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Senate Bill 30 (Substitute S-1 as reported by the Committee of the Whole)
Sponsor: Senator Walter H. North
Committee: Health Policy

CONTENT

The bill would amend the Public Health Code to provide that a health professional licensee or registrant, who provided to a patient nonemergency health care without receiving compensation for providing the care, would have immunity from liability in a civil action for damages for acts or omissions in providing the care, unless the acts or omissions were the result of gross negligence or willful and wanton misconduct or were intended to injure the patient. The care provided to the patient would have to be limited to care that the health professional or registrant was licensed to provide.

The limitation on liability provided by the bill would apply only if the nonemergency health care were provided inside the premises of, or as a result of a referral from, either: 1) a health facility organized for the sole purpose of delivering nonemergency health care without receiving compensation; or 2) an entity that was not a health facility that provided nonemergency health care to uninsured or underinsured individuals, through the voluntary services of licensees or registrants who received no compensation for providing the care.

Before a licensee or registrant provided a patient with health care as described above, the licensee or registrant would have to give the patient a written disclosure that described the limitation on liability as provided under the bill. The disclosure also would have to state that the health care was free, and that compensation would not be requested from any source.

The bill also provides that a health facility, other than a health facility described above, that provided financial, in-kind, or other support to a health facility or entity described above, would not be liable in a civil action for damages based on nonemergency health care provided by the health facility or agency described above.

Under the bill, "compensation" would mean receipt of payment from any source, including receipt of payment or expected receipt of payment directly from a patient; from a patient's parent, guardian, or spouse; from a public or private health care payment or benefits plan on behalf of the patient; or indirectly in the form of wages, salary, or other valuable consideration under an employment or service agreement.

Proposed MCL 333.16277

Legislative Analyst: G. Towne

FISCAL IMPACT

The bill would have no fiscal impact on State or local government.

Date Completed: 3-28-01

Fiscal Analyst: M. Tyszkiewicz