

State Medical Malpractice Immunity During COVID-19

State	Guidance Link	Addtl. Guidance Link	Medical Malpractice Immunity during COVID-19 Pandemic	End Date
Alabama	https://legiscan.com/AL/text/SB30/id/2289784/Alabama-2021-SB30-Enrolled.pdf		<p>SB 30 (Act 2021-4)</p> <p>Section 2. (a) For purposes of this act, the following terms shall have the following meanings:</p> <p>(5) COVERED ENTITY . Any of the following: a. A business entity; b. A health care provider; c. An educational entity; d. A church; e. A governmental entity; f. A cultural institution; g. Any director, officer, trustee, manager, member, employee, or agent of the covered entity with respect to any act or omission performed while acting on behalf of the covered entity.</p> <p>(11) HEALTH CARE PROVIDER . Those facilities, professionals, and personnel, including, but not limited to, 3 the following:</p> <p>a. Any health care provider as that term is defined in Section 6-5-542(1) or Section 6-5-481(1)-(8), Code of Alabama 1975.</p> <p>b. Any health care facility licensed or approved in this state, including, but not limited to, any facility licensed or approved by the Alabama Department of Public Health or mental health facility certified by the Alabama Department of Mental Health, including any health care facility or pharmacy operating and providing services pursuant to the provisions outlined in the Governor's proclamation of April 2, 2020, and any support personnel of the facility or pharmacy.</p> <p>c. Any medical or health care professional, individual, or entity holding a license, registration, permit, certification, or approval, including a temporary emergency license, registration, permit, certification, or approval, to practice a health care profession or occupation in this state, including under the federal Public Readiness and Emergency Preparedness Act and any declaration of the Department of Health and Human Services in accordance with that act, under any emergency proclamations, orders, or rules, adopted by a licensing board or agency pursuant to authorizing emergency proclamations or executive orders, or otherwise in response to Coronavirus, including any support personnel of the professional, individual, or entity.</p> <p>(12) HEALTH CARE SERVICES OR TREATMENT . Any health care service or treatment defined by existing law and Section 6-5-540 et seq., Code of Alabama 1975. <i>Continued on next page</i></p>	<p>This act shall terminate on 10/8/2022</p>

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<p><i>Alabama continued</i></p>			<p>(13) HEALTH EMERGENCY CLAIM. Any claim that arises from or is related to Coronavirus. All such claims, no matter how denominated, shall be considered a health emergency claim for purposes of this act. The term includes, but is not limited to, any cause of action that is related in any manner to either or both of the following:</p> <ul style="list-style-type: none"> a. The actual, alleged, or feared exposure to or contraction of Coronavirus from the premises of a covered entity or otherwise related to or arising from its operations, products, or services provided on or off-premises. b. The covered entity's efforts to prevent or delay the spread of Coronavirus, including, but not limited to, any of the following: <ul style="list-style-type: none"> 1. Testing. 2. Monitoring, collecting, reporting, tracking, tracing, disclosing, or investigating exposures or other information. 3. Using or supplying precautionary equipment or supplies such as personal protective equipment. <p>Section 3.</p> <p>(a) Notwithstanding any other provision of law, a covered entity shall not be liable for any damages, injury, or death suffered by any person or entity as a result of, or in connection with, a health emergency claim that results from any act or omission of the covered entity.</p> <p>(b) Subsection (a) does not apply if the claimant proves by clear and convincing evidence that the covered entity caused the damages, injury, or death by acting w/ wanton, reckless, willful, or intentional misconduct.</p> <p>(c) In those instances where liability is established as required by subsection (b), and the acts or omissions do not result in serious physical injury, a covered entity's liability shall be limited to actual economic compensatory damages, and in no event shall the covered entity be liable for noneconomic or punitive damages.</p> <p>(d) A party asserting a health emergency claim alleging wrongful death is only entitled to an award of punitive damages. <i>Continued on next page</i></p>	

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<p><i>Alabama continued</i></p>			<p>Section 4.</p> <p>(a) This section applies to both of the following causes of action that accrue before the effective date of this act:</p> <p>(1) A health emergency claim for which a court holds that neither Section 3 nor the liability limiting provisions of any gubernatorial emergency order applies.</p> <p>(2) Any cause of action relating to an act or omission of the health care provider during the performance or provision of health care services or treatment that resulted from, was negatively affected by, was negatively impacted by a lack of resources caused by, or was done in response to the Coronavirus pandemic or the state’s response to the pandemic, for which a court holds that neither Section 5 nor the liability limiting provisions of any gubernatorial emergency order applies.</p> <p>(b) For any health emergency claim or cause of action under subsection (a), the following provisions shall apply:</p> <p>(1) Notwithstanding any other provision of law, as a matter of law, a covered entity shall not be liable for negligence, premises liability, or for any non-wanton, non-willful, or non-intentional civil cause of action to which this section applies, unless the claimant shows by clear and convincing evidence that the covered entity did not reasonably attempt to comply with the then applicable public health guidance.</p> <p>(2) Notwithstanding any other provision of law, for a cause of action to which this section applies, a covered entity shall not be liable for damages from mental anguish or emotional distress or for punitive damages, but may be liable for economic compensatory damages in a cause of action that does not involve serious physical injury.</p> <p>(3) This section does not prohibit an award of punitive damages for wrongful death claims, but no other damages shall be allowed for such claims.</p> <p><i>Continued on next page</i></p>	

