WEST VIRGINIA LEGISLATURE

2022 REGULAR SESSION

Introduced

Senate Bill 25

BY SENATORS TAKUBO, STOLLINGS, AND MARONEY

[Introduced January 12, 2022; referred

to the Committee on The Judiciary]

A BILL to amend and reenact §55-7B-6 of the Code of West Virginia, 1931, as amended, relating
 to the prerequisites for filing suit against a health care provider under the Medical
 Professional Liability Act; modifying the time frame for providing a statement of intent to
 provide a screening certificate of merit; updating the tolling of the statute of limitations
 applicable to a cause of action against a nursing home, assisted living facility, or their
 related entities or employees; and clarifying that a health care provider who executes a
 screening certificate of merit shall be subject to deposition upon request.

Be it enacted by the Legislature of West Virginia:

ARTICLE 55. ACTIONS, SUITS AND ARBITRATION; JUDICIAL SALE.

§55-7B-6. Prerequisites for filing an action against a health care provider; procedures; sanctions.

(a) Notwithstanding any other provision of this code, no person may file a medical
 professional liability action against any health care provider without complying with the provisions
 of this section.

4 (b) At least 30 days prior to the filing of a medical professional liability action against a 5 health care provider, the claimant shall serve by certified mail, return receipt requested, a notice 6 of claim on each health care provider the claimant will join in litigation. For the purposes of this 7 section, where the medical professional liability claim against a health care facility is premised 8 upon the act or failure to act of agents, servants, employees, or officers of the health care facility, 9 such agents, servants, employees, or officers shall be identified by area of professional practice 10 or role in the health care at issue. The notice of claim shall include a statement of the theory or 11 theories of liability upon which a cause of action may be based, and a list of all health care 12 providers and health care facilities to whom notices of claim are being sent, together with a 13 screening certificate of merit. The screening certificate of merit shall be executed under oath by 14 a health care provider who:

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(1) Is qualified as an expert under the West Virginia rules of evidence;

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(2) Meets the requirements of §55-7B-7(a)(5) and §55-7B-7(a)(6) of this code; and

(3) Devoted, at the time of medical injury, 60 percent of his or her professional time
annually to the active clinical practice in his or her medical field or specialty, or to teaching in his
or her medical field or specialty in an accredited university.

20 If the health care provider executing the screening certificate of merit meets the 21 gualifications of subdivisions (1), (2), and (3) of this subsection, there shall be a presumption that 22 the health care provider is qualified as an expert for the purpose of executing a screening 23 certificate of merit. The screening certificate of merit shall state with particularity, and include: (A) 24 The basis for the expert's familiarity with the applicable standard of care at issue; (B) the expert's 25 qualifications; (C) the expert's opinion as to how the applicable standard of care was breached; (D) the expert's opinion as to how the breach of the applicable standard of care resulted in injury 26 27 or death; and (E) a list of all medical records and other information reviewed by the expert 28 executing the screening certificate of merit. A separate screening certificate of merit must be 29 provided for each health care provider against whom a claim is asserted. The health care provider 30 signing the screening certificate of merit shall have no financial interest in the underlying claim, 31 but may participate as an expert witness in any judicial proceeding. Nothing in this subsection 32 limits the application of Rule 15 of the Rules of Civil Procedure. No challenge to the notice of claim may be raised prior to receipt of the notice of claim and the executed screening certificate 33 34 of merit.

35 (c) Notwithstanding any provision of this code, if a claimant or his or her counsel believes 36 that no screening certificate of merit is necessary because the cause of action is based upon a 37 well-established legal theory of liability which does not require expert testimony supporting a 38 breach of the applicable standard of care, the claimant or his or her counsel shall file a statement 39 specifically setting forth the basis of the alleged liability of the health care provider in lieu of a 36 screening certificate of merit. The statement shall be accompanied by the list of medical records 39 and other information otherwise required to be provided pursuant to subsection (b) of this section.

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42 (d) Except for medical professional liability actions against a nursing home, assisted living 43 facility, their related entities or employees, or a distinct part of an acute care hospital providing 44 intermediate care or skilled nursing care or its employees, if a claimant or his or her counsel has 45 insufficient time to obtain a screening certificate of merit prior to the expiration of the applicable 46 statute of limitations, the claimant shall comply with the provisions of subsection (b) of this section 47 except that the claimant or his or her counsel shall furnish the health care provider with a 48 statement of intent to provide a screening certificate of merit within 60 days of the date the health 49 care provider receives the notice of claim. The screening certificate of merit shall be accompanied 50 by a list of the medical records otherwise required to be provided pursuant to subsection (b) of 51 this section.

