

HOUSE BILL No. 4490

March 11, 1993, Introduced by Reps. Bennane, Wallace, Harrison, Dobronski, Kilpatrick, Scott, Schroer, Murphy, Stallworth, DeMars, Gubow, Jondahl, Gire and Richard A. Young and referred to the Committee on Judiciary.

A bill to amend sections 1483, 2912a, 5040, 5856, and 6013 of Act No. 236 of the Public Acts of 1961, entitled as amended "Revised judicature act of 1961," section 1483 as added by Act No. 178 of the Public Acts of 1986

and section 6013 as amended by Act No. 50 of the Public Acts of 1987, being sections 600.1483, 600.2912a, 600.5040, 600.5856, and 600.6013 of the Michigan Compiled Laws; to add sections 2912f and 2912g; and to repeal certain parts of the act.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

Section 1. Sections 1483, 2912a, 5040, 5856, and 6013 of 2 Act No. 236 of the Public Acts of 1961, section 1483 as added by 3 Act No. 178 of the Public Acts of 1986 and section 6013 as 4 amended by Act No. 50 of the Public Acts of 1987, being sections 5 600.1483, 600.2912a, 600.5040, 600.5856, and 600.6013 of the

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- 1 Michigan Compiled Laws, are amended and sections 2912f and 2912g
- 2 are added to read as follows:
- 3 Sec. 1483. (1) In an action for damages alleging medical
- 4 malpractice BY OR against a person or party, specified in sec-
- 5 tion 5838a, damages for noneconomic loss which exceeds
- 6 \$225,000.00 shall not be awarded unless 1 or more of the follow-
- 7 ing circumstances exist:
- 8 (a) There has been a death.
- 9 (b) There has been an intentional tort.
- 10 (c) A foreign object was wrongfully left in the body of the
- II patient.
- 12 (d) The injury involves the reproductive system of the
- 13 patient.
- (e) The discovery of the existence of the claim was pre-
- 15 vented by the fraudulent conduct of a health care provider.
- 16 (f) A limb or organ of the patient was wrongfully removed.
- 17 (g) The patient has lost a vital bodily function. SHALL NOT
- 18 EXCEED \$350,000.00 UNLESS 1 OR MORE OF THE FOLLOWING EXCEPTIONS
- 19 APPLY, IN WHICH CASE DAMAGES FOR NONECONOMIC LOSS SHALL NOT
- 20 EXCEED \$1,000,000.00:
- 21 (A) THERE HAS BEEN A DEATH OR THERE IS A DIMINISHED PROGNO-
- 22 SIS INDICATING THAT DEATH IS LIKELY TO OCCUR BEFORE NORMAL LIFE
- 23 EXPECTANCY.
- 24 (B) THE PLAINTIFF HAS A PERMANENT DISABILITY RESULTING FROM
- 25 1 OR MORE OF THE FOLLOWING:
- 26 (i) BLINDNESS CAUSED BY THE INJURY.

- (ii) DEAFNESS CAUSED BY THE INJURY.
- 2 (iii) LOSS OF LIMB.
- (iv) INJURY TO THE BRAIN.
- (v) INJURY TO THE SPINAL CORD.
- (vi) INJURY TO THE CARDIOVASCULAR SYSTEM.
- 6 (C) THERE HAS BEEN PERMANENT LOSS OF OR DAMAGE TO A REPRO-7 DUCTIVE ORGAN.
- 8 (D) THERE HAS BEEN ALTERATION, DESTRUCTION, OR FALSIFICATION
 9 OF A MEDICAL RECORD OR CHART IN VIOLATION OF SECTION 492A OF THE
 10 MICHIGAN PENAL CODE, ACT NO. 328 OF THE PUBLIC ACTS OF 1931,
 11 BEING SECTION 750.492A OF THE MICHIGAN COMPILED LAWS.
- (2) In awarding damages in an action alleging medical mal13 practice, the trier of fact shall itemize damages into DAMAGES
 14 FOR economic LOSS and noneconomic damages FOR NONECONOMIC
 15 LOSS.
- (3) IF DAMAGES FOR ECONOMIC LOSS IN AN ACTION ALLEGING MEDI17 CAL MALPRACTICE CANNOT READILY BE ASCERTAINED BY THE TRIER OF
 18 FACT, THE TRIER OF FACT SHALL CALCULATE DAMAGES FOR ECONOMIC LOSS
 19 BASED ON AN AMOUNT THAT IS EQUAL TO THE STATE AVERAGE MEDIAN
 20 FAMILY INCOME AS REPORTED IN THE IMMEDIATELY PRECEDING FEDERAL
 21 DECENNIAL CENSUS AND ADJUSTED AND CERTIFIED BY THE STATE
 22 TREASURER.
- (4) IN A JURY TRIAL IN AN ACTION ALLEGING MEDICAL MALPRAC14 TICE, ANY PARTY MAY ADVISE THE JURY OF ITS POSITION OR CONTEN15 TIONS WITH RESPECT TO THE LIMITATION ON DAMAGES FOR NONECONOMIC
 16 LOSS SET FORTH IN SUBSECTION (1) INCLUDING, BUT NOT LIMITED TO,
 17 THE AMOUNT OF THE APPLICABLE LIMITATION.

