

1 2 3 4	(New Draft of S.P. 820, L.D. 2065) (New Title) SECOND REGULAR SESSION
5 6	ONE HUNDRED AND TWELFTH LEGISLATURE
7 8	Legislative Document No. 2400
	S.P. 958 In Senate, April 13, 1986 Reported by the Majority Report from the Committee on Judiciary and printed under Joint Rule 2. Original bill sponsored by President Pray of Penobscot. Cosponsored by Representative Kane of So. Portland, Senator Gill of Cumberland and Representative Hayden of Brunswick.
	JOY J. O'BRIEN, Secretary of the Senate
	STATE OF MAINE
	IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND EIGHTY-SIX
	AN ACT Relating to Medical and Legal Professional Liability.
	Be it enacted by the People of the State of Maine as follows:
	Sec. 1. 14 MRSA §753 is amended to read:
	§753. Two years
	Actions for assault and battery, and for false imprisonment, slander, and libel and malpractice of physicians and all others engaged in the healing art shall be commenced within 2 years after the cause of action accrues.
	Sec. 2. 14 MRSA §753-A is enacted to read:
	§753-A. Actions against attorneys

1

1 Except in actions based on an allegedly negligent 2 title search and in actions based on an allegedly 3 negligent will draft, actions alleging professional 4 negligence or breach of contract by a licensed attorney, the statute of limitations shall start to run 5 б from the date of the act or omission giving rise to 7 the injury and not from the discovery of the malpractice, negligence or breach of contract, except as the 8 statute of limitations may be suspended by other 9 10 laws.

11 Sec. 3. 24 MRSA §2502, sub-§1-A is enacted to 12 read:

13 1-A. Health care practitioner. "Health care practitioner" means physicians and all others certified, registered or licensed in the healing arts, including, but not limited to, nurses, podiatrists, optometrists, chiropractors, physical therapists, dentists, psychologists and physicians' assistants.

19 Sec. 4. 24 MRSA §2502, sub-§2, as enacted by PL 20 1977, c. 492, §3, is amended to read:

Health care provider. "Health care provider" 21 2. 2.2 means any hospital, clinic, nursing home or other fa-23 cility in which skilled nursing care or medical ser-24 vices are prescribed by or performed under the gener-25 direction of persons licensed to practice medial 26 cine, dentistry, podiatry or surgery in this State and which is licensed or otherwise authorized by the 27 28 laws of this State.

29 Sec. 5. 24 MRSA §2502, sub-§§6 and 7 are enacted 30 to read:

31 <u>6. Action for professional negligence. "Action</u> 32 for professional negligence" means any action for 33 damages for injury or death against any health care 34 provider, its agents or employees, or health care 35 practitioner, his agents or employees, whether based 36 upon tort or breach of contract or otherwise, arising 37 out of the provision or failure to provide health 38 care services.

39 <u>7. Professional negligence. "Professional neg-</u> 40 ligence" means that: 1A. There is a reasonable medical or professional2probability that the acts or omissions complained3of constitute a deviation from the applicable4standard of care by the health care practitioner5or health care provider charged with that care;6and

B. There is a reasonable medical or professional
 probability that the acts or omissions complained
 of proximately caused the injury complained of.

10 Sec. 6. 24 MRSA §2506, as enacted by PL 1977, c. 11 492, §3, is amended to read:

12 §2506. Provider reports

A health care provider shall, within 60 days, re-13 14 port in writing to the appropriate board or authority 15 the name of any member of the medical staff or any other physician practicing in the facility licensed, 16 17 certified or registered employee or person privileged 18 by the provider whose employment or privileges have been revoked, suspended, limited or terminated, er 19 20 who has been otherwise formally disciplined by the 21 provider or the provider's medical staff, together 22 with pertinent information relating to such that ac-23 tion, if such revocation, limitation, termination or 24 discipline is the result of negligence, habitual 25 drunkenness, addiction to the use of drugs, profes-26 sional incompetence or repeated acts of professional incompetence. Any reversal, modification or change of 27 28 action reported pursuant to this section shall be reported immediately to the board <u>or authority</u>, togeth-er with a brief statement of the reasons for such 29 30 31 that reversal, modification or change. The failure of 32 any such health care provider to report as required a civil violation for which a fine of not more 33 is 34 than \$1,000 may be adjudged.

35 Sec. 7. 24 MRSA §2511, as amended by PL 1985, c. 36 185, §4 and PL 1985, c. 193, is repealed and the fol-37 lowing enacted in its place:

38 §2511. Immunity

39 Any person, physician, health care provider, pro-40 fessional society or member of a professional compe-

1 tence committee or of any board or authority acting without malice, in making any report or other infor-2 3 mation available to any appropriate board or authori-4 ty pursuant to law or in assisting in the origina-5 tion, investigation or preparation of that informa-6 tion or in assisting the board or authority in carry-7 ing out any of its duties or functions provided by law, shall be immune from civil or criminal liabili-8 9 ty, except as provided in section 2510, subsection 4, for any such actions. 10

Sec. 8. 24 MRSA §2601, as enacted by PL 1977, c. 492, §3, is amended by adding at the end a new paragraph to read:

14 The failure of any insurer providing professional 15 liability insurance in this State to a person li-16 censed by the Board of Registration in Medicine or 17 the Board of Osteopathic Examination and Registration 18 or any health care provider to report as required is 19 a civil violation for which a fine of not more than 20 \$1,000 may be adjudged.

