SLS 15RS-129 ORIGINAL

2015 Regular Session

SENATE BILL NO. 158

BY SENATOR HEITMEIER

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

MALPRACTICE. Requires the reporting of malpractice claims paid by insurers or self-insurers on behalf of certain health care providers in an annual report to the Senate and House committees on health and welfare. (gov sig)

1	AN ACT

To enact R.S. 40:1299.48(D), relative to reporting of paid malpractice claims; to provide for annual reporting to legislative committees; to provide for an effective date; and to provide for related matters.

5 Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:1299.48(D) is hereby enacted to read as follows:

7 §1299.48. Reporting of claims

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D. The licensing boards of Louisiana health care providers, as defined by R.S. 40:1299.41(A), shall submit a report on an annual basis to the Senate and House committees on health and welfare no later than January fifteenth.

The report shall include all claims against all health care providers who have had five or more claims for the previous year paid by insurers or self-insurers and include the name and address of the health care provider and a brief description of the acts of omission or commission which gave rise or allegedly gave rise to the claim.

Section 2. This Act shall become effective upon signature by the governor or, if not

- signed by the governor, upon expiration of the time for bills to become law without signature
- by the governor, as provided by Article III, Section 18 of the Constitution of Louisiana. If
- 3 vetoed by the governor and subsequently approved by the legislature, this Act shall become
- 4 effective on the day following such approval.

The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Christopher D. Adams.

DIGEST 2015 Regular Session

Heitmeier

SB 158 Original

<u>Proposed law</u> provides the licensing boards of Louisiana health care providers, as defined by <u>present law</u>, shall submit a report on an annual basis to the Senate and House committees on health and welfare no later than January fifteenth. <u>Proposed law</u> provides the report shall include the name and address of the health care provider and a brief description of the acts of omission or commission which gave rise or allegedly gave rise to the claim if the health care provider has five or more claims for the previous year paid by insurers or self-insurers.

Effective upon signature of the governor or lapse of time for gubernatorial action.

(Adds R.S. 40:1299.48(D))