- 1 (5) -(3) "Noneconomic AS USED IN THIS SECTION, "NONECONOMIC
- 2 loss" means damages or loss due to pain, suffering, inconve-
- 3 nience, physical impairment, physical disfigurement, or other
- 4 noneconomic loss.
- 5 (6) -(4) The STATE TREASURER SHALL ADJUST THE limitation on
- 6 -noneconomic damages FOR NONECONOMIC LOSS set forth in subsec-
- 7 tion (1) -shall be increased by an amount determined by the
- 8 state treasurer at the end of each calendar year to reflect the
- 9 cumulative annual percentage increase CHANGE in the consumer
- 10 price index. As used in this subsection, "consumer price index"
- II means the most comprehensive index of consumer prices available
- 12 for this state from the bureau of labor statistics of the United
- 13 States department of labor.
- Sec. 2912a. In an action alleging malpractice, the plain-
- 15 tiff -shall have HAS the burden of proving that in light of the
- 16 state of the art existing at the time of the alleged
- 17 malpractice:
- (a) The defendant, if a general practitioner, failed to pro-
- 19 vide the plaintiff the recognized standard of acceptable profes-
- 20 sional practice OR CARE in the community in which the defendant
- 21 practices or in a similar community, and that as a proximate
- 22 result of the defendant failing to provide that standard, the
- 23 plaintiff suffered an injury.
- (b) The defendant, if a specialist OR A GRADUATE OF A RECOG-
- 25 NIZED RESIDENCY TRAINING PROGRAM, failed to provide the recog-
- 26 nized standard of PRACTICE OR care within that specialty as
- 27 reasonably applied in light of the facilities available in the

- ; community or other facilities reasonably available under the
- 2 circumstances, and as a proximate result of the defendant failing
- 3 to provide that standard, the plaintiff suffered an injury.
- SEC. 2912F. (1) THE SOLE PURPOSE OF THIS SECTION IS TO PRO-
- 5 MOTE SETTLEMENT AND AMICABLE RESOLUTION OF MEDICAL MALPRACTICE
- 6 CLAIMS WITHOUT THE NEED FOR COMMENCING FORMAL LITIGATION; TO
- 7 REDUCE THE COST OF MEDICAL MALPRACTICE LITIGATION IN GENERAL; AND
- 8 TO PROVIDE COMPENSATION FOR MERITORIOUS MEDICAL MALPRACTICE
- 9 CLAIMS THAT WOULD OTHERWISE BE PRECLUDED FROM RECOVERY BECAUSE OF
- 10 THE EXCESSIVE COSTS OF LITIGATION.
- (2) A PERSON SHALL NOT COMMENCE AN ACTION ALLEGING MEDICAL
- 12 MALPRACTICE AGAINST A HEALTH PROFESSIONAL OR HEALTH FACILITY
- 13 UNLESS THE PERSON HAS GIVEN THE HEALTH PROFESSIONAL OR HEALTH
- 14 FACILITY WRITTEN NOTICE UNDER THIS SECTION NOT LESS THAN 180 DAYS
- 15 BEFORE THE ACTION IS COMMENCED.
- 16 (3) THE NOTICE OF INTENT TO FILE A CLAIM REQUIRED UNDER SUB-
- 17 SECTION (2) SHALL BE MAILED TO THE LAST KNOWN PROFESSIONAL BUSI-
- 18 NESS ADDRESS OR RESIDENTIAL ADDRESS OF THE HEALTH PROFESSIONAL OR
- 19 HEALTH FACILITY WHO IS THE SUBJECT OF THE CLAIM. PROOF OF THE
- 20 MAILING CONSTITUTES PRIMA FACIE EVIDENCE OF COMPLIANCE WITH THIS
- 21 SECTION. IF NO LAST KNOWN PROFESSIONAL BUSINESS OR RESIDENTIAL
- 22 ADDRESS CAN REASONABLY BE ASCERTAINED, NOTICE MAY BE MAILED TO
- 23 THE HEALTH FACILITY WHERE THE CARE THAT IS THE BASIS FOR THE
- 24 CLAIM WAS RENDERED.
- 25 (4) IF THE IDENTITY OF THE HEALTH PROFESSIONAL OR HEALTH
- 26 FACILITY TO WHOM NOTICE MUST BE GIVEN UNDER SUBSECTION (2) CANNOT
- 27 BE REASONABLY ASCERTAINED, THE NOTICE MAY BE MAILED TO THE HEALTH