21 Sec. 9. 24 MRSA §2602, sub-§3 is enacted to 22 read:

3. Fine. The failure of any insurer providing professional liability insurance in this State to a person licensed by the Board of Registration in Medicine or the Board of Osteopathic Examination and Registration or any health care provider to report as required is a civil violation for which a fine of not more than \$1,000 may be adjudged.

30 Sec. 10. 24 MRSA §2607 is enacted to read:

31 §2607. Claims paid information

When any person licensed by the Board of Regis-32 33 tration in Medicine or the Board of Osteopathic Examination and Registration has 3 professional liability 34 claims that have resulted in a monetary judgment, 35 award or settlement over a 10-year period, the boards 36 37 shall treat that situation as a complaint against the licensee or practitioner and shall initiate a review 38 consistent with Title 32, sections 3282 to 3289. 39

Page 4-L.D. 2400

1 2	Sec. 11. 24 MRSA c. 21, sub-c. IV, as amended, is repealed.
3 4	Sec. 12. 24 MRSA c. 21, sub-c. IV-A is enacted to read:
5	SUBCHAPTER IV-A
6	MANDATORY PRELITIGATION SCREENING AND MEDIATION PANELS
7	§2851. Purpose and definitions
8 9	1. Purpose. The purpose of mandatory prelitigation screening and mediation panels is:
10 11 12 13	A. To identify claims of professional negligence which merit compensation and to encourage early resolution of those claims prior to commencement of a lawsuit; and
14 15 16	B. To identify claims of professional negligence and to encourage early withdrawal or dismissal of nonmeritorious claims.
17 18 19 20 21 22 23 24	2. Definitions. As used in this subchapter, un- less the context otherwise indicates, the following terms have the following meanings. The definition of a "claim of professional negligence" is limited to any written notice of claim served pursuant to sec- tion 2903 against health care practitioners and health care providers or any employee or agent acting within the scope of their authority.
25	§2852. Formation and procedure
26 27 28 29 30 31 32 33 34 35	1. Creation of panel lists. The Chief Justice of the Superior Court shall recommend to the clerk of each judicial region of the Superior Court the names of retired judges and persons with judicial experi- ence who are residents of the region to serve on screening panels under this subchapter. The clerk in each judicial region shall place these names on a list from which the Chief Justice of the Superior Court will choose a panel chairman under subsection 2.

1	The clerk of each judicial region of the Superior
2	Court shall maintain lists of health care practition-
3	ers, health care providers and attorneys recommended
4	by the professions involved to serve on screening
5	panels under this subchapter.
6	2. Selection of panel members; compensation.
7	Screening panel members shall be selected as follows.
8 9 10 11 12 13 14 15 16 17 18 19 20 21	A. Upon receipt of a notice of claim under sec- tion 2853, the clerk of the Superior Court who receives the notice shall notify the Chief Jus- tice of the Superior Court. The Chief Justice shall choose a retired judge or person with judi- cial experience from the list maintained by the clerk to serve as chairman of the panel to screen the claim. The Chief Justice shall attempt to choose a chairman who is a resident of the judi- cial region in which the notice of claim was filed. If no resident chairman is available or appropriate, the Chief Justice shall choose a chairman from the lists maintained by clerks of
22 23 24 25 26 27 28 29 30	other judicial regions. B. Upon notification of the Chief Justice's choice of chairman, the clerk who received the notice of claim under section 2853 shall notify that person and provide that person with the clerk's lists of health care practitioners, health care providers and attorneys created under subsection 1. The chairman shall choose from those lists 2 or 3 additional panel members as follows:
31 32 33 34 35 36	(1) The chairman shall choose one attorney; (2) The chairman shall choose one health care practitioner. If possible, the chairman shall choose a practitioner who practices in the specialty or profession of the person accused of professional negligence; and
37	(3) Where the claim involves more than one
38	person accused of professional negligence
39	the chairman may choose a 4th panel member
40	who is a health care practitioner or health
41	care provider. If possible, the chairman

Page 6-L.D. 2400

1	shall choose a practitioner or provider in
2	the specialty or profession of a person ac-
3	cused.
4	The Chief Justice of the Superior Court shall es-
5	tablish the compensation of the panel chairman.
6	Other panel members shall serve without compensa-
7	tion or payment of expenses. No uncompensated
8	panel member may serve on a panel more than once
9	a year without his consent.
10	The clerk of the Superior Court in the judicial
11	region in which the notice of claim is filed un-
12	der section 2853 shall, with the consent of the
13	Chief Justice of the Superior Court, provide
14	clerical and other assistance to the panel chair-
15	man.
16	3. Challenges; replacements. If any panel mem-
17	ber other than the chairman is unable or unwilling to
18	serve in any matter or is challenged for cause by any
19	person who is a party to a proceeding before a panel,
20	the party challenging the member shall request a re-
21	placement from the lists maintained by the clerk un-
22	der subsection 1, chosen by the chairman who shall so
23	notify the parties. There shall only be challenges
24	for cause allowed. The chairman shall inquire as to
25	any bias on the part of a panel member or as re-
26	quested by any party.
27	4. Experts; costs. If at least half of the pan-
28	el members so request, the chairman shall draw upon a
29	pool of experts in the field or fields involved to
30	assist the panel in its determination of the health
31	care standards involved, the negligence and
32	causation. The chairman shall apportion costs of the
33	expert among the parties as he sees fit.
34 35 36	5. Subpoena power. The panel, through the chairman, shall have the same subpoena power as ex- ists for a Superior Court Judge.
37 38	6. Discovery. The chairman, upon application of a party, may permit reasonable discovery.
39	§2853. Submission of claims

1. Notice of claim; filing fee. Any person serving a notice of claim of professional negligence 1 2 3 pursuant to section 2903 shall also serve a copy upon 4 the clerk of the Superior Court in the judicial re-5 gion where a complaint based on the claim would be 6 filed within 10 days of serving the notice of claim 7 under section 2903, with ordinary mail notice of ser-8 vice to the person or persons accused of professional negligence in the notice. At the time of filing the 9 notice, the claimant shall also pay to the clerk a 10 11 filing fee of \$200 per notice filed.

