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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 claims based on
- 17 substantive analysis of the applicable standard of care. The
- 18 legislature finds that proceedings with medical claim



1 conciliation panels should be conducted in a non-adversarial way 2 and structured to facilitate conveying information rather than 3 assigning blame. The legislature believes that increased transparency and education for those who perceive fault on the 4 part of medical providers will assist in the amicable resolution 5 6 of their concerns without the need for formal claims. Medical 7 claim conciliation panels should endeavor to provide a prompt 8 exchange of information and serve a facilitation and 9 conciliation role for these inquiries. However, these panel 10 proceedings are intended to provide a forum of last resort and are not intended as a substitute for informal direct 11 communications between patients and providers. Accordingly, 12 13 statutory provisions relating to filing fees and certificates of 14 consultations should be retained to assure that the panel 15 process is not taken lightly and to encourage patients and 16 providers to attempt 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 adjudicatory. To this end, the current law would be amended to 20 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, but 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. Rather, the legislature
- 13 foresees that this conciliatory approach would better assist
- 14 parties in fully understanding the nature of claims, defenses,
- 15 and damages and encourage parties to reach a voluntary
- 16 settlement. Medical claim conciliation panels should continue
- 17 to express their opinions on liability, causation, and damages
- 18 to the parties to assist them in evaluating their positions,
- 19 however, panels would no longer render formal decisions in order
- 20 to give the panels' greater flexibility in handling true claims.
- 21 Panels would continue to have the authority to require
- 22 adversarial proceedings when adversarial proceedings would be



1 more helpful for the ultimate resolution of claims, but only 2 after consultation with or agreement by the parties and only if 3 the 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. 15 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 when there is an

insufficient basis to support findings of medical torts against

providers.

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          The purpose of this Act is to amend part II of chapter 671,
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    Hawaii Revised Statutes, relating to medical claim conciliation,
    to more closely reflect actual practice and the original intent
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    that the panels serve in a conciliation 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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          "(b)
               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
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    of the board's activities."
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         SECTION 3. Section 453-7.5, Hawaii Revised Statutes, is
    amended by amending subsection (a) to read as follows:
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         "(a) The department of commerce and consumer affairs shall
    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, 671-5,
    and 671-15. The department shall investigate the complaint,
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    inquiry, or information if it appears that the physician or
    osteopathic physician who is the subject of the complaint,
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    inquiry, or information has violated this chapter. If the
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- 1 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 chapter 671, Hawaii Revised
- 6 Statutes, is amended 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 [elaim] inquiry and conciliation panel shall consist of one chairperson [selected 2 3 from among persons who are familiar with and experienced in the 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 [-7] 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 eliqible 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. 15 physician, osteopathic physician, or surgeon shall be appointed 16 by the chairperson and shall be [currently] licensed and in good **17** standing under chapter 453. 18 The chairperson shall preside at the meetings of the 19 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 which will
 become payable [when the decision of the panel is submitted.] at
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the conclusion of panel proceedings. At the discretion of the 1 2 director, the chairperson, panel members, and any consultant called by the panel to appear before the panel, may be 3 compensated at one-half the amount of compensation specified in 4 this section, if the [claim] inquiry is disposed of by any means 5 6 prior to [the hearing by] a meeting of the panel[-] and the parties or their legal representatives. The chairperson, all 7 panel members, and any consultant called by the panel to appear 8 9 before the panel also shall be paid allowances for travel and 10 living expenses which may be incurred as a result of the performance of their duties on or for the panel. These costs 11 shall be paid by the department of commerce and consumer affairs 12 from the filing fees paid by the parties. 13 14 The [claimant] party initiating an inquiry shall pay a (d) filing fee of \$450 to the department upon the filing of the 15 16 [claim] inquiry, and the failure to do so shall result in the [claim] inquiry being rejected for filing. Each health care 17 18 provider and other parties to the [claim] inquiry shall pay a filing fee of \$450 to the department within twenty days of being 19 served with the [claim.] inquiry. Each party to [a claim] an 20 inquiry shall be assessed a non-refundable processing fee by the 21

department in the amount of \$50. The non-refundable processing

- 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 (g) 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 shall be
- 19 eliqible to serve as consultants to the medical inquiry and
- 20 conciliation panel in their respective fields. Panel members
- 21 may consult with other legal, medical, and insurance
- 22 specialists.

