

S 1099

Help Efficient, Accessible, Low-cost, Timely Healthcare (HEALTH) Act of 2011

Congress: 112 (2011–2013, Ended)

Chamber: Senate

Policy Area: Health

Introduced: May 26, 2011

Current Status: Read twice and referred to the Committee on the Judiciary.

Latest Action: Read twice and referred to the Committee on the Judiciary. (May 26, 2011)

Official Text: <https://www.congress.gov/bill/112th-congress/senate-bill/1099>

Sponsor

Name: Sen. Blunt, Roy [R-MO]

Party: Republican • **State:** MO • **Chamber:** Senate

Cosponsors (2 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Kirk, Mark Steven [R-IL]	R · IL		May 26, 2011
Sen. Heller, Dean [R-NV]	R · NV		Feb 6, 2012

Committee Activity

Committee	Chamber	Activity	Date
Judiciary Committee	Senate	Referred To	May 26, 2011

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
112 HR 5652	Related bill	May 15, 2012: Read the second time. Placed on Senate Legislative Calendar under General Orders. Calendar No. 398.
112 HR 5	Related bill	Apr 16, 2012: Read the second time. Placed on Senate Legislative Calendar under General Orders. Calendar No. 353.
112 HR 105	Related bill	Feb 25, 2011: Referred to the Subcommittee on Health, Employment, Labor, and Pensions.
112 S 218	Related bill	Jan 27, 2011: Read twice and referred to the Committee on the Judiciary.

Help Efficient, Accessible, Low Cost, Timely Healthcare (HEALTH) Act of 2011 - Sets conditions for lawsuits arising from health care liability claims regarding health care goods or services or any medical product affecting interstate commerce.

Sets a statute of limitations of three years after the date of manifestation of injury or one year after the claimant discovers the injury, with certain exceptions.

Limits noneconomic damages to \$250,000. Makes each party liable only for the amount of damages directly proportional to such party's percentage of responsibility.

Allows the court to restrict the payment of attorney contingency fees. Limits the fees to a decreasing percentage based on the increasing value of the amount awarded.

Allows the introduction of collateral source benefits and the amount paid to secure such benefits as evidence. Prohibits a provider of such benefits from recovering any amount from an award in a health care lawsuit involving injury or wrongful death.

Authorizes the award of punitive damages only where: (1) it is proven by clear and convincing evidence that a person acted with malicious intent to injure the claimant or deliberately failed to avoid unnecessary injury the claimant was substantially certain to suffer; and (2) compensatory damages are awarded. Limits punitive damages to the greater of two times the amount of economic damages or \$250,000.

Denies punitive damages in the case of products approved, cleared, or licensed by the Food and Drug Administration (FDA), or otherwise considered in compliance with FDA standards.

Provides for periodic payments of future damages.

Actions Timeline

- **May 26, 2011:** Introduced in Senate
- **May 26, 2011:** Read twice and referred to the Committee on the Judiciary.