## 2006 SESSION

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## HOUSE JOINT RESOLUTION NO. 183

AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the Senate Committee on Rules on February 24, 2006)

(Patrons Prior to Substitute—Delegates Athey and Hamilton [HJR 50])

Continuing the Joint Subcommittee to Study Risk Management Plans for Physicians and Hospitals. Report.

8 WHEREAS, Senate Bill No. 601 (2004) established the Joint Subcommittee to Study Risk
9 Management Plans for Physicians and Hospitals, and it was continued by SJR 394 and HJR 704 (2005);
10 and

WHEREAS, access to quality health care by the citizens of the Commonwealth has been identified
by the joint subcommittee as being of paramount importance, and medical malpractice issues play a
significant role in the availability and quality of health care; and

14 WHEREAS, medical malpractice issues arise from a variety of factors, and the joint subcommittee 15 found that the complexity and scope of its work made it difficult to complete its work in two years and 16 has identified issues that merit further and more in-depth study; now, therefore, be it

17 RESOLVED by the House of Delegates, the Senate concurring, That the Joint Subcommittee to Study Risk Management Plans for Physicians and Hospitals be continued. The joint subcommittee shall 18 19 have a total membership of eight legislative members. Members shall be appointed as follows: five 20 members of the House of Delegates to be appointed by the Speaker of the House of Delegates in 21 accordance with the principles of proportional representation contained in the Rules of the House of 22 Delegates and three members of the Senate to be appointed by the Senate Committee on Rules. The 23 current members appointed by the Speaker of the House of Delegates shall be subject to reappointment. 24 The current members appointed by the Senate Committee on Rules shall serve until replaced. The joint 25 subcommittee shall elect a chairman and vice chairman from among its membership.

In conducting its study, the joint subcommittee shall study the general medical malpractice situation 26 27 in the Commonwealth and focus on the issues it deems most urgent, which may include: (i) the 28 effectiveness of the current statutory framework of medical malpractice panels and whether the current 29 framework should be amended to enhance efficiency or be eliminated and replaced with other procedural 30 vehicles such as pre-trial certification of expert witnesses to reduce nonmeritorious claims or effectively 31 evaluate claims; (ii) the feasibility of establishing a multijurisdictional pilot health court and 32 subsequently a system of health courts in the Commonwealth; (iii) the breadth and impact of the risk management program established by SB 601, and (iv) effective peer review processes. 33

34 Administrative staff support shall continue to be provided by the Office of the Clerk of the House of 35 Delegates. Legal, research, policy analysis, and other services as requested by the joint subcommittee shall continue to be provided by the Division of Legislative Services. Technical assistance shall be 36 37 provided by the State Corporation Commission, the Secretary of Health and Human Resources, the 38 Department of the Treasury, and the Office of the Executive Secretary of the Supreme Court. All 39 agencies of the Commonwealth shall provide assistance to the joint subcommittee for this study, upon 40 request. The joint subcommittee shall provide opportunities for the participation of the Medical Society 41 of Virginia, the Virginia Trial Lawyers Association, the Virginia Association of Defense Attorneys, representatives of medical malpractice liability insurance carriers, the Virginia Hospital and Healthcare 42 43 Association, and other interested parties or entities affected by the study. The joint subcommittee may request that the above-named groups and organizations meet and determine whether the solutions to the 44 issues herein can be achieved through collaborative problem solving and report to the joint 45 subcommittee on or before September 30, 2006. 46

The joint subcommittee shall be limited to four meetings for the 2006 interim, and the direct costs of
this study shall not exceed \$4800. Approval for unbudgeted nonmember-related expenses shall require
the written authorization of the chairman of the joint subcommittee and the respective Clerk. If a
companion joint resolution of the other chamber is agreed to, written authorization of both Clerks shall
be required.

No recommendation of the joint subcommittee shall be adopted if a majority of the House members
or a majority of the Senate members of the joint subcommittee (i) vote against the recommendation and
(ii) vote for the recommendation to fail notwithstanding the majority vote of the joint subcommittee.

55 The joint subcommittee shall complete its meetings by November 30, 2006, and the chairman shall submit to the Division of Legislative Automated Systems an executive summary of its findings and recommendations no later than the first day of the 2007 Regular Session of the General Assembly. The executive summary shall state whether the joint committee intends to submit to the General Assembly and the Governor a report of its findings and recommendations for publication as a House or Senate

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- document. The executive summary and report shall be submitted as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents and reports and 61 shall be posted on the General Assembly's website. 62

63 Implementation of this resolution is subject to subsequent approval and certification by the Joint Rules Committee. The Committee may approve or disapprove expenditures for this study, extend or delay the period for the conduct of the study, or authorize additional meetings during the 2006 interim. 64

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