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1 [+] \$671-11.5[+] Waiver of filing fee. (a) If any party [to a claim] cannot pay the required filing fee, the party may 2 file with the director a motion to waive the filing fee. The 3 motion to waive the filing fee shall be accompanied by an 4 affidavit in a format prescribed by the department, showing in 5 6 detail: 7 (1) The party's inability to pay the filing fee; The party's belief that the party is entitled to 8 (2) redress; and 9 (3) A statement of the issues that the party intends to 10 11 present at [the hearing] proceedings before a medical [claims] inquiry and conciliation panel. 12 The director shall decide on the motion to waive the 13 filing fee as expeditiously as possible, and no oral arguments 14 15 shall be permitted. (c) If the director grants the motion to waive the filing 16 fee, the party may proceed without further application to the 17 director or panel, and without payment of the filing fee. 18 19 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

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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



- 1 nonexistence of a medical tort shall submit [a statement of the
- 2 claim] an inquiry to the medical [claim] inquiry and
- 3 conciliation panel before a suit based on the [claim]
- 4 circumstances of the inquiry may be commenced in any court of
- 5 this State. [Claims] Inquiries shall be submitted to the
- 6 medical [claim] inquiry and conciliation panel in writing[. The
- 7 claimant shall set forth] and shall include the facts upon which
- 8 the [claim] inquiry is based and [shall include] the names of
- 9 all parties against whom the [claim] inquiry is or may be made
- 10 who are then known to the [claimant.] person or the person's
- 11 representative.
- 12 (b) Within five business days thereafter the panel shall
- 13 give notice of the [claim] inquiry and the statement of the
- 14 [claim,] inquiry, by certified mail, to all health care
- 15 providers and others who are or may be parties [to the claim]
- 16 and shall furnish copies of written [claims] inquiries to [such]
- 17 those persons. [Such] The notice shall set forth a date, not
- 18 more than twenty days after mailing the notice, within which any
- 19 health care provider against whom [a claim] an inquiry is made
- 20 shall file a written response [to the claim,] and a date and
- 21 time, not less than five days following the last date for filing
- 22 a response, for [a hearing of] an inquiry by the panel[. Such]



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



1	[the clai	mant] any party so directed fails 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 jus	t. 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] <u>i</u>	nquiry filed with the medical [claim] inquiry and
8	conciliat	ion panel under this chapter shall be accompanied by a
9	certifica	te [which] that declares one of the following:
10	(1)	That the [claimant or the claimant's] party initiating
11		the inquiry or their attorney has consulted with at
12		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 [claim] inquiry is made, and that the [claimant or
17		claimant's] party or their attorney has concluded on
18		the basis of [such] the consultation that there is a
19		reasonable and meritorious cause for filing the
20		[claim.] inquiry. If the [claimant or the claimant's]
21		party initiating the inquiry or their attorney is not
22		able to consult with a physician in the same medical

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	specialty as the health care professional against whom
	the [claim] inquiry is made, [the claimant or
	claimant's] that party or their 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;
(2)	That the [claimant or the claimant's] party initiating
	the inquiry or their 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 action.