- 1 FACILITY WHERE THE CARE THAT IS THE BASIS FOR THE CLAIM WAS
- 2 RENDERED, SO LONG AS A REASONABLE ATTEMPT IS MADE IN THE NOTICE
- 3 TO DESCRIBE THE PERSON OR PERSONS FOR WHOM THE NOTICE IS
- 4 INTENDED.
- 5 (5) A NOTICE GIVEN IN COMPLIANCE WITH THIS SECTION CONSTI-
- 6 TUTES NOTICE TO A HEALTH CARE PROFESSIONAL, WHETHER LICENSED OR
- 7 NOT, A LICENSED HEALTH FACILITY OR AGENCY, OR AN EMPLOYEE OR
- 8 AGENT OF A LICENSED HEALTH FACILITY OR AGENCY WHO MAY BE JOINED
- 9 AS A PARTY DEFENDANT AFTER THE ACTION ALLEGING MEDICAL MALPRAC-
- 10 TICE IS COMMENCED.
- (6) THE NOTICE GIVEN TO A HEALTH PROFESSIONAL OR HEALTH
- 12 FACILITY UNDER THIS SECTION SHALL CONTAIN A STATEMENT OF AT LEAST
- 13 ALL OF THE FOLLOWING:
- (A) THE FACTUAL BASIS FOR THE CLAIM.
- (B) THE APPLICABLE STANDARD OF PRACTICE OR CARE ALLEGED BY
- 17 (C) THE MANNER IN WHICH IT IS CLAIMED THAT THE APPLICABLE
- 18 STANDARD OF PRACTICE OR CARE WAS BREACHED BY THE HEALTH PROFES-
- 19 SIONAL OR HEALTH FACILITY.
- 20 (D) THE ALLEGED ACTION THAT SHOULD HAVE BEEN TAKEN TO
- 21 ACHIEVE COMPLIANCE WITH THE ALLEGED STANDARD OF PRACTICE OR
- 22 CARE.
- 23 (E) THE MANNER IN WHICH IT IS ALLEGED THE BREACH OF THE
- 24 STANDARD OF PRACTICE OR CARE WAS THE PROXIMATE CAUSE OF THE
- 25 INJURY CLAIMED IN THE NOTICE.
- 26 (7) AFTER THE INITIAL NOTICE IS GIVEN TO A HEALTH
- 27 PROFESSIONAL OR HEALTH FACILITY UNDER THIS SECTION, THE TACKING

