HOUSE BILL NO. HB0102

Medical malpractice panel.

Sponsored by: Representative(s) Simpson, Baker, Childers, Harvey, Ross and Wostenberg and Senator(s)
Coe and Meier

A BILL

for

- 1 AN ACT relating to administration of government; modifying
- 2 the Wyoming medical review act; providing an alternative
- 3 means to resolve medical malpractice claims; providing for
- 4 funding of the medical review panel; authorizing an
- 5 additional part-time position; and providing for an
- 6 effective date.

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8 Be It Enacted by the Legislature of the State of Wyoming:

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- 10 **Section 1.** W.S. 9-2-1501, 9-2-1502, 9-2-1503(a)(iii),
- 11 (v) and by creating a new paragraph (vii) and by
- 12 renumbering (vii) as (viii), 9-2-1505(a) and (c),
- 9-2-1506(a) and by creating a new subsection (d),
- 14 9-2-1507(a), (c) and (d), 9-2-1512(a)(intro) and (b) and
- 15 26-4-102(b)(i), (ii) and by creating a new paragraph (iii)
- 16 are amended to read:

| 2004 | STATE OF WYOMING | 04LSO-0206 |
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| 2 | ARTICLE 15 |
| 3 | MEDICAL MALPRACTICE PANEL |
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| 5 | 9-2-1501. Short title. |
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| 7 | This act may be cited as the "Wyoming Medical Review |
| 8 | Malpractice Panel Act". |
| 9 | |
| 10 | 9-2-1502. Purpose of provisions. |
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| 12 | The purpose of this act is to provide an alternative means |
| 13 | to resolve medical malpractice claims to prevent where |
| 14 | possible the filing in court of actions against health care |
| 15 | providers and their employees for professional liability in |
| 16 | situations where the facts do not permit at least a |
| 17 | reasonable inference of malpractice and to make possible |
| 18 | the fair and equitable disposition of such medical |
| 19 | malpractice claims against health care providers as are, or |
| 20 | reasonably may be, well founded that have been filed in |
| 21 | court and are appropriate for alternative dispute |
| 22 | resolution. |
| 23 | |
| 24 | 9-2-1503. Definitions. |

| 1 | |
|----|-------------------------------------------------------------|
| 2 | (a) As used in this act: |
| 3 | |
| 4 | (iii) "Health care provider" means a physician, |
| 5 | dentist, health care facility or any person employed by a |
| 6 | health care facility who, in accordance with law or a |
| 7 | license granted by a state agency, provides health care; |
| 8 | <pre>including:</pre> |
| 9 | |
| 10 | (A) A physician, dentist, nurse, |
| 11 | podiatrist, pharmacist, chiropractor, optometrist or health |
| 12 | care facility; and |
| 13 | |
| 14 | (B) An officer, employee or agent of a |
| 15 | person listed in subparagraph (A) of this paragraph acting |
| 16 | in the course and scope of employment. |
| 17 | |
| 18 | (v) "Panel" means the medical review malpractice |
| 19 | panel provided for under this act; |
| 20 | |
| 21 | (vii) "Health care facility" means a hospital, |
| 22 | clinic or nursing home where a health care provider |
| 23 | provides health care to patients. |

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             (vii) (viii) "This act" means W.S. 9-2-1501
2
    through 9-2-1512.
3
        9-2-1505. Panel created; compensation; director of
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    panel; appointment and duties; rulemaking.
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7
         (a) There is created the Wyoming medical review
8
    malpractice panel.
9
         (c) Members of the panel shall receive compensation
10
    while engaged in the business of the board of forty dollars
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    ($40.00) sixty dollars ($60.00) per hour for any hour
12
13
    during which a hearing or part of a hearing is held.
14
    Compensation for travel and other services shall be as
15
    provided in W.S. 9-3-102 and 9-3-103. Compensation to any
    panel member under this subsection shall not exceed three
16
    hundred twenty dollars ($320.00) four hundred eighty
17
18
    dollars ($480.00) per day.
19
20
        9-2-1506. Claims to be reviewed by panel; tolling of
21
    statute of limitation; immunity of panel and witnesses;
22
    administration.
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НВ0102

The panel shall review all malpractice claims 1 (a) 2 against health care providers filed with the panel except those claims subject to a valid arbitration agreement 3 allowed by law or upon which suit has been filed prior to 4 5 July 1, 1986. No complaint alleging malpractice shall be 6 filed in any court against a health care provider before a 7 claim is made to the panel and its decision is rendered. The running of the applicable limitation period in a 8 9 malpractice action is tolled upon receipt by the director 10 of the application for review and does not begin again until thirty (30) days after the panel's final decision is 11 12 served upon the claimant. as follows: 13 14 (i) With the voluntary agreement of both the 15 complainant and the health care provider; or 16 17 (ii) At the request of either the complainant or 18 the health care provider, provided the court determines pursuant to Rule 40, Wyoming Rules of Civil Procedure, that 19 alternative dispute resolution by the medical malpractice 20 21 panel is appropriate. 22 23 (d) Unless an action has been filed, the running of 24 the applicable limitation period in a malpractice action is

1 tolled upon receipt by the director of the application for

2 review and does not begin again until thirty (30) days

3 after the panel's final decision is served upon the

4 claimant.