If a certificate is executed pursuant to this

paragraph, the certificate required by paragraph (1)

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

1	the inquiry to the medical [elaim] inquiry and
2	conciliation panel along with a certificate declaring
3	[such] the nonresponse to [claimant's] the party or
4	their attorney's good faith attempt. A "good faith
5	attempt" shall ultimately be evaluated in light of the
6	goal of having a qualified physician assist the
7	[claimant or claimant's] party initiating the inquiry
8	or their attorney in understanding the basis of the
9	[claim,] inquiry and [such] the determination shall
10	depend upon the circumstances of each individual case.
11	(b) Where a [claimant or the claimant's] party initiating
12	an inquiry or their attorney intends to rely solely on a failure
13	to inform of the consequences of a procedure (informed consent),
14	this section shall be inapplicable. The [claimant or the
15	claimant's] party initiating an inquiry or their attorney shall
16	certify upon filing of the [claim] inquiry that [the claimant or
17	the claimant's attorney is] they are relying solely on the
18	failure to inform of the consequences of a procedure and for
19	that reason is not filing a certificate as required by this
20	section.

(c) For the purposes of this section, the [claimant or the claimant's] party initiating an inquiry or their attorney shall



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

and consultants called by the panel, and the persons listed in

1 section 671-14 shall be present except with the permission of the chairperson. The panel may, in its discretion, conduct an 2 inquiry of a party, witness, or consultant without the presence 3 of any or all parties. 4 The [hearing] proceedings shall be informal. Chapters 91 5 and 92 shall not apply. The panel may require a stenographic 6 7 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 8 parties. The panel may receive any oral or documentary 9 [Questioning of parties, witnesses, and consultants 10 may be conducted by the panel, and the panel may, in its 11 discretion, permit any party, or any counsel for a party to 12 13 guestion other parties, witnesses, or consultants. The panel may designate who, among the parties, shall have the burden of 14 going forward with the evidence with respect to such issues as 15 it may consider, and unless otherwise designated by the panel, 16 17 when medical and hospital records have been provided to the claimant for the claimant's proper review, such burden shall 18 initially rest with the claimant at the commencement of the 19 hearing.] The panel shall conduct proceedings in a manner 20 21 appropriate to the circumstances of the inquiry and to facilitate resolution of the matter. The panel shall conduct 22



- 1 proceedings in a non-adversarial manner consistent with the
- 2 primary purpose of conciliation.
- 3 The panel shall have the power to require by subpoena the
- 4 appearance and testimony of witnesses and the production of
- 5 documentary evidence. When [such] the subpoena power is
- 6 utilized, notice shall be given to all parties. The testimony
- 7 of witnesses may be taken either orally before the panel or by
- 8 deposition. In cases of refusal to obey a subpoena issued by
- 9 the panel, the panel may invoke the aid of any circuit court in
- 10 the State, which may issue an order requiring compliance with
- 11 the subpoena. Failure to obey [such] an order may be punished
- 12 by the court as a contempt thereof. Any member of the panel,
- 13 the director of [the department,] commerce and consumer affairs,
- 14 or any person designated by the director [of the department] may
- 15 sign subpoenas. Any member of the panel may administer oaths
- 16 and affirmations, examine witnesses, and receive evidence.
- 17 Notwithstanding [such] these powers, the panel shall attempt to
- 18 secure the voluntary appearance, testimony, and cooperation of
- 19 parties, witnesses, and consultants without coercion.
- 20 At [the hearing of the] panel proceedings and [in arriving
- 21 at its opinion] to assist its conciliation role, the panel
- 22 [shall] may consider, but not be limited to, statements or



