2	resolution provider.
3	$[\frac{(e)}{(f)}]$ No statement made in the course of the approved
4	or agreed upon alternative dispute resolution process shall be
5	admissible in evidence as an admission, to impeach the
6	credibility of a witness, or for any other purpose in any trial
7	of the action. No decision, conclusion, finding, or
8	recommendation of the approved or agreed upon alternative
9	dispute resolution provider on the issue of liability or on the
10	issue of damages shall be admitted into evidence in any
11	subsequent trial, nor shall any party to the approved or agreed
12	upon alternative dispute resolution hearing, their counsel, or
13	other representative of [such] the party, refer or comment
14	thereon in an opening statement, in an argument, or at any time,
15	to the court or jury.
16	[+]\$671-17 $[+]$ Immunity of panel members from liability.
17	No member of a medical [elaim] inquiry and conciliation panel
18	shall be liable in damages for libel, slander, or other
19	defamation of character of any party to $\underline{a}$ medical [claim]
20	inquiry and conciliation panel proceeding for any action taken
21	or any decision, conclusion, finding, or recommendation made by
22	the member while acting within the member's capacity as a member

- 1 of a medical [claim] inquiry and conciliation panel under this 2 [Act.] part. 3 §671-18 Statute of limitations tolled. The filing of the [claim] inquiry with the medical [claim] inquiry and 4 5 conciliation panel or with an approved or agreed upon alternative dispute resolution provider shall toll any 6 7 applicable statute of limitations, and [any such] the statute of limitations shall remain tolled until sixty days after the [date 8 the decision] termination of the panel or the notification of 9 10 completion from the approved or agreed upon alternative dispute resolution provider is mailed or delivered to the parties. 11 12 [a decision by the medical claim conciliation panel is not reached] panel proceedings are not completed within twelve 13 14 months, or the alternative dispute resolution process is not 15 completed within twelve months, the statute of limitations shall 16 resume running and the party filing the [claim] inquiry may commence a suit based on the [claim] circumstances related to 17 18 the inquiry in any appropriate court of this State. The panel 19 or the approved or agreed upon alternative dispute resolution
- 21 §671-19 Duty to cooperate; assessment of costs and fees.

provider shall notify all parties in writing of this provision.

22 It shall be the duty of every person who files [a claim] an



- 1 inquiry with the medical [claim] inquiry and conciliation panel,
- 2 every health care provider against whom the [claim] inquiry is
- 3 made, and every insurance carrier or other person providing
- 4 medical tort liability insurance for the health care provider,
- 5 to cooperate with the medical [claim] inquiry and conciliation
- 6 panel and meaningfully participate in panel proceedings for the
- 7 purpose of achieving a prompt, fair, and just resolution,
- 8 disposition, or settlement of the [claim,] inquiry, provided
- 9 that cooperation and participation shall not prejudice the
- 10 substantive rights of those persons.
- 11 Any party may apply to the panel to have the costs of the
- 12 action assessed against any party for failure to cooperate with
- 13 the panel [-] or meaningfully participate in panel proceedings.
- 14 The panel may award costs, or a portion thereof, including
- 15 attorney's fees, witness fees, including those of expert
- 16 witnesses, filing fees, and costs of the medical [claim] inquiry
- 17 and conciliation panel [hearing] proceedings to the party
- 18 applying therefor.
- 19 In determining whether any person has failed to cooperate
- 20 or meaningfully participate in good faith, the panel shall
- 21 consider, but is not limited to, the following:

1	(1)	The attendance of the persons at [the hearing]
2		proceedings of the medical [elaim] inquiry and
3		conciliation panel;
4	(2)	The extent to which representatives of parties and
5		counsel representing parties came to panel [hearings]
6		proceedings with knowledge of the claims and defenses
7		and authority to negotiate a settlement or other
8		disposition of the [elaim;] matter;
9	(3)	The testimony of members of the panel as to the facts
10		of the person's participation in the panel [hearing;]
11	·	proceeding;
12	(4)	The extent of the person's cooperation in providing
13		the panel with documents and testimony called for by
14		the panel;
15	(5)	The reasons advanced by the person so charged for not
16		fully cooperating, participating, or negotiating; and
17	(6)	The failure of the person to submit any required fees
18		to the department of commerce and consumer affairs, as
19		required by this chapter.
20	The	party against whom costs are awarded may appeal the
21	award to	the circuit court. The court may affirm or remand the
22	case with	instructions for further proceedings; or it may

1 reverse or modify the award if the substantial rights of the petitioners may have been prejudiced because the award is 2 3 characterized as abuse of discretion. 4 [f]\$671-20[f] Annual report. The director of commerce and 5 consumer affairs shall prepare and submit to the legislature 6 annually, twenty days prior to the convening of each regular 7 session, a report containing the director's evaluation of the 8 operation and effects of this chapter. The report shall include 9 a summary of the [claims] inquiries brought before the medical 10 [claim] inquiry and conciliation panel and the disposition of 11 [such claims,] those inquiries, a description and summary of the 12 work of the panel under this chapter, an appraisal of the effectiveness of this chapter in securing prompt and fair 13 14 disposition of [medical tort claims,] inquiries regarding the 15 rendering of professional services by health care providers that involved injury, death, or other damages to a patient, a review 16 17 of the number and outcomes of [claims] inquiries brought under 18 section 671-12, and recommendations for changes, modifications 19 or repeal of this chapter or parts thereof with accompanying

reasons and data."

- 1 SECTION 5. This Act does not affect rights and duties that
- 2 matured, penalties that were incurred, and proceedings that were
- 3 begun before its effective date.
- 4 SECTION 6. Statutory material to be repealed is bracketed
- 5 and stricken. New statutory material is underscored.
- 6 SECTION 7. This Act shall take effect on January 2, 2014.

## Report Title:

Medical Claims Conciliation; Medical Inquiry and Conciliation

## Description:

Amends laws relating to medical claim conciliation to make the medical claims conciliation process less adversarial and to emphasize inquiry, conciliation, and settlement. Renames the panels as medical inquiry and conciliation panels. Effective January 2, 2014. (SD1)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.