LOUISIANA STATE UNIVERSITY HEALTH CARE SERVICES DIVISION BATON ROUGE, LOUISIANA

POLICY NUMBER:	7001-25
CATEGORY:	Legal
CONTENT:	HCSD Policy And Procedure On Disposition Of Medical Bills In The Settlement Of A Medical Malpractice Claim Or Suit
APPLICABILITY:	This policy is applicable to all workforce members of the LSU Health Care Services Division (LSU HCSD) facilities, including employees, physician/practitioner practices, vendors, agencies, business associates, and affiliates. Any reference herein to LSU HCSD also applies and pertains to Lallie Kemp Medical Center.
EFFECTIVE DATE:	Issued:March 18, 2002Reviewed:June 12, 2008Reviewed:June 28, 2010Reviewed:October 1, 2011Reviewed:January 23, 2013Reviewed:January 28, 2015Reviewed:January 17, 2017Reviewed:December 5, 2022Reviewed:August 8, 2024Reviewed:May 5, 2025
INQUIRIES TO:	HCSD, Legal Post Office Box 91308 Baton Rouge, LA 70821-1308

Note: Approval signatures/titles of policy owner/creator are on the last page

LSU HCSD POLICY AND PROCEDURE ON DISPOSITION OF MEDICAL BILLS IN THE SETTLEMENT OF A MEDICAL MALPRACTICE CLAIM OR SUIT

I. <u>POLICY STATEMENT</u>

Upon the request and advice of the Attorney General of Louisiana, attorneys acting on the Attorney General's behalf, or attorneys assigned to defend medical malpractice claims against LSU Health Care Services Division (HCSD), its hospitals, or personnel, the Chief Executive Officer (CEO) or his designee may waive the medical bills owed by a patient, who is claiming medical malpractice, in exchange for amicably settling the claim.

The request shall be in written form and signed by the requesting attorney. The HCSD CEO or a designee may seek the advice of in-house counsel, hospital administrator, and employees involved in the matter. However, the CEO or designee is not required to consult these parties prior to waiving bills to settle a medical malpractice claim.

Either the CEO or the designee may authorize the waiver and one is not preferential to the other. When neither the CEO nor the designee is available, and there is an emergency, another person may be designated to act on their behalf and shall have authority to authorize a waiver during the absence.

Note: Any reference herein to the Health Care Services Division (HCSD) also applies and pertain

II <u>IMPLEMENTATION</u>

This policy and subsequent revisions to the policy shall become effective upon approval and signa

III. <u>PROCEDURE</u>

- A. Requests for a waiver of medical bills to settle a medical malpractice claim should be made in writing by the Attorney General of Louisiana, attorneys acting on the Attorney General's behalf, or attorneys assigned to defend medical malpractice claims against HCSD, its hospitals, and personnel.
- B. The request should briefly indicate the facts of the case.
- C. The request should be referred to HCSD's Legal Counsel for evaluation and possible consultations with the requesting attorney who is defending HCSD, its hospitals, or personnel, and HCSD employees.

- D. The Legal Section should forward a brief written evaluation and suggestion, with the written request for a waiver, to the CEO or designee for review and approval or denial.
- E. The approval or denial should be written on the evaluation and suggestion document s
- F. Once approved or denied, the Legal Section should inform the requesting attorney of the decision. If the request has been granted (agreement to waive the medical bills to settle the medical malpractice claim) and the medical malpractice claimant accepts the settlement, the attorney who requested the waiver will be required to advise the CEO and Chief Financial Officer (where the medical bill is to be waived) in writing that the medical bills are to be waived.

II. <u>EXCEPTION</u>

The HCSD CEO or designee may waive, suspend, change, or otherwise deviate from any provision of this policy they deem necessary to meet the needs of the agency as long as it does not violate the intent of this policy, state and/or federal laws, Civil Service Rules and Regulations, LSU Policies/Memoranda, or any other governing body regulations.

Waiver of Medical Charges in a Medical Malpractice Claim

HEALTH CARE SERVICES DIVISION HCSD LEGAL COUNSEL

- DATE: (DATE)
- TO: (NAME) Chief Executive Officer or Designee
- FROM: (NAME) General Counsel
- RE: Waiver of Medical Bills for (PATIENT'S NAME) Claiming Medical Malpractice

(FACTS – MAY SIMPLY REFER TO LETTER AND MATERIALS FROM AG'S LAWYER)

(REASONING – MAY SIMPLY REFER TO LETTER AND MATERIALS FROM AG's LAWYER)

(SUGGESTION)

(NAME) General Counsel

I concur / I do not concur (circle one)

(NAME) Chief Executive Officer or Designee

Comments:

Document Metadata

7001-25 Medical Bills in a Medical **Document Name:** Malpractice Claim.docx Policy Number: 7001 **Original Location:** /LSU Health/HCSD/7000 - Legal Created on: 03/18/2002 05/05/2025 Published on: Last Review on: 05/05/2025 Next Review on: 05/05/2026 Effective on: 11/29/2018 Creator: Townsend, Kathy HCSD Human Resources Director Committee / Policy Team: Main Policy Team **Owner/SME:** Townsend, Kathy HCSD Human Resources Director Townsend, Kathy Manager: HCSD Human Resources Director Author(s): Wicker, Claire M. PROJECT COORDINATOR Approver(s): Wilbright, Wayne Chief Medical Informatics Officer Townsend, Kathy HCSD Human Resources Director Publisher: Wicker, Claire M. PROJECT COORDINATOR

Digital Signatures:

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Chief Medical Informatics Officer

Kathy Inunsend 05/05/2025 Wg-A. Cellel H-

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