- 1 testimony of witnesses, hospital and medical records, nurses'
- 2 notes, x-rays, and other records kept in the usual course of the
- 3 practice of the health care provider without the necessity for
- 4 other identification or authentication, statement of fact, or
- 5 opinion on a subject contained in a published treatise,
- 6 periodical, book, or pamphlet, or statements of experts without
- 7 the necessity of the experts appearing at the [hearing.]
- 8 proceeding. The panel may upon the application of any party or
- 9 upon its own decision appoint as a consultant, an impartial and
- 10 qualified physician, surgeon, physician and surgeon, or other
- 11 professional person or expert to testify before the panel or to
- 12 conduct any necessary professional or expert examination of the
- 13 [claimant] party initiating the inquiry or relevant evidentiary
- 14 matter and to report to or testify as a witness thereto. [Such
- 15 a] The consultant shall not be compensated or reimbursed except
- 16 for travel and living expenses to be paid as provided in section
- 17 671-11. Except for the production of hospital and medical
- 18 records, nurses' notes, x-rays, and other records kept in the
- 19 usual course of the practice of the health care provider,
- 20 discovery by the parties shall not be allowed.
- 21 During the [hearing and at any time prior to the rendition
- 22 of an advisory decision pursuant to section 671-15, proceedings



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1	or at any time before termination, the panel may encourage the
2	parties to settle or otherwise dispose of the case voluntarily.
3	§671-14 Same; persons attending [hearings] proceedings of
4	panel. Unless excluded or excused by the panel, the following
5	persons shall attend [hearings] proceedings before the panel:
6	(1) The party or parties [making the claim;] submitting
7	the inquiry;
8	(2) The health care provider or providers against whom the
9	[elaim is made] inquiry is submitted or
10	representatives thereof, other than counsel,
11	authorized to act for [such] the health care provider
12	or providers; and
13	(3) Counsel for the parties, if any.
14	§671-15 [Same, decisions.] Panel termination. [(a)
15	Within thirty days after the completion of a hearing, the
16	medical claim conciliation panel shall file a written advisory
17	decision with the insurance commissioner who shall thereupon
18	mail copies to all parties concerned, their counsel, and the
19	representative of each health care provider's liability
20	insurance carrier authorized to act for such carrier, as
21	appropriate. The insurance commissioner also shall mail copies
22	of the advisory decision to the department of commerce and

1	consumer arrairs, ir the train is against a physician,
2	osteopathic physician, or surgeon licensed under chapter 453 or
3	a podiatrist licensed under chapter 463E. The panel shall
4	decide the issue of liability and shall state its conclusions in
5	substantially the following language: "We find the health care
6	provider was actionably negligent in his or her care and
7	treatment of the patient and we, therefore, find for the
8	claimant"; or "We find the health care provider was not
9	actionably negligent in his or her care and treatment of the
10	patient and we, therefore, find for the health care provider".
11	(b) After a finding of liability, the medical claim
12	conciliation panel shall decide the amount of damages, if any,
13	which should be awarded in the case. The decision as to damage:
14	shall include in simple, concise terms a division as to which
15	portion of the damages recommended are attributable to economic
16	losses and which to noneconomic losses; provided the panel may
17	not recommend punitive damages.
18	(c) The decisions shall be signed by all members of the
19	medical claim conciliation panel; provided that any member of
20	the panel may file a written concurring or dissenting opinion.
21	(d) The advisory decision required by this section need
22	not be filed if the claim is settled or otherwise disposed of
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1 before the decision is written or filed.] The director of 2 commerce and consumer affairs or the panel shall notify all 3 affected parties upon termination of panel proceedings. At the 4 discretion of the director or the panel, a notice of termination 5 may state whether any party or parties to the matter failed to 6 meet the requirements of this part or meaningfully participate 7 in panel proceedings. 8 [+]\$671-15.5[+] Expungement of records; malpractice 9 insurance rates. (a) [Upon a decision by the medical claim 10 conciliation panel finding for the health care provider pursuant 11 to section 671 15(a), the] A health care provider may apply to 12 the panel for expundement of all records of the related 13 proceedings. The panel shall expunge all records if [a majority 14 of] the panel [finds that the complaint is fraudulent or 15 frivolous.] agrees that the inquiry did not provide a sufficient 16 basis to support the finding of a medical tort against the 17 health care provider applying for expungement. 18 (b) No insurer providing professional liability insurance 19 for a health care provider shall increase any premium rate for 20 the health care provider on the basis of the filing of [a medical tort claim against] an inquiry involving the health care 21

provider [that is determined by] with the medical [claim]

