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47TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2005

INTRODUCED BY

Pete Campos

AN ACT

RELATING TO HEALTH CARE; ADDING CERTIFIED NURSE-MIDWIVES TO THE MEDICAL MALPRACTICE ACT; PROVIDING FOR TYPES OF COVERAGE; AMENDING SECTIONS OF THE NMSA 1978.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. Section 41-5-3 NMSA 1978 (being Laws 1976, Chapter 2, Section 3, as amended) is amended to read:

"41-5-3. DEFINITIONS. -- As used in the Medical Malpractice Act:

"health care provider" means a person, A. corporation, organization, facility or institution licensed or certified by this state to provide health care or professional services as a doctor of medicine, hospital, outpatient health care facility, doctor of osteopathy, [chiropractor] chiropractic physician, podiatrist, nurse anesthetist,

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<u>certified nurse-midwife</u> or [physician's] physician assistant;

B. "eligible forms of insurance coverage" includes occurrence form or claims made form, provided that such form includes a provision providing automatic unlimited extending reporting endorsement;

[B.] <u>C.</u> "insurer" means an insurance company engaged in writing health care provider malpractice liability insurance in this state:

[C.] D. "malpractice claim" includes any cause of action arising in this state against a health care provider for medical treatment, lack of medical treatment or other claimed departure from accepted standards of health care [which] that proximately results in injury to the patient, whether the patient's claim or cause of action sounds in tort or contract, and includes but is not limited to actions based on battery or wrongful death; "malpractice claim" does not include a cause of action arising out of the driving, flying or nonmedical acts involved in the operation, use or maintenance of a vehicular or aircraft ambulance:

[D.] E. "medical care and related benefits" means all reasonable medical, surgical, physical rehabilitation and custodial services and includes drugs, prosthetic devices and other similar materials reasonably necessary in the provision of such services;

 $\mbox{ } [\underline{E.}] \ \underline{F.} \ \mbox{"patient" means a natural person who}$. 154004. 1

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received or should have received health care from a licensed health care provider, under a contract, express or implied; and

 $[F.] \ \underline{G.} \quad "superintendent" \ means \ the \ superintendent$ of insurance $[\frac{of \ this \ state}{}].$

Section 2. Section 41-5-26 NMSA 1978 (being Laws 1976, Chapter 2, Section 26, as amended) is amended to read:

"41-5-26. MALPRACTICE COVERAGE. --

- A. The filing of proof of financial responsibility with the superintendent, as provided in Section [58-33-5 NMSA 1953] 41-5-5 NMSA 1978, shall constitute a conclusive and unqualified acceptance of the provisions of the Medical Malpractice Act.
- B. Any provision in a policy attempting to limit or modify the liability of the insurer contrary to the provisions of the Medical Malpractice Act is void.
- C. Every policy issued under the Medical

 Malpractice Act is deemed to include the following provisions:
- (1) the insurer assumes all obligations to pay an award imposed against its insured under the provisions of the Medical Malpractice Act; and
- (2) any termination of a policy by an insurer shall not be effective unless written notice of [such] the termination has been mailed by certified mail to both the insured and the superintendent at least ninety days prior to the date the cancellation is to become effective, except that

an insurer may terminate a policy if a billed premium payment is thirty days past due upon ten days' prior written notice mailed by certified mail to the insured of the failure of the insured to pay premiums, and an insured may terminate [his] the policy by written request to the insurer, but the effective date of termination shall be not sooner than ten days after the receipt by the insurer of the written request to terminate. In all cases when a policy is terminated for failure of the insured to pay premiums or at the request of the insured, the insurer shall notify the superintendent in writing immediately of the effective date of termination of the policy. [The insurer shall remain liable for all causes of action accruing prior to the effective date of the termination unless otherwise barred by the provisions of the Medical Malpractice Act.]"

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