12 2. Appearance; filing fee. Within 20 days of receipt of notice of service upon the clerk, the per-13 14 son or perons accused of professional negligence in 15 the notice or his representative shall file an ap-16 pearance before the panel with a copy to the com-17 plainant. At the time of filing an appearance, the 18 person or persons accused of professional negligence 19 in the notice shall each pay a filing fee of \$200 per 20 notice filed.

3. Waiver. Any party may, at the time of filing, apply to the chairman of the panel for a waiver of the filing fee. The chairman shall grant the waiver if the party is indigent. In determining indigency of the party, the chairman shall consider the factors contained in the Maine Rules of Criminal Procedure, Rule 44(b).

28 4. Filing of records; time for hearing; exten-29 sions. Within 20 days of entry of appearance, the 30 person or persons accused shall contact the claimant's counsel and by agreement shall designate a 31 32 timetable for filing all the relevant medical and 33 provider records necessary to a determination of the 34 panel and for completing discovery. If the parties 35 are unable to agree on a timetable within 60 days of the entry of appearance, the claimant shall notify 36 the chairman of the panel. The chairman shall then 37 38 establish a timetable for the filing of all relevant records and reasonable discovery, which shall be 39 40 filed at least 30 days before any hearing date. The 41 hearing shall not be later than 120 days from the 42 service of the notice of claim upon the panel.

5. Lawsuits. The pretrial screening may be by-1 2 passed if all parties agree upon a resolution of the claim by lawsuit. All parties to a claim may, by 3 4 written agreement, submit a claim to the binding de-5 termination of the panel, either prior to or after 6 the commencement of a lawsuit. Both parties may 7 agree to bypass the panel and commence a lawsuit for any reason, or may request that certain preliminary 8 9 legal affirmative defenses or issues be litigated prior to submission of the case to the panel. The panel has no jurisdiction to hear or decide, absent 10 11 12 the agreement of the parties, dispositive legal af-13 firmative defenses, except comparative negligence.

14 6. Combining hearings. Except as otherwise pro-15 vided in this subsection, there shall be one combined 16 hearing or hearings for all claims under this section arising out of the same set of facts. Where there is 17 more than one person accused of professional negli-18 gence against whom a notice of claim has been filed 19 based on the same facts, the parties may, upon agree-20 21 ment of all parties, require that hearings be separated. The chairman may, for good cause, order sepa-22 23 rate hearings.

24	7	•	Exte	nsions	of	time.	A11	requ	lests	for	ex	ten-
25	sion	of	time	under	this	subch	apte	r sha	all be	∋ m	ade	to
26	the	pan	el c	hairma	n. The	chai	rman	may	exter	nd a	ny	time
27	perio	du	nder	this	subcha	pter	for	good	cause	э.		

28 §2854. Hearing

1. Procedure. The claimant or a representative 29 of the claimant shall present the case before the panel. The person accused of professional negligence 30 31 32 or his representative shall make a responding presen-33 tation. Wide latitude shall be afforded the parties 34 by the panel in the conduct of the hearing including, 35 but not limited to, the right of examination and cross-examination by attorneys. The chairman shall make all procedural rulings and his rulings shall be 36 37 38 final. A tape recorded record shall be maintained by the panel for its purpose only. The record shall be 39 40 maintained until 30 days after its decision and then destroyed pursuant to section 2856. The record shall 41 not be made public and the hearings are not to be 42 43 public without the consent of both or all parties.

1 The Maine Rules of Evidence shall not apply, but the 2 panel shall make such findings upon such evidence as 3 is presented at the hearing, the records and any ex-4 pert opinions provided by or sought by the panel or 5 the parties.

6 After presentation by the parties, as provided in 7 this section, the panel may request from either party additional facts, records or other information to be 8 9 submitted in writing or at a continued hearing, which 10 continued hearing shall be held as soon as possible. The continued hearings shall be attended by the same 11 12 members of the panel who have sat on all prior hearings in the same claim, unless otherwise agreed by 13 14 all parties.

15 2. Settlement; mediation. The chairman of the panel shall explore whether possibilities of settlement exist and attempt to mediate the differences of the parties before proceeding to findings if such possibilities are found to exist.

3. Failure to comply. Failure of a party, without good cause, to attend a properly scheduled hearing to participate in authorized discovery, or to otherwise substantially comply with this subchapter,
shall result in a finding against that party and that finding shall have the same effect as a finding against that party under section 2857.

27 §2855. Findings by panel

28 At the conclusion of the presentations, the panel 29 shall make its findings in writing within 30 days by 30 answering the following questions:

31 1. Negligence. Whether there is a reasonable 32 medical or professional probability that the acts or 33 omissions complained of or found by the panel to ex-34 ist, or as agreed by the parties, constitute a devia-35 tion from the applicable standard of care by the 36 health care practitioner or health care provider 37 charged with that care; and

38	2.	Caus	ation.	Whe	ther	there	is	а	rea	sonal	ole
39	medical	or	professi	onal	prob	babilit	y th	at	the	acts	or
40	omission	s cc	mplained	of	proxi	Imately	cau	sec	l the	e inju	ıry

1 <u>complained of or as found by the panel or as agreed</u> 2 by the parties.