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- 1 inquiry and conciliation panel [to be fraudulent or frivolous.]
- 2 unless an indemnity payment is made to the party initiating the
- 3 inquiry or the party initiating the inquiry institutes
- 4 litigation in a court of competent jurisdiction based on the
- 5 circumstances of the inquiry.
- 6 §671-16 Subsequent litigation; excluded evidence. The
- 7 [claimant] party initiating the inquiry may institute litigation
- 8 based upon the [claim] circumstances of the inquiry in an
- 9 appropriate court only after: a party [to a] has meaningfully
- 10 participated in medical [claim] inquiry and conciliation panel
- 11 [hearing rejects the decision of the panel,] proceedings that
- 12 were terminated pursuant to section 671-15; a party has
- 13 participated in alternative dispute resolution pursuant to
- 14 section 671-16.6; or [after] the twelve-month period under
- 15 section 671-18 has expired.
- 16 No statement made in the course of the [hearing]
- 17 proceedings of the medical [claim] inquiry and conciliation
- 18 panel shall be admissible in evidence either as an admission, to
- 19 impeach the credibility of a witness, or for any other purpose
- 20 in any trial of the action; provided that [such] the statements
- 21 may be admissible for the purpose of section 671-19[, hereof].
- 22 No decision, conclusion, finding, statement, or recommendation



1 of the medical [claim] inquiry and conciliation panel on the 2 issue of liability or on the issue of damages shall be admitted 3 into evidence in any subsequent trial, nor shall any party to 4 the medical [claim] inquiry and conciliation panel [hearing,] 5 proceeding, or the counsel or other representative of [such] a 6 party, refer or comment thereon in an opening statement, an 7 argument, or at any other time, to the court or jury; provided 8 that [such] the decision, conclusion, finding, or recommendation 9 may be admissible for the purpose of section 671-19[, hereof]. 10 [f]\$671-16.5[f] Arbitration; subsequent litigation. Any 11 person or the person's representative claiming that a medical 12 tort has been committed or any health care provider against whom 13 [a claim] an inquiry has been made may elect to bypass the court 14 annexed arbitration program under section 601-20 after the 15 [claim] inquiry has been submitted to the medical [claim] 16 inquiry and conciliation panel and the panel has [rendered a 17 decision] been terminated pursuant to section 671-15 if the 18 party meaningfully participated in panel proceedings, an 19 alternative dispute resolution process has been terminated 20 pursuant to section 671-16.6, or the panel or alternative 21 dispute resolution process has not [reached a decision]

1 completed proceedings within the tolling period of the statute 2 of limitations under section 671-18. 3 [+]\$671-16.6[+] Submission of [elaim] inquiry to an alternative dispute resolution provider. (a) Any [claim] 4 5 inquiry initially filed with the medical [claim] inquiry and 6 conciliation panel may be subsequently submitted to an 7 alternative dispute resolution provider upon the written 8 agreement of all of the parties [to the claim] and with the written approval of the director[-] of commerce and consumer 9 10 affairs. The director shall approve the alternative dispute 11 resolution provider and the alternative dispute resolution 12 procedures. All filing fees, less a processing fee of \$50, 13 shall be refunded to the appropriate parties if the panel was 14 not constituted or had not taken any action related to the 15 inquiry prior to the submission of the inquiry to an alternative dispute resolution provider. If the panel was constituted or 16 17 took any action prior to the submission of the inquiry to an alternative dispute resolution provider, the remaining balance 18 19 of any filing fees shall be refunded to the appropriate parties, 20 less a processing fee of \$50 and a pro-rata amount to be

determined by the director.