52 (e) In medical professional liability actions against a nursing home, assisted living facility, 53 their related entities or employees, or a distinct part of an acute care hospital providing 54 intermediate care or skilled nursing care or its employees, if a claimant or his or her counsel has 55 insufficient time to obtain a screening certificate of merit prior to the expiration of the applicable 56 statute of limitations, the claimant shall comply with the provisions of subsection (b) of this section 57 except that the claimant or his or her counsel shall furnish the health care provider with a 58 statement of intent to provide a screening certificate of merit within 180 60 days of the date the 59 health care provider receives the notice of claim.

60 (f) Any health care provider who receives a notice of claim pursuant to the provisions of 61 this section may respond, in writing, to the claimant or his or her counsel within 30 days of receipt 62 of the claim or within 30 days of receipt of the screening certificate of merit if the claimant is 63 proceeding pursuant to the provisions of subsection (d) or (e) of this section. The response may 64 state that the health care provider has a bona fide defense and the name of the health care 65 provider's counsel, if any.

(g) Upon receipt of the notice of claim or of the screening certificate of merit, if the claimant
is proceeding pursuant to the provisions of subsection (d) or (e) of this section, the health care

68 provider is entitled to prelitigation mediation before a qualified mediator upon written demand to69 the claimant.

(h) If the health care provider demands mediation pursuant to the provisions of subsection (g) of this section, the mediation shall be concluded within 45 days of the date of the written demand. The mediation shall otherwise be conducted pursuant to Rule 25 of the Trial Court Rules, unless portions of the rule are clearly not applicable to a mediation conducted prior to the filing of a complaint or unless the Supreme Court of Appeals promulgates rules governing mediation prior to the filing of a complaint. If mediation is conducted, the claimant may depose the health care provider before mediation or take the testimony of the health care provider during the mediation.

77 (i)(1) Except for medical professional liability actions against a nursing home, assisted living facility, their related entities or employees, or a distinct part of an acute care hospital 78 79 providing intermediate care or skilled nursing care or its employees, and except as otherwise 80 provided in this subsection, any statute of limitations applicable to a cause of action against a 81 health care provider upon whom notice was served for alleged medical professional liability shall 82 be tolled from the date of mail of a notice of claim to 30 days following receipt of a response to 83 the notice of claim, 30 days from the date a response to the notice of claim would be due, or 30 84 days from the receipt by the claimant of written notice from the mediator that the mediation has 85 not resulted in a settlement of the alleged claim and that mediation is concluded, whichever last 86 occurs.

(2) In medical professional liability actions against a nursing home, assisted living facility, their related entities or employees, or a distinct part of an acute care hospital providing intermediate care or skilled nursing care or its employees, except as otherwise provided in this subsection, any statute of limitations applicable to a cause of action against a health care provider upon whom notice was served for alleged medical professional liability shall be tolled 180 <u>30</u> days from the date of mail of a notice of claim to 30 days following receipt of a response to the notice of claim, 30 days from the date a response to the notice of claim would be due, or 30 days from

94 the receipt by the claimant of written notice from the mediator that the mediation has not resulted95 in a settlement of the alleged claim and that mediation is concluded, whichever last occurs.

96 (3) If a claimant has sent a notice of claim relating to any injury or death to more than one 97 health care provider, any one of whom has demanded mediation, then the statute of limitations 98 shall be tolled with respect to, and only with respect to, those health care providers to whom the 99 claimant sent a notice of claim to 30 days from the receipt of the claimant of written notice from 100 the mediator that the mediation has not resulted in a settlement of the alleged claim and that 101 mediation is concluded.

102 (i) Notwithstanding any other provision of this code, a notice of claim, a health care 103 provider's response to any notice claim, a screening certificate of merit, and the results of any 104 mediation conducted pursuant to the provisions of this section are confidential and are not 105 admissible as evidence in any court proceeding unless the court, upon hearing, determines that 106 failure to disclose the contents would cause a miscarriage of justice: Provided, That the health 107 care provider who executes a screening certificate of merit shall be subject to a deposition 108 pursuant to the West Virginia Rules of Civil Procedure if requested by the health care provider or 109 providers whose care is the subject of the notice of claim.

> NOTE: The purpose of this bill is to update provisions of the Medical Professional Liability Act to clarify that a health care provider who executes a screening certificate of merit shall be subject to a deposition and that the certain time frames applicable to most health care providers shall be the same for a nursing home, assisted living facility, and their related entities.

> Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.