- | OR ADDITION OF SUCCESSIVE 180-DAY PERIODS IS NOT ALLOWED,
- 2 IRRESPECTIVE OF HOW MANY ADDITIONAL NOTICES ARE SUBSEQUENTLY
- 3 FILED FOR THAT CLAIM AND IRRESPECTIVE OF THE NUMBER OF HEALTH
- 4 PROFESSIONALS OR HEALTH FACILITIES NOTIFIED.
- (8) AFTER NOTICE HAS BEEN GIVEN IN COMPLIANCE WITH THIS SEC-
- 6 TION AND AN ACTION ALLEGING MEDICAL MALPRACTICE IS COMMENCED,
- 7 THIS SECTION DOES NOT APPLY TO THE ACTION AND DOES NOT PREVENT
- 8 THE ADDITION OF PARTIES DEFENDANT TO THE ACTION. THE NOTICE
- 9 REQUIREMENT OF THIS SECTION DOES NOT REQUIRE THE SPLITTING OF A
- 10 CAUSE OF ACTION AND SHALL NOT INTERFERE WITH THE ORDERLY ADMINIS-
- II TRATION OF JUSTICE.
- (9) A COMPLAINT OR AMENDMENT OF A COMPLAINT FILED AFTER
- 13 NOTICE HAS BEEN GIVEN IN COMPLIANCE WITH THIS SECTION SHALL NOT
- 14 BE DISALLOWED OR STRICKEN ON THE BASIS THAT IT CONTAINS ALLEGA-
- 15 TIONS, THEORIES, CLAIMS, OR BREACHES OF THE STANDARD OF PRACTICE
- 16 OR CARE NOT OTHERWISE CONTAINED IN THE NOTICE.
- (10) IF DURING THE 180-DAY NOTICE PERIOD REQUIRED UNDER SUB-
- 18 SECTION (2), A STATUTE OF LIMITATIONS OR REPOSE OTHERWISE WOULD
- 19 HAVE BECOME APPLICABLE AS A BAR TO THE CLAIM BUT FOR THE NOTICE
- 20 FILED UNDER THIS SECTION, AS PROVIDED UNDER SECTION 5856(D), THEN
- 21 THE CLAIMANT SHALL FILE A COMPLAINT NO LATER THAN 180 DAYS AFTER
- 22 THE EXPIRATION OF THE 180-DAY NOTICE PERIOD REQUIRED UNDER SUB-
- 23 SECTION (2).
- (11) WITHIN 60 DAYS AFTER RECEIPT OF NOTICE UNDER THIS SEC-
- 25 TION, THE HEALTH PROFESSIONAL OR HEALTH FACILITY AGAINST WHOM THE
- 26 CLAIM IS MADE SHALL FURNISH TO THE CLAIMANT OR HIS OR HER

- I AUTHORIZED REPRESENTATIVE A WRITTEN RESPONSE THAT CONTAINS A
- 2 STATEMENT OF EACH OF THE FOLLOWING:
- 3 (A) THE FACTUAL BASIS FOR THE DEFENSE TO THE CLAIM.
- 4 (B) THE STANDARD OF PRACTICE OR CARE THAT THE HEALTH PROFES-
- 5 SIONAL OR HEALTH FACILITY CLAIMS TO BE APPLICABLE TO THE ACTION
- 6 AND THAT THE HEALTH PROFESSIONAL OR HEALTH FACILITY COMPLIED WITH
- 7 THAT STANDARD.
- 8 (C) THE MANNER IN WHICH IT IS CLAIMED BY THE HEALTH PROFES-
- 9 SIONAL OR HEALTH FACILITY THAT THERE WAS COMPLIANCE WITH THE
- 10 APPLICABLE STANDARD OF PRACTICE OR CARE.
- (D) THE MANNER IN WHICH THE HEALTH PROFESSIONAL OR HEALTH
- 12 FACILITY CONTENDS THAT THE ALLEGED INJURY OR ALLEGED DAMAGE TO
- 13 THE CLAIMANT IS NOT RELATED TO THE CARE AND TREATMENT RENDERED.
- 14 (12) A COURT SHALL NOT DISMISS A CAUSE OF ACTION ALLEGING
- 15 MEDICAL MALPRACTICE BASED ON THE PLAINTIFF'S FAILURE TO COMPLY
- 16 WITH THE 180-DAY REQUIREMENT OF SUBSECTION (2), UNLESS THE
- 17 DEFENDANT CAN DEMONSTRATE ACTUAL PREJUDICE.
- 18 SEC. 2912G. (1) SUBJECT TO SUBSECTION (2), DURING THE
- 19 180-DAY PERIOD BETWEEN THE TIME NOTICE IS MAILED UNDER SECTION
- 20 2912F AND THE COMMENCEMENT OF AN ACTION ALLEGING MEDICAL MALPRAC-
- 21 TICE, IF THE TOTAL AMOUNT OF DAMAGES CLAIMED IS \$75,000.00 OR
- 22 LESS, INCLUDING INTEREST AND COSTS, ALL CLAIMANTS AND ALL HEALTH
- 23 PROFESSIONALS OR HEALTH FACILITIES NOTIFIED UNDER SECTION 2912F
- 24 MAY AGREE IN WRITING TO SUBMIT THE CLAIM STATED IN THE NOTICE TO
- 25 BINDING ARBITRATION.
- 26 (2) THE CLAIMANTS GIVING NOTICE AND THE HEALTH PROFESSIONALS
- 27 OR HEALTH FACILITIES RECEIVING NOTICE UNDER SECTION 2912F MAY

