Senate File 148 S-3015 1 Amend Senate File 148 as follows: 1. By striking everything after the enacting clause and 2 3 inserting: <DIVISION I 4 5 DAMAGE AWARDS AGAINST HEALTH CARE PROVIDERS Section 1. Section 147.136A, subsection 1, paragraph b, 6 7 Code 2023, is amended to read as follows: 8 b. (1) "Noneconomic damages" means damages arising from 9 pain, suffering, inconvenience, physical impairment, mental 10 anguish, emotional pain and suffering, loss of chance, loss of 11 consortium, or any other nonpecuniary damages. (2) "Noneconomic damages" does not include the loss of 12 13 dependent care, including the loss of child care, due to the 14 death of or severe injury to a spouse or parent who is the 15 primary caregiver of a child under the age of eighteen or a 16 disabled adult. Such damages shall be considered economic 17 damages. Sec. 2. Section 147.136A, subsection 2, Code 2023, is 18 19 amended to read as follows: 20 2. The Subject to subsection 4, the total amount recoverable 21 in any civil action for noneconomic damages for personal injury 22 or death, whether in tort, contract, or otherwise, against a 23 health care provider shall be limited to two hundred fifty 24 thousand dollars for any occurrence resulting in injury or 25 death of a patient regardless of the number of plaintiffs, 26 derivative claims, theories of liability, or defendants in 27 the civil action, shall not exceed two hundred fifty thousand 28 dollars unless the jury determines that there is a substantial 29 or permanent loss or impairment of a bodily function, 30 substantial disfigurement, loss of pregnancy, or death, which 31 warrants a finding that imposition of such a limitation would 32 deprive the plaintiff of just compensation for the injuries 33 sustained, in which case the amount recoverable shall not 34 exceed one million dollars, or two million dollars if the civil 35 action includes a hospital as defined in section 135B.1.

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1 Sec. 3. Section 147.136A, Code 2023, is amended by adding
2 the following new subsection:

3 <u>NEW SUBSECTION</u>. 4. The limitations on damages contained 4 in subsection 2 shall increase by two and one-tenth percent 5 on January 1, 2028, and each January 1 thereafter. In any 6 civil action described in this section, such limitations on 7 damages shall be the amount effective at the time of the 8 occurrence. The commissioner of insurance shall publish the 9 amount of the limitations on damages contained in this section 10 on the insurance division's internet site and shall update the 11 published amount annually.

12 Sec. 4. Section 668A.1, subsection 2, paragraphs a and b, 13 Code 2023, are amended to read as follows:

14 If the answer or finding pursuant to subsection 1, a. 15 paragraph "b'', is affirmative, or if the claim is against any 16 physician and surgeon, osteopathic physician and surgeon, 17 dentist, podiatric physician, optometrist, pharmacist, 18 chiropractor, physician assistant, or nurse, licensed under 19 chapter 147, or a hospital licensed under chapter 135B, arising 20 out of patient care, then the full amount of the punitive or 21 exemplary damages awarded shall be paid to the claimant. 22 If the answer or finding pursuant to subsection 1, b. 23 paragraph "b", is negative, and if the claim is not against 24 any physician and surgeon, osteopathic physician and surgeon, 25 dentist, podiatric physician, optometrist, pharmacist, 26 chiropractor, physician assistant, or nurse, licensed under 27 chapter 147, or a hospital licensed under chapter 135B, arising 28 out of patient care, then after payment of all applicable 29 costs and fees, an amount not to exceed twenty-five percent 30 of the punitive or exemplary damages awarded may be ordered 31 paid to the claimant, with the remainder of the award to be 32 ordered paid into a civil reparations trust fund administered 33 by the state court administrator. Funds placed in the civil 34 reparations trust shall be under the control and supervision of 35 the executive council, and shall be disbursed only for purposes

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1 of indigent civil litigation programs or insurance assistance
2 programs.

3 Sec. 5. EFFECTIVE DATE. This division of this Act, being
4 deemed of immediate importance, takes effect upon enactment.
5 Sec. 6. APPLICABILITY. This division of this Act applies to

6 causes of action accrued on or after the effective date of this 7 division of this Act.

DIVISION II

MEDICAL ERROR TASK FORCE

10 Sec. 7. MEDICAL ERROR TASK FORCE.

8 9

11 1. The department of health and human services shall 12 convene a task force to review medical error rates of licensed 13 physicians in this state and shall make recommendations to the 14 general assembly and the director of health and human services 15 including recommendations that address options for reducing 16 medical error rates, improvements in education and training 17 to minimize medical errors, and whether applicable penalties 18 for medical errors and physician licensure review measures are 19 sufficient.

20 2. a. The task force shall include all of the following 21 voting members:

22 (1) The director of health and human services, or the 23 director's designee.

24 (2) The director of inspections and appeals, or the25 director's designee.

26 (3) The executive director of the board of medicine.

27 (4) The ombudsman.

28 (5) A representative of the Iowa medical society.

29 (6) A representative of the board of regents affiliated with30 the university of Iowa hospitals and clinics.

31 (7) The commissioner of insurance, or the commissioner's 32 designee.

33 (8) The attorney general, or the attorney general's34 designee.

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35 b. The task force shall also include four members of the

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1 general assembly serving as ex officio, nonvoting members, one 2 representative to be appointed by the speaker of the house of 3 representatives, one representative to be appointed by the 4 minority leader of the house of representatives, one senator to 5 be appointed by the president of the senate after consultation 6 with the majority leader of the senate, and one senator to be 7 appointed by the minority leader of the senate.

8 c. The director of health and human services, or the 9 director's designee, may add members to the task force as 10 necessary to complete the work of the task force.

11 3. The department of health and human services shall provide 12 administrative support to the task force. The director of 13 health and human services, or the director's designee, shall 14 serve as chairperson of the task force, and shall schedule 15 meetings of the task force as necessary to complete the work 16 of the task force.

4. The task force shall dissolve upon submission of the report to the general assembly and the director of health and human services, but no later than January 8, 2024.> 2. Title page, line 1, by striking <noneconomic> 3. Title page, line 2, after <providers,> by inserting 22 <creating a medical error task force,>

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JASON SCHULTZ