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Alabama <i>continued</i>			<p>Section 5.</p> <p>(a) Absent wanton, reckless, willful, or intentional misconduct, a health care provider is not liable for any damages, injury, or death alleged to have been caused by an act or omission of the health care provider during the performance or provision of health care services or treatment that resulted from, was negatively affected by, was negatively impacted by a lack of resources caused by, or was done in response to the Coronavirus pandemic or the state’s response to the pandemic.</p> <p>(b) If a court determines that the immunity afforded in this section does not apply to a health care provider, this section may not be construed to supersede, amend, or modify any other law, emergency proclamation, order, rule, or governing legal standards or procedures for health care providers relating to the performance or provision of health care services or treatment provided by the health care provider, including the Alabama Medical Liability Act of 1987 or the Medical Liability Act of 1996, or any amendment to or judicial interpretation thereof.</p> <p>(c) In those instances where liability is established as required by subsection (a), and the acts or omissions do not result in serious physical injury, a health care provider’s liability shall be limited to actual economic compensatory damages, and in no event shall the health care provider be liable for noneconomic or punitive damages.</p> <p>Section 6. Nothing in this act shall be construed to preempt, remove, displace, repeal, or limit in any way any immunity, defense, or right that exists under existing law that would be applicable to any covered entity in a cause of action filed on or after the March 13, 2020. This section confirms that the immunity provided by this act is in addition to and cumulative of any other immunity, defense, and right that exists under law.</p> <p>Section 7. This act shall be construed in pari materia with the Emergency Management Act and with any emergency order or proclamation of the Governor relating to Coronavirus and immunity from civil lawsuits.</p> <p>Section 8. A health emergency claim under Section 3 or a claim under Section 4 or 5 must be filed not later than two years after the date of the damages, injury, or death.</p>	
	https://governor.alabama.gov/assets/2020/05/2020-05-08-8th-Supplemental-SOE-COVID-19.pdf		<p>Governor’s Proclamation dated May 8, 2020:</p> <p>A business, healthcare provider, or other covered entity shall not be liable for the death or injury to persons or for damage to property in any way arising from any act or omission related to, or in connection with, COVID-19 transmission or a covered COVID-19 response activity, unless a claimant shows by clear and convincing evidence that the claimant’s alleged death, injury, or damage was caused by the business, healthcare provider, or other covered entity’s wanton, reckless, willful, or intentional misconduct.</p> <p>A business, health care provider, or other covered entity shall not be liable for negligence, premises liability, or for any non-wanton, non-willful, or non-intentional civil cause of action with respect to any individual or entity relating to or in connection with COVID-19 transmission or any covered COVID-19 response activity unless the claimant proves by clear and convincing evidence the business, health care provider or other covered entity did not reasonably attempt to comply with the then applicable public health guidance.</p>	Terminated October 31, 2021

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Alaska	http://www.akleg.gov/basis/Bill/Text/31?Hsid=SB0241A	https://covid19.alaska.gov/wp-content/uploads/2021/01/01.15.21-Disaster-Declaration.pdf	<p>2019 AK. SB 241</p> <p>Except as provided in (d) of this section, a public health agent or health care provider who takes action based on a standing order issued by the chief medical officer is not liable for civil damages resulting from an act or omission in implementing the standing order.</p> <p>(d) Nothing in this section precludes liability for civil damages as a result of gross negligence, recklessness, or intentional misconduct.</p>	Terminated on April 30, 2021 (pursuant to the ending the State of Alaska COVID-19 Disaster Declaration)
Arizona	https://track.govhazk.com/public/bills/1414009		<p>Arizona SB 1377</p> <p>12-515. Emergency declaration for a public health pandemic; immunity from liability; burden of proof; presumption; applicability; definition</p> <p>A. If the governor declares a state of emergency for a public health pandemic pursuant to Title 26, Chapter 2, a person or provider that acts in good faith to protect a customer, student, tenant, volunteer, patient, guest or neighbor or the public from injury from the public health pandemic is not liable for damages in any civil action for any injury, death or loss to person or property that is based on a claim that the person or provider failed to protect the customer, student, tenant, volunteer, patient, guest, neighbor or public from the effects of the public health pandemic unless it is proven by clear and convincing evidence that the person or provider failed to act or acted and failure to act or action was due to that person's or provider's willful misconduct or gross negligence. A person or provider is presumed to have acted in good faith if the person or provider adopted and implemented reasonable policies related to the public health pandemic.</p> <p>B. This section applies to all claims that are filed before or after the effective date of this section for an act or omission by a person or provider that occurred on or after March 11, 2020 and that relates to a public health pandemic that is the subject of the state of emergency declared by the governor.</p> <p>C. This section does not apply to any claim that is subject to Title 23, Chapter 6.</p> <p>D. For the purposes of this section, "provider" means any of the following:</p> <p>10. A health professional as defined in Section 32-3201, including person who is supervised by the health professional in the course of providing health care services.</p> <p>11. A health care institution as defined in Section 36-401.</p> <p>12-516. Emergency declaration for a public health pandemic; immunity from liability for health professionals or health care institutions; burden of proof; presumption; applicability; definitions</p> <p>A. If the governor declares a state of emergency for a public health pandemic pursuant to Title 26, Chapter 2, a health professional or health care institution that acts in good faith is not liable for damages in any civil</p> <p><i>Continued on next page</i></p>	SB 1377 does not have an expiration date.