3 §2856. Notification and effect of findings

The panel's findings, signed by the panel mem-4 5 bers, indicating their vote, shall be served by reg-6 istered or certified mail on the parties within 7 days of the date of the findings. The findings and 7 8 the notice of claim and the record of the hearing shall be preserved until 30 days after final judgment 9 or the case is finally resolved, after which time it 10 shall be destroyed. All medical and provider records 11 12 shall be returned to the party providing them to the 13 panel.

14 §2857. Confidentiality and admissibility

15 1. Proceedings before panel confidential. Except as otherwise provided in this section and section 16 2858, all proceedings before the panel, including its final determinations, shall be treated in every re-17 18 spect as private and confidential by the panel and 19 the parties to the claim. No findings or other writ-20 ings of the panel, nor any evidence or statements 21 22 made by any party or his representative during a panel hearing may be admissible or otherwise submit-23 24 ted or used in any way for any purpose in any subsequent court action or any other public disclosure made, unless otherwise agreed by the party who made 25 26 27 the statement or presented the evidence. If the 28 findings of the panel are:

A. As to both questions under section 2855, unanimous and unfavorable to the person accused of professional negligence, the findings, without explanation, shall be admissible in any subsequent court action for professional negligence against that person by the claimant based on the same set of facts upon which the notice of claim was filed; and

37	B. As to	either	question	under	section	2855,
38	unanimous	and u	nfavorable	to the	e claiman	it, the
39	findings,	without	explanatio	on, shal	l be ad	lmissi-
40	ble in a	any sub	sequent cou	irt acti	on for p	rofes-
41	sional neo	gligence	against th	ne perso	n accus	ed of

Page 11-L.D. 2400

professional negligence by the claimant based on 2 the same set of facts upon which the notice of claim was filed.

4 Under paragraphs A and B, the findings shall be ad-5 missible only against the party against whom they were made. The confidentiality provisions of this 6 7 section do not apply if the findings were influenced 8 by fraud.

9 2. Deliberations, discussions and testimony privileged and confidential. The deliberations and 10 11 discussion of the panel and the testimony of any ex-12 pert, whether called by any party or the panel, shall be privileged and confidential, and no such person 13 14 may be asked or compelled to testify at a later court 15 proceeding concerning the deliberations, discussions, findings or expert testimony or opinions expressed 16 17 during the panel hearing, unless by the party who called and presented that nonparty expert, except 18 such deliberation, discussion and testimony as may be 19 20 required to prove an allegation of fraud.

21 §2858. Effect of findings by panel

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22 A finding by the panel of any claim under this 23 subchapter shall be implemented as follows.

24 1. Payment of claim; determination of damages. 25 If the findings of the panel as to section 2855, subsections 1 and 2 are in the affirmative, the person 26 27 accused of professional negligence must promptly en-28 ter into negotiations to pay the claim or admit liability. If liability is admitted, the claim may be 29 30 submitted to the panel, upon agreement of the claimant and person accused, for determination of damages. 31 If suit is brought to enforce the claim, the findings 32 of the panel are admissible as provided in section 33 34 2857.

2. Release of claim without payment. If the 35 findings of the panel as to either section 2855, sub-36 section 1 or 2, are in the negative, the claimant 37 must release the claim or claims based on the find-38 ings without payment or be subject to the admissibil-39 40 ity of those findings under section 2857, subsection 41 1, paragraph B.

1 §2859. Statute of limitations

2 The applicable statute of limitations concerning actions for professional negligence shall be tolled 3 4 from the date upon which notice of claim is served 5 until 30 days following the day upon which the claimant receives notice of the findings of the panel pur-6 7 suant to section 2856 or 175 days after service of the notice of claim pursuant to section 2903, which-ever first occurs. After the passage of 175 days, 8 9 10 the claimant may bring suit if the panel has not rendered a decision but after the claimant's filing of a 11 complaint, all further proceedings in the case shall 12 be stayed until a decision of the panel is made. 13

14 Sec. 13. 24 MRSA §2902, as enacted by PL 1977, 15 c. 492, §3, is repealed and the following enacted in 16 its place:

17§2902. Statute of limitations for health care18providers and health care practitioners

19 Actions for professional negligence shall be com-20 menced within 3 years after the cause of action ac-21 crues. For the purposes of this section, a cause of 22 action accrues on the date of the act or omission 23 giving rise to the injury. Notwithstanding the provisions of Title 14, section 853, relating to minori-24 25 ty, actions for professional negligence by a minor 26 shall be commenced within 6 years after the cause of action accrues or within 3 years after 27 the minor 28 reaches the age of majority, whichever first occurs. This section does not apply where the cause of action is based upon the leaving of a foreign object in the 29 30 31 body, in which case the cause of action shall accrue 32 when the plaintiff discovers or reasonably should have discovered the harm. For the purposes of this 33 section, the term "foreign object" does not include a chemical compound, prosthetic aid or object inten-tionally implanted or permitted to remain in the 34 35 36 37 patient's body as a part of the health care or professional services. 38

39	If the	provision	in this	section	reducing	the
40	time allowed	for a mino	r to bring	g a claim	n is found	d to
41	be void or o	therwise in	validated	by a co	art of pro	oper
42	jurisdiction	, then the	statute	of lim	itations	for

