

93RD GENERAL ASSEMBLY State of Illinois 2003 and 2004

Introduced 2/6/2004, by Tom Cross

SYNOPSIS AS INTRODUCED:

735 ILCS 5/2-622

from Ch. 110, par. 2-622

Amends the Code of Civil Procedure. Requires that the report from the reviewing health professional for a pro se plaintiff in a medical malpractice action contain the name and address of the reviewing health professional and documentation of compliance with the qualifying requirements for being a reviewing health professional. Provides that a reviewing health professional that provides frivolous or improper review of a case shall be liable to each of the parties for the reasonable costs and attorneys' fees expended in resolving the case. Provides that a review shall be found frivolous if it is substantially lacking in factual support, is based upon a standard of care or practice that lacks substantial use in the relevant specialty or field of practice, or is made for an improper purpose, such as to harass or cause needless increase in the cost of litigation. Limits the extension to one 90-day extension for a pro se plaintiff who was unable to obtain a reviewing physician's reports and who has not previously voluntarily dismissed an action based upon the same or substantially the same acts, omissions, or occurrences.

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1 AN ACT concerning civil procedure.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Code of Civil Procedure is amended by changing Section 2-622 as follows:
- 6 (735 ILCS 5/2-622) (from Ch. 110, par. 2-622)
- 7 (Text of Section WITHOUT the changes made by P.A. 89-7, 8 which has been held unconstitutional)
- 9 Sec. 2-622. Healing art malpractice.
 - (a) In any action, whether in tort, contract or otherwise, in which the plaintiff seeks damages for injuries or death by reason of medical, hospital, or other healing art malpractice, the plaintiff's attorney or the plaintiff, if the plaintiff is proceeding pro se, shall file an affidavit, attached to the original and all copies of the complaint, declaring one of the following:
 - 1. That the affiant has consulted and reviewed the facts of the case with a health professional who the affiant reasonably believes: (i) is knowledgeable in the relevant issues involved in the particular action; (ii) practices or has practiced within the last 6 years or teaches or has taught within the last 6 years in the same area of health care or medicine that is at issue in the action; and particular (iii) meets the minimum requirements set forth in Section 8-2501; and (iv) is qualified by experience or demonstrated competence in the subject of the case; that the reviewing health professional has determined in a written report, after a review of the medical record and other relevant material involved in the particular action that there is a reasonable and meritorious cause for the filing of such action; and that the affiant has concluded on the basis of the reviewing

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2. That the plaintiff has not previously voluntarily dismissed an action based upon the same or substantially the same acts, omissions, or occurrences and that the affiant was unable to obtain a consultation required by

paragraph 1 because a statute of limitations would impair the action and the consultation required could not be obtained before the expiration of the statute of limitations. If an affidavit is executed pursuant to this paragraph, the certificate and written report required by paragraph 1 shall be filed within 90 days after the filing of the complaint. No additional 90-day extensions shall be granted. The defendant shall be excused from answering or otherwise pleading until 30 days after being served with a certificate required by paragraph 1.

- 3. That a request has been made by the plaintiff or his attorney for examination and copying of records pursuant to Part 20 of Article VIII of this Code and the party required to comply under those Sections has failed to produce such records within 60 days of the receipt of the request. If an affidavit is executed pursuant to this paragraph, the certificate and written report required by paragraph 1 shall be filed within 90 days following receipt of the requested records. All defendants except those whose failure to comply with Part 20 of Article VIII of this Code is the basis for an affidavit under this paragraph shall be excused from answering or otherwise pleading until 30 days after being served with the certificate required by paragraph 1.
- (b) Where a certificate and written report are required pursuant to this Section a separate certificate and written report shall be filed as to each defendant who has been named in the complaint and shall be filed as to each defendant named at a later time.
- (c) Where the plaintiff intends to rely on the doctrine of "res ipsa loquitur", as defined by Section 2-1113 of this Code, the certificate and written report must state that, in the opinion of the reviewing health professional, negligence has occurred in the course of medical treatment. The affiant shall certify upon filing of the complaint that he is relying on the doctrine of "res ipsa loquitur".

- (d) When the attorney intends to rely on the doctrine of failure to inform of the consequences of the procedure, the attorney shall certify upon the filing of the complaint that the reviewing health professional has, after reviewing the medical record and other relevant materials involved in the particular action, concluded that a reasonable health professional would have informed the patient of the consequences of the procedure.
- (e) Allegations and denials in the affidavit, made without reasonable cause and found to be untrue, shall subject the party pleading them or his attorney, or both, to the payment of reasonable expenses, actually incurred by the other party by reason of the untrue pleading, together with reasonable attorneys' fees to be summarily taxed by the court upon motion made within 30 days of the judgment or dismissal. In no event shall the award for attorneys' fees and expenses exceed those actually paid by the moving party, including the insurer, if any. In proceedings under this paragraph (e), the moving party shall have the right to depose and examine any and all reviewing health professionals who prepared reports used in conjunction with an affidavit required by this Section.
- (f) A reviewing health professional who in good faith prepares a report used in conjunction with an affidavit required by this Section shall have civil immunity from liability which otherwise might result from the preparation of such report.
- (g) The failure to file a certificate required by this Section shall be grounds for dismissal under Section 2-619.
 - (h) This Section does not apply to or affect any actions pending at the time of its effective date, but applies to cases filed on or after its effective date.
 - (i) This amendatory Act of 1997 does not apply to or affect any actions pending at the time of its effective date, but applies to cases filed on or after its effective date.
- 35 (j) This amendatory Act of the 93rd General Assembly does
 36 not apply to or affect any actions pending at the time of its

- 1 <u>effective date</u>, but applies to cases filed on or after its
- 2 <u>effective date.</u>
- 3 (Source: P.A. 86-646; 90-579, eff. 5-1-98.)