

February 26, 2009

H 332. MEDICAL MALPRACTICE SETTLEMENT REPORTS. Filed 2/26/09. *TO PROVIDE FOR THE REPORTING OF DETAILS OF SETTLEMENTS OF MEDICAL MALPRACTICE CLAIMS.*

Enacts new GS 90-21.19 requiring the insurer in reporting a claim under GS 58-2-170 (Annual statements by professional liability insurers; medical malpractice claim reports) to identify the amount of the settlement that is attributable to economic damages and provide substantiating documentation in medical malpractice actions where the parties agree to settle the claim. Also requires when the parties agree to settle that the plaintiff's attorney report the settlement to the Department of Insurance. Requires the report to include a certification and documentation of the amount of the settlement proceeds received in reimbursement of costs incurred in prosecuting the case. Provides that a medical malpractice action is settled if at any time after the claim is made and before, during, or after trial, the parties mutually agree to end the litigation in exchange for a monetary payment. Defines *economic damage* as damages to compensate for present and future medical costs, hospital costs, custodial care, rehabilitation costs, lost earnings, loss of bodily function, and other pecuniary damages. Defines *insurer* as every insurer, self-insurer, and risk retention group, as defined in GS Chapter 58 (Insurance), that provides professional malpractice insurance to health care providers in the state. Effective for settlements of medical malpractice actions entered into on or after October 1, 2009.

Intro. by England.

GS 90