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9-2-1507. Claim review procedure; contents of claim;
service of claim on provider; answer.

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9 (a) Claimants shall With agreement of the health care
10 provider against whom a claim is asserted, a claimant may
11 submit a case for the consideration of the panel prior to
12 filing a complaint in any court in this state by addressing
13 a claim, in writing, signed by the claimant or his
14 attorney, to the director of the panel. The claim shall
15 contain:

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(i) A statement in reasonable detail of the elements of the health care provider's conduct which are believed to constitute a malpractice claim, the dates the conduct occurred, and the names and addresses of all physicians, dentists and hospitals health care providers having contact with the claimant relevant to the claim and all witnesses;

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1 (ii) A statement, signed by the claimant, 2 authorizing the panel to obtain access to all medical, 3 dental and hospital records, including hospital records, and information pertaining to the claim and, for the 4 purposes of its consideration of this matter only, waiving 5 6 any privilege as to the contents of those records. Nothing 7 in the statement may in any way be construed as waiving 8 that privilege for any other purpose or in any other 9 context, in or out of court;-10 11 (iii) Written authorization of the health care provider for submission of the claim for review under this 12 13 act. 14 (c) Upon receipt of a claim, the director shall cause 15 16 a true copy of the claim to be served on the health care 17 providers provider against whom the claim has been filed. 18 19 (d) The health care provider shall answer the claim within thirty (30) days after service and shall submit a 20 statement authorizing the panel to inspect all medical, 21 22 dental and hospital records, including hospital records, 23 and information pertaining to the claim except those 24 records which are privileged pursuant to W.S. 35-17-105.

1 The answer shall be filed with the director who shall serve

2 a copy on the claimant.

4 9-2-1512. Panel funding; medical review account;

expenditures.

(a) The panel shall be funded from assessments levied against and insurance premium taxes paid by each health care provider covered by this act. The director shall promulgate rules in accordance with the Wyoming Administrative Procedure Act to annually establish appropriate assessments based on the following guidelines: in accordance with W.S. 26-4-103 and deposited into the medical review account as provided in subsection (b) of this section.

assessment to the appropriate licensing board, agency or authority, and the board, agency or authority shall levy and collect the assessments annually at the same time as annual license fees are collected. Assessments collected under this subsection shall be remitted to the director not later than thirty (30) days from the date of collection and paid immediately by the director to—The state treasurer for

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1 <u>shall</u> deposit in an account, to be known as the medical
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2 review account, within the earmarked revenue fund $\underline{\text{one}}$

3 hundred thousand dollars (\$100,000.00) annually as provided

4 by W.S. 26-4-102(b)(iii).

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6 26-4-102. Record of receipts; payment to treasurer;

7 credit to fund.

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9 (b) The commissioner shall promptly pay all monies he 10 receives from any charges to the state treasurer for credit 11 to the general fund, except that:

12

13 (i) Fees received pursuant to W.S.

14 26-4-101(a)(v)(A)(I) and (B)(I) and (xiii) shall be paid

and credited as provided in W.S. 26-10-107; and

16

17 (ii) Fifty percent (50%) of the gross premium

18 tax levied upon fire insurance premiums shall be deposited

19 by the state treasurer in the volunteer firemen's pension

20 account pursuant to W.S. 35-9-604. For purposes of this

21 paragraph, the gross premium tax levied upon fire insurance

22 premiums is equal to twenty-six percent (26%) of the total

23 gross premium tax levied upon all property, casualty and

24 multiple line insurers: $\frac{\cdot}{\cdot}$ and

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2 (iii) One hundred thousand dollars (\$100,000.00)

3 annually from premium taxes paid pursuant to W.S. 26-4-103

4 shall be deposited by the treasurer to the medical review

5 account for expenditure pursuant to W.S. 9-2-1512.

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7 **Section 2.** W.S. 9-2-1512(a)(i) through (iii) is

8 repealed.

9

10 **Section 3.** The office of the attorney general is

11 authorized one (1) additional part-time position for

12 purposes of carrying out the duties of that office under

13 the Wyoming Medical Review Panel Act.

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15 Section 4. This act is effective July 1, 2004.

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17 (END)