- $_{
 m 1\ AGREE}$ IN WRITING TO A TOTAL AMOUNT OF DAMAGES GREATER THAN THE $_{
 m 2\ LIMIT}$ SET FORTH IN SUBSECTION (1).
- $_{
 m 3}$ (3) Arbitration conducted under this section is binding as
- 4 TO ALL PARTIES WHO HAVE ENTERED INTO THE WRITTEN AGREEMENT
 - 5 DESCRIBED IN SUBSECTION (1). ARBITRATION UNDER THIS SECTION
 - 6 SHALL BE SUMMARY IN NATURE AND SHALL BE CONDUCTED AS FOLLOWS:
 - (A) THE PROCEEDING SHALL BE CONDUCTED BY A SINGLE ARBITRATOR R CHOSEN BY AGREEMENT OF ALL PARTIES TO THE CLAIM.
 - 8 CHOSEM BY HOMBERTANY OF HER TIMETERS TO THE CENTRAL
- 9 (B) THERE SHALL BE NO LIVE TESTIMONY OF PARTIES OR 10 WITNESSES.
- (C) THE MICHIGAN GENERAL COURT RULES PERTAINING TO DISCOVERY
- 12 ARE NOT APPLICABLE EXCEPT THAT ALL OF THE FOLLOWING INFORMATION
- 13 SHALL BE DISCLOSED AND EXCHANGED BETWEEN THE PARTIES UPON WRITTEN
- 14 REQUEST OF A PARTY:
- (i) ALL RELEVANT MEDICAL RECORDS OR MEDICAL AUTHORIZATIONS
- 16 SUFFICIENT TO ENABLE THE PROCUREMENT OF ALL RELEVANT MEDICAL
- 17 RECORDS.
- (ii) AN EXPERT WITNESS REPORT OR STATEMENT, BUT ONLY IF THE
- 19 PARTY PROCURING THE EXPERT WITNESS REPORT OR STATEMENT INTENDS TO
- 20 OR DOES FURNISH THE EXPERT WITNESS REPORT OR STATEMENT TO THE
- 21 ARBITRATOR FOR CONSIDERATION.
- 22 (iii) RELEVANT PUBLISHED WORKS, MEDICAL TEXTS, AND SCIEN-
- 23 TIFIC AND MEDICAL LITERATURE.
- (iv) A CONCISE WRITTEN SUMMARY PREPARED BY A PARTY OR THE
- 25 PARTY'S REPRESENTATIVE SETTING FORTH THAT PARTY'S FACTUAL AND
- 26 LEGAL POSITION ON ISSUES PRESENTED BY THE CLAIM.

