

HR 2103

Medical Malpractice Rx Act

Congress: 107 (2001–2003, Ended)

Chamber: House

Policy Area: Health

Introduced: Jun 7, 2001

Current Status: Referred to the Subcommittee on Health, for a period to be subsequently determined by the Chairman.

Latest Action: Referred to the Subcommittee on Health, for a period to be subsequently determined by the Chairman.  
(Jun 25, 2001)

Official Text: <https://www.congress.gov/bill/107th-congress/house-bill/2103>

Sponsor

Name: Rep. Greenwood, James C. [R-PA-8]

Party: Republican • State: PA • Chamber: House

Cosponsors (6 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Johnson, Nancy L. [R-CT-6]	R · CT		Jun 7, 2001
Rep. Ney, Robert W. [R-OH-18]	R · OH		Jun 7, 2001
Rep. Shays, Christopher [R-CT-4]	R · CT		Jun 7, 2001
Rep. Thomas, William M. [R-CA-21]	R · CA		Jun 7, 2001
Rep. Toomey, Patrick J. [R-PA-15]	R · PA		Jun 7, 2001
Rep. Hobson, David L. [R-OH-7]	R · OH		Jun 19, 2001

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Jun 25, 2001
Judiciary Committee	House	Referred To	Jun 7, 2001

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Medical Malpractice Rx Act - Establishes an alternative dispute resolution (ADR) procedure for all health care liability actions, except: (1) certain actions for damages arising from a vaccine-related injury or death; or (2) an action under the Employee Retirement Income Security Act of 1974 (ERISA).

Establishes a five-year maximum statute of limitations for health care liability actions.

Makes a defendant in any health care liability action liable (severally but not jointly) only for the amount of noneconomic damages (\$500,000 maximum) in direct proportion to the defendant's share of fault or responsibility for the claimant's actual damages.

Requires for the award of punitive damages that the claimant establish that the harm was the result of conduct: (1) specifically intended to cause harm; or (2) manifesting a conscious, flagrant indifference to the rights or safety of others.

Prohibits the award of punitive damages against a manufacturer or product seller of a drug or medical device where: (1) the drug or device was subject to Food and Drug Administration (FDA) premarket safety and labeling approval; or (2) the drug is generally recognized as safe and effective pursuant to FDA conditions.

Allows punitive damages if the defendant: (1) intentionally and wrongfully withheld from or misrepresented material information; or (2) made an illegal payment to an FDA official or employee.

Prohibits punitive damages against a drug manufacturer or product seller relating to the adequacy of the packaging or labeling of a drug required by regulation to have tamper-resistant packaging unless the court finds that such packaging or labeling is substantially out of regulatory compliance.

Permits defendants to introduce evidence of collateral source payments.

Entitles the prevailing party in an action to attorney's fees from the non-prevailing party under specified conditions.

Specifies contingent fee limits.

Declares that any ADR used to resolve a health care liability action or claim shall contain provisions for statute of limitations, noneconomic damages, joint and several liability, punitive damages, collateral source rule, periodic payments, and award of attorney's fees which are identical to the provisions of this Act.

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## **Actions Timeline**

- **Jun 25, 2001:** Referred to the Subcommittee on Health, for a period to be subsequently determined by the Chairman.
- **Jun 7, 2001:** Introduced in House
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- **Jun 7, 2001:** Referred to the Committee on the Judiciary, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.
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