HOUSE BILL NO. HB0102

Medical review 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.

7

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),
- 9-2-1507(a), (c) and (d), 9-2-1512(a) (intro) and (b) and
- 26-4-102(b)(i), (ii) and by creating a new paragraph (iii)
- 16 are amended to read:

2004	STATE OF	WYOMING	04LSO-0206.E1

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2	ARTICLE 15
3	MEDICAL MALPRACTICE PANEL
4	
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".
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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 (iii) "Health care provider" means a physician, 4 dentist, health care facility or any person employed by a 5 6 health care facility who, in accordance with law or a 7 license granted by a state agency, provides health care; 8 including: 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 person listed in subparagraph (A) of this paragraph acting 15 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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         (a) There is created the Wyoming medical review
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    malpractice panel.
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         (c) Members of the panel shall receive compensation
    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.
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    Compensation for travel and other services shall be as
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    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
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    dollars ($480.00) per day.
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        9-2-1506. Claims to be reviewed by panel; tolling of
21
    statute of limitation; immunity of panel and witnesses;
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administration.

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1	(a) The panel shall review all malpractice claims
2	against health care providers filed with the panel except
3	those claims subject to a valid arbitration agreement
4	allowed by law or upon which suit has been filed prior to
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.
8	The running of the applicable limitation period in a
9	malpractice action is tolled upon receipt by the director
10	of the application for review and does not begin again
11	until thirty (30) days after the panel's final decision is
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
19	pursuant to Rule 40, Wyoming Rules of Civil Procedure, that
20	alternative dispute resolution by the medical malpractice
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

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

4 claimant.

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6 9-2-1507. Claim review procedure; contents of claim; 7 service of claim on provider; answer.

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

16

(i) A statement in reasonable detail of the 17 elements of the health care provider's conduct which are 18 believed to constitute a malpractice claim, the dates the 19 conduct occurred, and the names and addresses of all 20 physicians, dentists and hospitals health care providers 21 22 having contact with the claimant relevant to the claim and 23 all witnesses;

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24

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 a true copy of the claim to be served on the health care 16 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.

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

2 a copy on the claimant.

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

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

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- 17 (b) The director shall certify the amount of each
- 18 assessment to the appropriate licensing board, agency or
- 19 authority, and the board, agency or authority shall levy
- 20 and collect the assessments annually at the same time as
- 21 annual license fees are collected. Assessments collected
- 22 under this subsection shall be remitted to the director not
- 23 later than thirty (30) days from the date of collection and
- 24 paid immediately by the director to The state treasurer for

- shall deposit in an account, to be known as the medical 1
- 2 review account, within the earmarked revenue fund one
- 3 hundred thousand dollars (\$100,000.00) annually as provided
- by W.S. 26-4-102 (b) (iii). 4

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

8

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

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- 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 15

16

- (ii) Fifty percent (50%) of the gross premium 17
- tax levied upon fire insurance premiums shall be deposited 18
- by the state treasurer in the volunteer firemen's pension 19
- account pursuant to W.S. 35-9-604. For purposes of this 20
- 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; - and

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.

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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)