- 1 (v) OTHER INFORMATION CONSIDERED BY THE PARTY MAKING THE
- 2 REQUEST TO BE RELEVANT TO THE CLAIM OR A DEFENSE TO THE CLAIM.
- 3 (D) THE ARBITRATOR SHALL CONDUCT ! OR MORE PREHEARING TELE-
- 4 PHONE CONFERENCE CALLS OR MEETINGS WITH THE PARTIES OR, IF A
- 5 PARTY IS REPRESENTED BY AN ATTORNEY, THE PARTY'S ATTORNEY, FOR
- 6 THE PURPOSE OF ESTABLISHING THE ORDERLY REQUEST FOR AND EXCHANGE
- 7 OF INFORMATION DESCRIBED IN THIS SUBSECTION, AND ANY OTHER
- 8 ADVANCE DISCLOSURE OF INFORMATION CONSIDERED REASONABLE AND NEC-
- 9 ESSARY IN THE ARBITRATOR'S SOLE DISCRETION. THE ARBITRATOR SHALL
- 10 SET DEADLINES FOR THE EXCHANGE OR ADVANCE DISCLOSURE OF INFORMA-
- II TION UNDER THIS SUBSECTION INCLUDING, BUT NOT LIMITED TO, THE
- 12 CONCISE WRITTEN SUMMARY REQUIRED UNDER SUBDIVISION (C)(iv).
- (E) THE ARBITRATOR MAY ISSUE HIS OR HER DECISION WITHOUT
- 14 HOLDING A FORMAL HEARING BASED SOLELY UPON HIS OR HER REVIEW OF
- 15 THE MATERIALS FURNISHED BY THE PARTIES UNDER THIS SECTION. IN
- 16 HIS OR HER SOLE DISCRETION AND WHETHER OR NOT REQUESTED TO DO SO
- 17 BY A PARTY, THE ARBITRATOR MAY HOLD A HEARING. A HEARING HELD
- 18 UNDER THIS SUBDIVISION IS LIMITED SOLELY TO THE PRESENTATION OF
- 19 ORAL ARGUMENTS, SUBJECT TO TIME LIMITATIONS SET BY THE
- 20 ARBITRATOR.
- 21 (F) THE PARTY WITH THE BURDEN OF ESTABLISHING THE APPLICABLE
- 22 STANDARD OF PRACTICE OR CARE AND THE BREACH OF THAT STANDARD
- 23 SHALL ESTABLISH THE STANDARD AND BREACH EITHER BY INTRODUCTION OF
- 24 EXPERT WITNESS REPORTS OR STATEMENTS OR BY OTHER COMPETENT EVI-
- 25 DENCE INCLUDING, BUT NOT LIMITED TO, PUBLISHED WORKS. THE MANNER
- 26 IN WHICH THE BREACH OF THE STANDARD WAS A PROXIMATE CAUSE OF THE
- 27 INJURY CLAIMED AND DAMAGES MAY ALSO BE ESTABLISHED BY RELIANCE ON

- $_{\rm I}$ Relevant published works, medical texts, and scientific and $_{\rm 2}$ medical literature.
- 3 (G) A WRITTEN AGREEMENT TO SUBMIT THE CLAIM TO BINDING ARBI-
- 4 TRATION UNDER THIS SECTION IS BINDING ON EACH PARTY SIGNING THE
- 5 AGREEMENT AND ON THEIR REPRESENTATIVES, INSURERS, AND HEIRS. AN
- 6 ARBITRATION AGREEMENT UNDER THIS SECTION SIGNED ON BEHALF OF A
- 7 MINOR OR A PERSON WHO IS OTHERWISE INCOMPETENT IS ENFORCEABLE AND
- 8 IS NOT SUBJECT TO DISAFFIRMANCE OR DISAVOWAL, IF THE MINOR OR
- 9 INCOMPETENT PERSON WAS REPRESENTED BY AN ATTORNEY AT THE TIME THE
- IN WRITTEN AGREEMENT WAS EXECUTED.
- (H) THE ARBITRATOR SHALL ISSUE A WRITTEN DECISION THAT
- 12 STATES AT A MINIMUM THE FACTUAL BASIS FOR THE DECISION AND, IF
- 13 THE DECISION IS FAVORABLE TO THE CLAIMANT, THE DOLLAR AMOUNT OF
- 14 THE AWARD. THE ARBITRATOR SHALL NOT INCLUDE COSTS, INTEREST, OR
- 15 ATTORNEY FEES IN AN AWARD. A PARTY MAY SUBMIT AN AWARD BY AN
- 16 ARBITRATOR UNDER THIS SECTION TO A COURT OF COMPETENT JURISDIC-
- 17 TION FOR ENTRY OF JUDGMENT ON AND ENFORCEMENT OF THE DECISION.
- 18 (4) AN APPEAL FROM AN ARBITRATION AWARD UNDER THIS SECTION
- 19 SHALL BE UNDER THE PROCEDURE AND FOR THE GROUNDS PERMITTED UNDER
- 20 CHAPTER 50 AND APPLICABLE COURT RULES.
- 21 Sec. 5040. (1) -The provisions of this EXCEPT AS OTHERWISE
- 22 PROVIDED IN SECTION 2912G, THIS chapter -shall be applicable-
- 23 APPLIES to the arbitration of a dispute, controversy, or issue
- 24 arising out of or resulting from injury to, or the death of, a
- 25 person caused by an error, omission, or negligence in the per-
- 26 formance of professional services by a health care provider,
- 27 hospital, or their agent, or based on a claimed performance of