1 2 3 4	professional negligence shall be 2 years after the cause of action accrues, except that no claim present under the 3-year statute may be extinguished by the operation of this paragraph.
5 6 7	Sec. 14. 24 MRSA §2903, as enacted by PL 1977, c. 492, §3, is repealed and the following enacted in its place:
8	§2903. Notice of claim before suit
9 10 11	1. Commencement of action. No action for profes- sional negligence may be commenced until the plain- tiff has:
12 13 14 15 16 17	A. Served written notice of claim setting forth, under oath, the professional negligence alleged and the nature and circumstances of the injuries and damages alleged, personally or by registered or certified mail upon the person accused of pro- fessional negligence;
18 19	B. Complied with the provisions of subchapter IV-A; and
20 21	C. Determined that the time periods provided in section 2859 have expired.
22 23 24	2. Statute of limitations. Any applicable stat- ute of limitations shall be tolled under section 2859.
25	Sec. 15. 24 MRSA §2903-A is enacted to read:
26	§2903-A. Notice of expert witnesses
27 28 29 30 31 32 33 34 35	1. Plaintiff to supply list; 90 days. Every plaintiff in an action for professional negligence shall, within 90 days of the filing of the complaint, serve upon the defendant, as provided in the Maine Rules of Civil Procedure, Rule 5, a list of the names of expert witnesses he intends to call at trial on the issues of liability and proximate causation, the subject matter on which each expert is expected to testify, the substance of the facts and opinions to
36 37	which each expert is expected to testify and a summa- ry of the grounds for each opinion.

Page 14-L.D. 2400

1 2. Defendant to supply list; 60 days. Within 60 days of receipt of the plaintiff's notice of 2 expert 3 witnesses, the defendant shall serve upon the plain-4 tiff a list of the expert witnesses he intends to 5 call at trial on the issues of liability and proximate causation, the subject matter on which each ex-6 pert is expected to testify, the substance of the 7 facts and opinions to which each expert is expected 8 9 to testify and a summary of the grounds for each 10 opinion. 3. Extension. The court may extend the time pe-riods established in this section or permit the addi-11 12 13 tion of names of expert witnesses to the list after the time periods established in this section have ex-14 15 pired only by motion upon a showing of good cause. Good cause includes: 16 17 A. Unavailability of complete, legible medical 18 records; 19 B. Joining of an additional party; or 20 C. Any other cause the court determines to re-21 quire extension or addition under this subsection 22 in the interest of justice. 23 Sec. 16. 24 MRSA c. 21, sub-c. VI and VII, are 24 enacted to read: 25 SUBCHAPTER VI 26 PROHIBITION OF CLAIMS BASED UPON WRONGFUL BIRTH AND WRONGFUL LIFE FOR BIRTH OF A 27 HEALTHY CHILD 28 29 §2931. Wrongful birth; wrongful life 30 1. Intent. It is the intent of the Legislature that the birth of a normal, healthy child does not 31 32 constitute a legally recognizable injury and that it 33 is contrary to public policy to award damages for the birth or rearing of a healthy child. 34 2. Birth of healthy child; claim for damages prohibited. No person may maintain a claim for re-35 36 37 lief or receive an award for damages based on the

Page 15-L.D. 2400

1 claim that the birth and rearing of a healthy child 2 resulted in damages to him. A person may maintain a 3 claim for relief based on a failed sterilization pro-4 cedure resulting in the birth of a healthy child and 5 receive an award of damages for the hospital and medical expenses incurred for the sterilization proce-6 dures and pregnancy, the pain and suffering connected with the pregnancy and the loss of earnings by the 7 8 9 mother during pregnancy.

10 3. Birth of unhealthy child; damages limited.
11 Damages for the birth of an unhealthy child born as
12 the result of professional negligence shall be lim13 ited to damages associated with the disease, defect
14 or handicap suffered by the child.

15 <u>4. Other causes of action. This section shall</u> 16 <u>not preclude causes of action based on claims that</u>, 17 <u>but for a wrongful act or omission, maternal death or</u> 18 <u>injury would not have occurred or handicap</u>, disease, 19 <u>defect or deficiency of an individual prior to birth</u> 20 would have been prevented, cured or ameliorated in a 21 <u>manner that preserved the health and life of the af-</u> 22 fected individual.

SUBCHAPTER VII

24

23

STRUCTURED AWARDS

25 §2951. Provision for structured awards

26 <u>1. Definition. As used in this subchapter, the</u> 27 term "health care services" means acts of diagnosis, 28 treatment, medical evaluation or advice or such other 29 acts as may be permissible under the health care li-30 censing, certification or registration laws of this 31 State.

32	2. Structured awards; periodic payments. In any
33	action for professional negligence, the court in
34	which the action is brought shall, at the request of
35	either party, enter a judgment ordering that money
36	damages or its equivalent for future damages of the
37	judgment creditor be paid in whole or in part by
38	periodic payments rather than by a lump-sum payment
39	if the award equals or exceeds \$250,000 in future
40	damages exclusive of litigation expenses, including,

Page 16-L.D. 2400

but not limited to, expert witness fees, attorneys'
fees and court costs.