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1	(b) The parties shall comply with the procedures
2	established by the alternative dispute resolution provider and
3	approved by the director. If a party does not comply with those
4	procedures, any other party may file a motion with the director
5	to have the [claim] inquiry resubmitted to the medical [claim]
6	inquiry and conciliation panel. The director may collect any
7	filing fees that were refunded pursuant to subsection (a) from a
8	party that resubmits its inquiry.
9	(c) Notwithstanding section 671-12, any inquiry may be
10	submitted directly to an alternative dispute resolution process
11	upon the written agreement of all parties without first
12	submitting the inquiry to a medical inquiry and conciliation
13	panel. A written agreement shall be effective as of the date of
14	its execution by the parties. Any inquiry submitted directly to
15	alternative dispute resolution need not be subsequently
16	submitted to a medical inquiry and conciliation panel and no
17	filing fees shall be assessed by the director for the medical
18	inquiry and conciliation panel.
19	(d) Within thirty days after the completion of the
20	alternative dispute resolution process, the alternative dispute
21	resolution provider shall notify all parties concerned, their
22	counsel, and the representative of each health care provider's

- 1 liability insurance carrier authorized to act for the carrier,
- 2 as appropriate, that the alternative dispute resolution process
- 3 has been completed.
- 4 [(d)] (e) The [claimant] party submitting the inquiry may
- 5 institute litigation based upon the claim in an appropriate
- 6 court only if:
- 7 (1) The parties were not able to resolve the entire
- 8 [claim] matter through the alternative dispute
- 9 resolution process and the matter has not been
- resubmitted to the medical [claim] inquiry and
- 11 conciliation panel pursuant to subsection (b) of this
- 12 section; or
- 13 (2) The [claim] matter has not been resolved through the
- 14 alternative dispute resolution process after twelve
- months from the date the [claim] matter was filed with
- the approved or agreed upon alternative dispute
- 17 resolution provider.
- 18 [(e)] (f) No statement made in the course of the approved
- 19 or agreed upon alternative dispute resolution process shall be
- 20 admissible in evidence as an admission, to impeach the
- 21 credibility of a witness, or for any other purpose in any trial
- 22 of the action. No decision, conclusion, finding, or



- 1 recommendation of the approved or agreed upon alternative
- 2 dispute resolution provider on the issue of liability or on the
- 3 issue of damages shall be admitted into evidence in any
- 4 subsequent trial, nor shall any party to the approved or agreed
- 5 upon alternative dispute resolution hearing, their counsel, or
- 6 other representative of [such] the party, refer or comment
- 7 thereon in an opening statement, in an argument, or at any time,
- 8 to the court or jury.
- 9 [+] §671-17[+] Immunity of panel members from liability.
- 10 No member of a medical [claim] inquiry and conciliation panel
- 11 shall be liable in damages for libel, slander, or other
- 12 defamation of character of any party to a medical [claim]
- 13 inquiry and conciliation panel proceeding for any action taken
- 14 or any decision, conclusion, finding, or recommendation made by
- 15 the member while acting within the member's capacity as a member
- 16 of a medical [claim] inquiry and conciliation panel under this
- 17 [Act.] part.
- 18 §671-18 Statute of limitations tolled. The filing of the
- 19 [claim] inquiry with the medical [claim] inquiry and
- 20 conciliation panel or with an approved or agreed upon
- 21 alternative dispute resolution provider shall toll any
- 22 applicable statute of limitations, and [any such] the statute of