- 1 such services without consent, in breach of warranty, or in 2 violation of contract.
- 3 (2) As used in this chapter:
- 4 (a) "Association" means the American arbitration association
- 5 or other entity organized to arbitrate disputes pursuant to this
- 6 chapter.
- 7 (b) "Health care provider" means a person, partnership, or
- 8 PROFESSIONAL corporation lawfully engaged in the practice of med-
- 9 icine, surgery, dentistry, podiatry, optometry, chiropractic, OR
- 10 nursing, or a person dispensing drugs or medicines.
- (c) "Hospital" means a person, partnership, or corporation
- 12 lawfully engaged in the operation of a hospital, clinic, health
- 13 maintenance organization, or -a- sanitarium.
- Sec. 5856. The statutes of limitations are tolled -when-
- 15 IF:
- 16 (A) -(1) the The complaint is filed and a copy of the sum-
- 17 mons and complaint are served on the defendant. -, or when-
- (B) (2) jurisdiction JURISDICTION over the defendant is
- 19 otherwise acquired. -, or when
- (C) (3) the THE complaint is filed and a copy of the sum-
- 21 mons and complaint in good faith are placed in the hands of
- 22 an officer for immediate service, but in this case the statute
- 23 shall IS not be tolled longer than 90 days thereafter AFTER
- 24 THE COPY OF THE SUMMONS AND COMPLAINT IS RECEIVED BY THE
- 25 OFFICER.
- 26 (D) NOTICE IS GIVEN IN COMPLIANCE WITH SECTION 2912F.

- (2) For complaints filed before June 1, 1980, in an action 12 involving other than a written instrument having a rate of inter-13 est exceeding 6% per year, the interest on the judgment shall be 14 calculated from the date of filing the complaint to June 1, 1980, 15 at the rate of 6% per year and on and after June 1, 1980, to the 16 date of satisfaction of the judgment at the rate of 12% per year 17 compounded annually.
- (3) For complaints filed before June 1, 1980, in an action involving a written instrument having a rate of interest exceed20 ing 6% per year, the interest on the judgment shall be calculated
 21 from the date of filing the complaint to the date of satisfaction
 22 of the judgment at the rate specified in the instrument if the
 23 rate was legal at the time the instrument was executed. However,
 24 the rate after the date judgment is entered shall not exceed the
 25 following:
- 26 (a) Seven percent per year compounded annually for any
 27 period of time between the date judgment is entered and the date

- I of satisfaction of the judgment which THAT elapses before June 2 1, 1980.
- 3 (b) Thirteen percent per year compounded annually for any 4 period of time between the date judgment is entered and the date 5 of satisfaction of the judgment —which—THAT elapses after May 6 31, 1980.
- (4) For complaints filed on or after June 1, 1980, but 8 before January 1, 1987, interest shall be calculated from the 9 date of filing the complaint to the date of satisfaction of the 10 judgment at the rate of 12% per year compounded annually unless 11 the judgment is rendered on a written instrument having a higher 12 rate of interest. In that case interest shall be calculated at 13 the rate specified in the instrument if the rate was legal at the 14 time the instrument was executed. The rate shall not exceed 13% 15 per year compounded annually after the date judgment is entered.
- (5) For complaints filed on or after January 1, 1987, if a judgment is rendered on a written instrument, interest shall be a calculated from the date of filing the complaint to the date of satisfaction of the judgment at the rate of 12% per year compounded annually, unless the instrument has a higher rate of interest. In that case interest shall be calculated at the rate specified in the instrument if the rate was legal at the time the instrument was executed. The rate shall not exceed 13% per year compounded annually after the date judgment is entered.
- 25 (6) Except as otherwise provided in subsection (5) AND 26 SUBJECT TO SUBSECTION (9), for complaints filed on or after 27 January 1, 1987, interest on a money judgment recovered in a