A. In the case of a jury trial, prior to the 3 case being presented to the jury, the judge shall 4 5 make a preliminary determination as to whether or not a verdict is likely to result in an award for 6 7 future damages in excess of the threshold set out 8 in this subsection. If such a determination is made, the judge shall instruct the jury to appor-9 10 tion damages between past and future in those categories of damages required under this sub-11 12 chapter to be structured. In entering a judgment 13 ordering the payment of future damages by periodic payments, the court shall make a specif-14 15 ic finding as to the dollar amount of periodic payments which will compensate the judgment cred-16 17 itor for those future damages. In determining 18 the amount of the periodic payment, the court shall consider the amount of interest that would 19 20 be earned on the amount had it been paid present-21 ly. As a condition to authorizing periodic payments of future damages, the court must be satis-2.2 23 fied that there are adequate financial resources 24 available to the judgment debtor. If not so sat-25 isfied, the judge may either deny structuring the 26 award or require adequate security to be deposited with the court. Upon termination of 27 28 periodic payments of future damages, the court 29 shall order the return of the security, or so much as remains, to the judgment debtor. 30

B. The judgment ordering the payment of future damages by periodic payment shall specify the recipient or recipients of the payments, the dollar amount of the payments, the interval between payments and the number of payments or the period of time over which payments shall be made. The payments shall only be subject to modification in the event of death of the judgment creditor.

39C. In the event that the court finds that the40judgment debtor has exhibited a continuing pat-41tern of failing to make the payments, as speci-42fied in paragraph B, the court shall find the43judgment debtor in contempt of court and, in ad-44dition to the required periodic payments, shall

- order the judgment debtor to pay the judgment
 creditor all damages caused by the failure to
 make these periodic payments, including court
 costs and attorneys' fees.
- 5 D. Money damages awarded for loss of future earnings and loss of services shall not be re-6 7 duced or payments terminated by reason of the 8 death of the judgment creditor, but shall be paid to the judgment creditor's estate. In those 9 10 cases, the court which rendered the original judgment may, upon petition of any party in in-11 terest, modify the judgment to award and appor-12 13 tion the unpaid future damages in accordance with 14 this subchapter.
- 15 E. Following the occurrence or expiration of all 16 obligations specified in the periodic payment 17 judgment, any obligation of the judgment debtor 18 to make further payments shall cease and any se-19 curity given, pursuant to paragraph A shall re-20 vert to the judgment debtor.
- 21 F. As used in this section:
- 22(1) "Future damages" includes damages for23future medical treatment, care or custody,24loss of future earnings and loss of the eco-25nomic value of services.
- 26SUBCHAPTER VIII27CONTINGENT FEES
- 28 §8303. Contingent fees

29	1	. Lir	nitat	ion.	In	an	acti	on	for	pro	fessi	onal
30	negli	gence	, t.	he	tota	1	cont	inge	ent	fee	for	the
31	plain	tiff':	s att	orney	or	att	orney	'S S	shal	l no	t ex	ceed
32	the	follow	wing	amou	nts,	e	xclus	ive	of .	litig	atior	n ex-
33	pense	<u>s:</u>										
34	A	. The	irty-	three	and		ne-th	ird	pe	rcent	. of	the
35	f	irst :	\$100,	000 0	f tł	ne s	um re	COV	ered	<u>;</u>		

36B. Twenty-five percent of the next \$100,000 of37the sum recovered; and

1 C. Twenty percent of any amount over \$200,000 of 2 the sum recovered.

2. Future damages; lump-sum value. For purposes
 of determining any lump-sum contingent fee, any fu ture damages recoverable by the plaintiff in periodic
 installments shall be reduced to lump-sum value.

7 <u>3.</u> Review. The court may review contingent fee 8 agreements for fairness. In special circumstances, 9 where an attorney performs extraordinary services in-10 volving more than usual participation in time and ef-11 fort, the attorney may apply to the court for approv-12 al of additional compensation.

4. Definition. As used in this section, "contin gent fee" includes any fee arrangement under which
 the compensation is to be determined in whole or in
 part on the result obtained.

17

Sec. 17. 32 MRSA §2562-A is enacted to read:

18 §2562-A. Adequacy of budget

19 The budget submitted by the board to the Commissioner of Human Services shall be sufficient to en-20 21 able the board to comply with this subchapter. The fiscal resources available to the board should enable it to strengthen its staffing capabilities and those 22 23 of the Department of Attorney General's legal and in-24 vestigative staff so that complaints, including the professional liability related complaints detailed in 25 26 Title 24, section 2607, can be resolved in a timely 27 28 fashion, including the professional liability related 29 complaints. The board shall engage in a collabora-30 tive effort with the Board of Registration in Medicine so that the Department of Attorney General's le-gal and investigative staff resources can be shared. 31 32 33 At a minimum, staff resources shall be increased to include an additional staff member to handle 34 com-35 plaint processing and licensure problems, a full-time investigator and a full-time attorney, those staff 36 positions to be shared with the Board of Registration 37 38 in Medicine, if necessary.

39 Sec. 18. 32 MRSA §2581, 2nd ¶, as enacted by PL 40 1973, c. 374, §1, is amended to read:

1 Every osteopathic physician legally licensed to 2 practice in this State, shall, on or before the first 3 day of January of each year, pay to the secretary of 4 the board a fee as stipulated by the board not to ex-5 ceed \$25 \$125 for the renewal of his or her certifi-6 cate to practice. In addition to the payment of such 7 renewal fee, each licensee so applying for the renewof his or her certificate shall, commencing for 8 al 9 the year 1975 and thereafter, furnish to said board 10 satisfactory evidence that he or she has attended in 11 the year preceding at least 50 hours of educational 12 programs devoted to continuing medical education ap-13 proved by the board. Said required education must be 14 obtained from formalized programs of continuing medi-15 education cal sponsored by recognized associations, 16 colleges or universities, hospitals, institutes or 17 approved by the board. A copy of the current groups 18 approved list shall be available in the office of the 19 secretary of the board. At least 40% of these credit 20 must be osteopathic medical education approved hours 21 in the rules and regulations established by the The board shall have the authority to adjudi-2.2 board. 23 cate continuing medical education performance in sit-24 uations of illness, hardship or military service upon 25 written petition by the applicant. The secretary of 26 said board shall send a written notice of the forego-27 ing requirements to each such osteopathic physician, 28 at least 60 days prior to each said January 1st, directed to the last known address of the licensee en-29 30 closing therewith proper blank forms for application 31 said renewal. If any licensee shall fail to furfor 32 nish the board evidence of attendance at continuing 33 approved by the medical educational programs, as board, and fails to pay the said renewal fee, 34 he or 35 automatically forfeit his or her right to shall she 36 practice osteopathic medicine in this State and his 37 or her license, therefore, shall be cancelled. The 38 secretary of the board may reinstate him or her upon 39 the presentation of satisfactory evidence of continu-40 ing medical education as outlined and approved by the 41 board and upon payment of the renewal fee.

