

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE RESOLUTION

No. 110 Session of 2011

INTRODUCED BY MICOZZIE, DeLUCA, GRELL, GROVE, FABRIZIO,
BENNINGHOFF, CALTAGIRONE, CLYMER, GEIST, GINGRICH, HORNAMAN,
JOSEPHS, KORTZ, LONGIETTI, MILLER, MILNE, MOUL, MUNDY,
READSHAW, STURLA AND VULAKOVICH, MARCH 3, 2011

REFERRED TO COMMITTEE ON INSURANCE, MARCH 3, 2011

A RESOLUTION

1 Directing the Legislative Budget and Finance Committee to
2 conduct a study of the Medical Care Availability and
3 Reduction of Error Fund administered by the Insurance
4 Department.

5 WHEREAS, The Medical Care Availability and Reduction of Error
6 Fund (Mcare Fund) was established by act of March 20, 2002
7 (P.L.154, No.13), known as the Medical Care Availability and
8 Reduction of Error (Mcare) Act; and

9 WHEREAS, The Mcare Fund is the successor to the Medical
10 Professional Liability Catastrophe Loss Fund, better known as
11 the CAT Fund, which was established by section 701 of the former
12 act of October 15, 1975 (P.L.390, No.111), known as the Health
13 Care Services Malpractice Act, and began to accept coverage and
14 accrue unreserved liabilities starting in 1976; and

15 WHEREAS, The Mcare Fund is a special fund within the State
16 Treasury established to ensure reasonable compensation for
17 persons injured due to medical negligence; and

18 WHEREAS, Money in the Mcare Fund is used to pay claims

1 against participating health care providers and eligible
2 entities for losses or damages awarded in medical professional
3 liability actions in excess of basic insurance coverage (primary
4 coverage) provided by primary professional liability insurance
5 companies (primary carriers) or self-insurers; and

6 WHEREAS, The Mcare Fund is funded by an assessment on each
7 participating health care provider; therefore be it

8 RESOLVED, That the House of Representatives direct the
9 Legislative Budget and Finance Committee to conduct a study of
10 the Mcare Fund to ascertain its policies and procedures to
11 ensure the availability and accessibility of affordable medical
12 professional liability coverage; and be it further

13 RESOLVED, That the committee's report include an evaluation
14 of the Mcare Fund's operations by examining Mcare Fund
15 operations and expenses, claims resolution practices and
16 appropriate coordination with primary coverage insurers or self-
17 insured plans and excess coverage insurers, Mcare Fund practices
18 in connection with collection and remittance of assessments from
19 health care providers, manner of selecting defense counsel
20 regardless of whether selected by the Mcare Fund, the Insurance
21 Department, the Office of General Counsel or otherwise and the
22 cost of defense counsel, responsiveness to inquiries regarding
23 the Mcare Fund's policies and procedures, reliability and
24 appropriateness of the Mcare assessments among various health
25 care provider types, specialties and geographic locations and
26 validity and reliability of Mcare Fund data in determining the
27 number of actively practicing physicians in this Commonwealth;
28 and be it further

29 RESOLVED, That the committee report its findings to the Chief
30 Clerk of the House of Representatives no later than nine months

1 after adoption of the resolution.