- intervals from the date of filing the complaint at a rate of interest which THAT is equal to 1% plus the average interest rate paid at auctions of 5-year United States treasury notes during the 6 months immediately preceding July 1 and January 1, 6 as certified by the state treasurer, and compounded annually, 7 pursuant to this section.
- (7) If a bona fide, reasonable written offer of settlement 9 in a civil action based on tort is made by the party against whom 10 the judgment is subsequently rendered AND IS REJECTED BY THE 11 PLAINTIFF, the court shall order that interest shall not be 12 allowed beyond the date the BONA FIDE, REASONABLE written offer 13 of settlement which is made and rejected by the plaintiff, and 14 is filed with the court.
- (8) Except as otherwise provided in subsection (1), if a lona fide, reasonable written offer of settlement in a civil raction based on tort is not made by the party against whom the la judgment is subsequently rendered, or is made and that offer is not filed with the court, the court shall order that interest be calculated from the date of filing the complaint to the date of satisfaction of the judgment OR, IF THE CIVIL ACTION IS BASED ON MEDICAL MALPRACTICE, FROM THE DATE NOTICE IS GIVEN IN COMPLIANCE WITH SECTION 2912F TO THE DATE OF SATISFACTION OF THE JUDGMENT.
- (9) Except as otherwise provided in subsection (1), if a 25 bona fide, reasonable written offer of settlement in a civil 26 action based on tort is made by a plaintiff for whom the judgment 27 is subsequently rendered and that offer is rejected and the offer

- I is filed with the court, the court shall order that interest be
- 2 calculated from the date of the rejection of the offer to the
- 3 date of satisfaction of the judgment at a rate of interest equal
- 4 to 2% plus the rate of interest computed under subsection (6).
- 5 (10) An A BONA FIDE, REASONABLE WRITTEN offer OF
- 6 SETTLEMENT made pursuant to this section -which THAT is not
- 7 accepted within 21 days after the offer is made -shall be
- 8 considered IS rejected. A rejection -, under this subsection
- 9 or otherwise does not preclude a later offer by either
- 10 party.
- (11) As used in this section:
- (a) "Bona fide, reasonable written offer of settlement"
- 13 means:
- (i) With respect to an offer of settlement made by a
- 15 defendant against whom judgment is subsequently rendered, -an- A
- 16 WRITTEN offer of settlement that is not less than 90% of the
- 17 amount actually received by the plaintiff in the action through
- 18 judgment.
- (ii) With respect to an offer of settlement made by a plain-
- 20 tiff, -an- A WRITTEN offer of settlement that is not more than
- 21 110% of the amount actually received by the plaintiff in the
- 22 action through judgment.
- (b) "Defendant" means a defendant, a counter-defendant, or a
- 24 cross-defendant.
- (c) "Party" means a plaintiff or a defendant.
- (d) "Plaintiff" means a plaintiff, a counter-plaintiff, or a
- 27 cross-plaintiff.

- Section 2. Chapter 49 of Act No. 236 of the Public Acts of 2 1961, being sections 600.4901 to 600.4923 of the Michigan 3 Compiled Laws, is repealed.
- Section 3. This amendatory act shall take effect October 1, 5 1993.
- Section 4. (1) Sections 1483, 2912a, and 5856 of Act 7 No. 236 of the Public Acts of 1961, as amended by this amendatory 8 act, do not apply to causes of action arising before October 1, 9 1993.
- (2) Sections 5040 and 6013 of Act No. 236 of the Public Acts 11 of 1961, as amended by this amendatory act, do not apply to cases 12 filed before October 1, 1993.
- (3) Sections 2912f and 2912g of Act No. 236 of the Public 14 Acts of 1961, as added by this amendatory act, apply to cases 15 filed on or after October 1, 1993.