limitations shall remain tolled until sixty days after the [date 1 2 the decision] termination of the panel or the notification of 3 completion from the approved or agreed upon alternative dispute resolution provider is mailed or delivered to the parties. 4 5 [a decision by the medical claim conciliation] panel proceedings 6 are not completed [is not reached] within twelve months, or the 7 alternative dispute resolution process is not completed within twelve months, the statute of limitations shall resume running 8 9 and the party filing the [claim] inquiry may commence a suit 10 based on the [claim] circumstances related to the inquiry in any 11 appropriate court of this State. The panel or the approved or agreed upon alternative dispute resolution provider shall notify 12 13 all parties in writing of this provision. 14 §671-19 Duty to cooperate; assessment of costs and fees. 15 It shall be the duty of every person who files [a claim] an inquiry with the medical [claim] inquiry and conciliation panel, 16 17 every health care provider against whom the [claim] inquiry is 18 made, and every insurance carrier or other person providing 19 medical tort liability insurance for the health care provider, 20 to cooperate with the medical [claim] inquiry and conciliation 21 panel and meaningfully participate in panel proceedings for the purpose of achieving a prompt, fair, and just resolution, 22

1 disposition, or settlement of the [claim,] inquiry, provided 2 that cooperation and participation shall not prejudice the 3 substantive rights of those persons. Any party may apply to the panel to have the costs of the 4 action assessed against any party for failure to cooperate with 5 6 the panel [-] or meaningfully participate in panel proceedings. The panel may award costs, or a portion thereof, including 7 attorney's fees, witness fees, including those of expert 8 witnesses, filing fees, and costs of the medical [claim] inquiry 9 10 and conciliation panel [hearing] proceedings to the party 11 applying therefor. In determining whether any person has failed to cooperate 12 or meaningfully participate in good faith, the panel shall 13 consider, but is not limited to, the following: 14 15 The attendance of the persons at [the hearing] (1) 16 proceedings of the medical [claim] inquiry and 17 conciliation panel; The extent to which representatives of parties and 18 (2) 19 counsel representing parties came to panel [hearings] proceedings with knowledge of the claims and defenses 20

and authority to negotiate a settlement or other

disposition of the [claim;] matter;

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1	(3)	The testimony of members of the panel as to the facts
2		of the person's participation in the panel [hearing;]
3		proceeding;
4	(4)	The extent of the person's cooperation in providing
5		the panel with documents and testimony called for by
6		the panel;
7	(5)	The reasons advanced by the person so charged for not
8		fully cooperating, participating, or negotiating; and
9	(6)	The failure of the person to submit any required fees
10		to the department of commerce and consumer affairs, as
11		required by this chapter.
12	The j	party against whom costs are awarded may appeal the
13	award to	the circuit court. The court may affirm or remand the
14	case with	instructions for further proceedings; or it may
15	reverse o	r modify the award if the substantial rights of the
16	petitione:	rs may have been prejudiced because the award is
17	character	ized as abuse of discretion.
18	[+]\$	671-20[+] Annual report. The director of commerce and
19	consumer	affairs shall prepare and submit to the legislature
20	annually,	twenty days prior to the convening of each regular

session, a report containing the director's evaluation of the

operation and effects of this chapter. The report shall include

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- 1 a summary of the [claims] inquiries brought before the medical
- 2 [claim] inquiry and conciliation panel and the disposition of
- 3 [such-claims,] those inquiries, a description and summary of the
- 4 work of the panel under this chapter, an appraisal of the
- 5 effectiveness of this chapter in securing prompt and fair
- 6 disposition of [medical tort claims,] inquiries regarding the
- 7 rendering of professional services by health care providers that
- 8 involved injury, death, or other damages to a patient, a review
- 9 of the number and outcomes of [claims] inquiries brought under
- 10 section 671-12 and recommendations for changes, modifications or
- 11 repeal of this chapter or parts thereof with accompanying
- 12 reasons and data."
- 13 SECTION 5. This Act does not affect rights and duties that
- 14 matured, penalties that were incurred, and proceedings that were
- 15 begun before its effective date.
- 16 SECTION 6. Statutory material to be repealed is bracketed
- 17 and stricken. New statutory material is underscored.

This Act shall take effect upon its approval. SECTION 7.

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INTRODUCED BY:

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Report Title:

Medical Claims Conciliation

Description:

Makes numerous amendments to part II of chapter 671, HRS, 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.

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