42 Sec. 19. 32 MRSA §3269, sub-§15 is enacted to 43 read:

44 <u>15. Adequacy of budget. The budget submitted by</u> 45 the board to the Commissioner of Human Services shall

1 be sufficient to enable the board to comply with this 2 subchapter. The fiscal resources available to the 3 board should enable it to strengthen its staffing ca-4 pabilities and those of the Department of the Attor-5 ney General's legal and investigative staff so that complaints, including the professional liability re-6 7 lated complaints detailed in Title 24, section 2607, 8 can be resolved in a timely fashion. The board shall 9 engage in a collaborative effort with the Board of 10 Osteopathic Examination and Registration so that the Department of Attorney General's legal and investiga-11 12 tive staff resources can be shared. At a minimum, 13 staffing resources shall be increased to include an additional staff member to handle complaint process-14 15 ing and licensure problems, a full-time investigator 16 and a full-time attorney.

17 Sec. 20. 32 MRSA §3280, first ¶, as amended by 18 PL 1983, c. 378, §50, is further amended to read:

On or before the first day of July, 1966, and 19 on 20 before the first day of July of every evenor 21 numbered year thereafter, every physician licensed 22 under this chapter shall apply to the Board of Regis-23 tration in Medicine for a certificate of biennial 24 registration on forms provided by the board. On or 25 before the first day of July, 1982, and on or before 26 the first day of July of every even-numbered year 27 any applicant actively practicing medithereafter, 28 cine in the State shall include satisfactory evidence 29 to the board that, in the preceding 2 years, the ap-30 plicant has completed a course of continuing medical 31 education as prescribed in the rules and regulations 32 of the board. The registration fee for residents of 33 this State and for nonresidents shall in no event exceed the sum of \$100 ± 250 . This section shall not ap-34 35 ply to interns or residents registered under section 36 3279 nor shall it apply to those holding temporary certificates for practice in hospitals or camps 37 as 38 provided in section 3277. The registration fees pro-39 vided for under this section shall not be required of any physician who is 70 years of age on the first day 40 41 of July of the year for which reregistration is made, 42 although the requirement of reregistration as pro-43 vided for shall apply without regard to age.

1 Sec. 21. Report. The Commission to Examine 2 Problems of Tort Litigation and Liability Insurance 3 in Maine shall examine medical and legal professional 4 liability, including, but not limited to, the issues 5 of statutes of limitations, discovery rules, contin-6 gent fees and caps on damage awards, and shall 7 present its findings on these issues in its report to 8 the 113th Legislature. The Superintendent of Insur-9 ance shall report to the 114th Legislature the impact 10 the provisions of this Act upon the premiums of 11 charged to the health care practitioners and health 12 providers covered by this Act.

13 Sec. 22. Effective date. Sections 3, 4, 5, 6, 14 7, 8, 9, 15, 16, except that part designated subchap-15 ter VIII, 17, 18, and 19, take effect 90 days after 16 adjournment of the session in which they are enacted 17 and apply to all notices of claim and claims filed on 18 or after that date. The application of these sec-19 tions shall not be prospective only, but apply to 20 claims arising prior to the effective date if action is commenced after that date. Sections 1, 2, 13 and 21 22 that part of section 16 designated subchapter VIII, 23 shall take effect on August 1, 1988, except that no 24 claims previously barred by the statute of limita-25 tions shall be revived by sections 1 and 13. Appli-26 cation of sections 1 and 13 shall not be prospective but will apply to any notice of claim or claim 27 only, 28 filed on or after August 1, 1988. The statute of 29 any suit commenced on or applicable to limitations after August 1, 1988, shall be the statute of limita-30 31 tions in effect when the claim is filed, and not the 32 statute in effect when the cause of action accrued. 33 Sections 11, 12 and 14 shall be effective on January 34 1, 1987, and shall apply to any notices of claim 35 filed after that date.

FISCAL NOTE

37 Registration fee increases specified in the new 38 draft will increase dedicated revenues to the Board 39 of Registration in Medicine by an undetermined amount 40 in fiscal year 1987. This amount will be used to increase staffing for the board as well as for the At-41 42 torney General's office. It should be noted that no 43 full-time positions can be employed until the new 44 revenue is allocated and position counts authorized 45 by the Legislature.

36

STATEMENT OF FACT

2 The new draft amends the definition section in 3 the current Maine Health Security Act by including a 4 definition of health care practitioner. The effect 5 of this change is to broaden the application of the 6 new provisions of the Act to all health care practi-7 tioners, and not just physicians as in the existing 8 law.

1

9 The new draft amends the Maine Health Security Act by requiring a plaintiff in a medical liability 10 11 suit to file a list of expert witnesses and the sub-12 stance of their testimony within 90 days from filing 13 suit. The result will be a more expeditious handling 14 of claims and less filing of frivolous suits. The 15 defendant would have to file the defendant's expert witness information within 60 days of receiving the 16 17 plaintiffs.

