

109TH CONGRESS
1ST SESSION

H. R. 1546

To provide grants to States for health care tribunals, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 12, 2005

Mr. THORNBERRY introduced the following bill; which was referred to the
Committee on the Judiciary

A BILL

To provide grants to States for health care tribunals, and
for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Medical Liability Pro-
5 cedural Reform Act of 2005”.

6 **SEC. 2. GRANTS FOR HEALTH CARE TRIBUNALS.**

7 (a) GRANTS AUTHORIZED.—The Attorney General
8 may award grants to States for the development, imple-
9 mentation, and evaluation of health care tribunals.

10 (b) DURATION.—The Attorney General may award
11 up to 7 grants under subsection (a) and each grant award-

1 ed under such subsection may not exceed a period of 10
2 years.

3 (c) APPLICATION.—Each State desiring a grant
4 under subsection (a) shall submit to the Attorney General
5 an application, at such time, in such manner, and con-
6 taining such information as the Attorney General may re-
7 quire.

8 (d) REPORT.—Each State receiving a grant under
9 subsection (a) shall submit to the Attorney General a re-
10 port evaluating the effectiveness of activities funded with
11 grants awarded under such subsection at such time and
12 in such manner as the Attorney General may require.

13 (e) TECHNICAL ASSISTANCE.—The Attorney General
14 shall provide technical assistance to the States awarded
15 grants under subsection (a). Such technical assistance
16 shall include the development, in consultation with States,
17 of common definitions, formats, and data collection infra-
18 structure for States receiving grants under this section to
19 use in reporting to facilitate aggregation and analysis of
20 data both within and between States. The technical assist-
21 ance shall also include guidance about identification and
22 selection of health care tribunal judges and independent
23 expert witnesses, compensation of injured patients, and
24 clinical resources relating to the standard of care. States
25 not receiving grants under this section may also use such

1 common definitions, formats, data collection infrastruc-
 2 ture, and other guidance from the Attorney General per-
 3 taining to health care tribunals.

4 (f) EVALUATION.—

5 (1) IN GENERAL.—The Attorney General shall
 6 enter into a contract with an appropriate research
 7 organization to conduct an overall evaluation of the
 8 effectiveness of grants awarded under subsection (a)
 9 and to annually prepare and submit a report to the
 10 appropriate committees of Congress. Such an eval-
 11 uation shall begin not later than 18 months fol-
 12 lowing the date of implementation of the first pro-
 13 gram funded by a grant under subsection (a).

14 (2) CONTENTS.—The evaluation under para-
 15 graph (1) shall include an analysis of the effect of
 16 the grants awarded under subsection (a) on—

17 (A) the number, nature, and costs of
 18 health care liability claims;

19 (B) the liability environment;

20 (C) health care quality; and

21 (D) patient safety.

22 (g) DEFINITIONS.—In this section:

23 (1) HEALTH CARE TRIBUNAL.—The term
 24 “health care tribunal” means a trial court or admin-
 25 istrative tribunal—

1 (A) the sole function of which is for the
2 adjudication of disputes over injuries allegedly
3 caused by health care providers;

4 (B) to which all or a portion of such dis-
5 putes within a jurisdiction are assigned;

6 (C) the decisions of which are final, bind-
7 ing, and appealable; and

8 (D) the judges for which have health care
9 expertise and render decisions about the stand-
10 ard of care in dispute adjudication, with reli-
11 ance on independent expert witnesses commis-
12 sioned by the court.

13 (2) HEALTH CARE PROVIDER.—The term
14 “health care provider” means any individual or enti-
15 ty licensed, registered, or certified under Federal or
16 State laws or regulations to provide health care serv-
17 ices, but does not include any manufacturer of drugs
18 or devices.

19 (h) AUTHORIZATION OF APPROPRIATIONS.—There
20 are authorized to be appropriated to carry out this section
21 such sums as may be necessary. Amounts appropriated
22 pursuant to this subsection shall remain available until ex-
23 pended.

○