- 18 The new draft amends the existing statutes of 19 limitations applicable to medical malpractice actions 20 by:
- Eliminating the so-called "discovery rule" in
 all cases except "foreign object" surgical cases;
- 23 2. Reducing the long 20-year tail on minor's 24 claims to 6 years; and
- 25 3. Extending the present 2-year statute for oth-26 er than minors to 3 years.

The new draft has an effective date of August 1, 1988, for the changes in these statutes of limitations.

The new draft expands the current "discovery rule" in actions against attorneys by extending it to malpractice actions involving wills as well as title searches. The "discovery rule" will not apply in any other attorney malpractice actions. This change in this statute of limitations has an effective date of August 1, 1988, in the new draft. 1 The new draft eliminates claims for damages based 2 on the birth and rearing of a healthy child, but per-3 mits damages for medical expenses, pain and suffering 4 and lost earnings where a failed sterilization re-5 sults in the birth of a healty child.

6 While acknowledging that a child born with handi-7 caps, genetic defects or other illness should be able 8 to sue for any damages associated with the defect 9 caused by a physician's negligence, the new draft 10 eliminates the child's ability to claim damages just for being alive which would require the judge or jury 11 determine the difference in value between nonlife 12 to 13 and life with defects.

14 The new draft requires that any award for future 15 damages in a medical malpractice action equaling or 16 exceeding \$250,000 be paid in periodic payments upon 17 the request of either party. The court would make a 18 specific finding as to the dollar amount of periodic 19 payments which would compensate the creditor for fu-20 ture damages and any creditor not adequately insured 21 would be required to post adequate security. In the event of the death of the judgment creditor, 22 amounts the award still owed for future medical expenses, 23 of 24 care or custody would be paid to the judgment credi-25 tor's estate.

26 This new draft amends the provisions of the Maine 27 Health Security Act dealing with malpractice screen-28 ing panels by:

29

1. Making the use of the panels mandatory;

Including in panels one attorney member, one
or 2 health care practitioner or provider members and
one present or former member of the judiciary as panel chairman; and

34 3. Increasing the incentive not to proceed to 35 trial after screening, thus encouraging defendants to 36 settle in cases where negligence and causation is 37 found and by encouraging plaintiffs not to proceed 38 where the panel makes a finding against negligence 39 and causation.

The "Professional Prelitigation Mandatory Screen-1 2 ing Panels" mandate is to identify claims before suit 3 is brought which either merit compensation or not and 4 encourage early payment or withdrawal of those 5 claims. The mandatory nature of the process, the new 6 composition of the panels, headed bv an active-retired judge or justice, and supported by a 7 8 panel of experts, together with appropriate sanctions 9 and incentives will discourage bringing claims to 10 contrary to the findings of the panel. This court 11 will institute a reduction in both frequency and se-12 verity of the claims thereby reducing the cost to society of the current claims resolution process. 13

14 This new draft amends the language relating to 15 when a health care provider must report a physician's 16 name whose privileges have been revoked, suspended, 17 limited or terminated to the Board of Registration in 18 Medicine or the Board of Osteopathic Examination and Registration in order to broaden the 19 reporting re-20 The new draft also broadens the list of quirements. 21 persons whom the provider has to report by including 22 virtually any person in the facility providing health 23 care services.

This new draft provides a penalty provision for all professional liability insurers who do not report all claims and disposition of claims information to the Superintendent of Insurance.

28 The new draft requires the Board of Registration 29 in Medicine and the Board of Osteopathic Examination and Registration to conduct a review of any physician 30 31 in a 10-year period has 3 professional liability who 32 claims that have resulted in a judgment, award or 33 settlement.

34 new draft directs the Board of Registration The 35 in Medicine to develop an annual budget that will enable it to strengthen its staffing capabilities 36 and 37 those of the Department of the Attorney General's le-38 and investigative staff, so that complaints, ingal 39 cluding professional liability related complaints, 40 can be resolved in a timely fashion. The new draft 41 directs the Board of Registration in Medicine to en-42 collaborative effort with the Board of qaqe in a 43 Osteopathic Examination and Registration so that the

Department of the Attorney General's legal and investigative staff resources can be shared. Finally, the new draft raises the ceiling for the biennial reregistration fee from \$100 to \$250.

5 The new draft directs the Board of Osteopathic 6 Examination and Registration to develop an annual 7 budget that will enable it to strengthen its staffing 8 capabilities and those of the Department of the At-9 torney General's legal and investigative staff, so that complaints including professional liability re-10 11 lated complaints, can be resolved in a timely fash-The new draft directs the Board of Osteopathic 12 ion. 13 Examination and Registration to engage in a collabo-14 rative effort with the Board of Registration in Medi-15 cine so that Department of the Attorney General's le-16 gal and investigative staff resources can be shared. 17 The new draft raises the ceiling for the initial req-18 istration and the annual reregistration fee from \$25 19 to \$125.

20 The new draft establishes a contingent fee sched-21 ule for plaintiff's attorneys in medical malpractice 22 actions. The new draft establishes an August 1, 1988, 23 effective date for this provision.

2.4 This new draft requires the Superintendent of In-25 surance to report to the 114th Legislature on the impact of the provisions of the Act upon premiums 26 27 charged to health care practitioners and health care 28 providers. The Commission to Examine Problems of Tort Litigation and Liability Insurance in Maine must un-29 30 der the new draft, study issues of medical and legal 31 professional liability and report to the 113th Legis-32 lature.

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