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<p><i>Arizona continued</i></p>			<p>action for an injury or death that is alleged to be caused by the health professional's or health care institution's action or omission while providing health care services in support of this state's response to the state of emergency declared by the governor unless it is proven by clear and convincing evidence that the health professional or health care institution failed to act or acted and the failure to act or action was due to that health professional's or health care institution's willful misconduct or gross negligence.</p> <p>B. Subsection a of this section applies to any action or omission that is alleged to have occurred during a person's screening, assessment, diagnosis or treatment and is related to the public health pandemic that is the subject of the state of emergency or any action or omission that occurs in the course of providing a person with health care services and that is unrelated to the public health pandemic that is the subject of the state of emergency if the health professional's or health care institution's action or omission was in good faith support of this state's response to the state of emergency, including any of the following:</p> <ol style="list-style-type: none"> 1. Delaying or canceling a procedure that the health professional determined in good faith was a nonurgent or elective dental, medical or surgical procedure. 2. Providing nursing care or procedures. 3. Altering a person's diagnosis or treatment in response to an order, directive or guideline that is issued by the federal government, this state or a local government. 4. An act or omission undertaken by a health professional or health care institution because of a lack of staffing, facilities, equipment, supplies or other resources that are attributable to the state of emergency and that render the health professional or health care institution unable to provide the level or manner of care to a person that otherwise would have been required in the absence of the state of emergency. <p>C. A health professional or health care institution is presumed to have acted in good faith if the health professional or health care institution relied on and reasonably attempted to comply with applicable published guidance relating to the public health pandemic that was issued by a federal or state agency. This subsection does not prohibit a party from introducing any other evidence that proves the health professional or health care institution acted in good faith.</p>	
			<p>D. In the case of a claim against a nursing care institution or residential care institution, where the care in question did not directly relate to the public health pandemic, the burden is on the facility to prove that the act or omission was a direct result of having to provide care to patients needing treatment for the pandemic or due to limitations in equipment, supplies or staff caused by the pandemic.</p> <p>E. This section applies to all claims that are filed before or after the effective date of this section for an act or omission by a person that occurred on or after March 11, 2020 and that relates to a public health pandemic that is the subject of the state of emergency declared by the governor.</p> <p>G. For the purposes of this section:</p> <ol style="list-style-type: none"> 1. "health care institution" has the same meaning prescribed in Section 36-401 and includes an ambulance service as defined in Section 36-2201. 2. "health professional" has the same meaning prescribed in Section 32-3201 and includes an ambulance attendant as defined in Section 36-2201. <p>Sec. 2. Retroactivity. This act applies retroactively from and after March 10, 2020.</p>	

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Arkansas	https://governor.arkansas.gov/images/uploads/executiveOrders/EO_20-18_.pdf		<p>Executive Order 20-18</p> <p>Provides immunity from liability for physicians, physician assistants, specialist assistants, nurse practitioners, licensed registered nurses and licensed practiced nurses for any injury or death alleged to have been sustained directly as a result of an act or omission by such medical professional in the course of providing medical services in support of the State’s response to COVID-19 or the implementation of measures to control the causes of the COVID-19 epidemic.</p> <p>Immunity shall not be extended to an emergency responder, who as a result of his or her action or omission, causes injury or death due to: 1) acting outside the scope of his or her practice unless he or she has been redeployed or crosstrained in tasks or duties he or she is not typically assigned to; or 2) acting in gross negligence, willful misconduct, or bad faith.</p>	27-Sep-21
California*	https://leginfo.ca.gov/faces/codes_displaySection.xhtml?lawCode=GOV&sectionNum=8659		<p>Government Code §8659</p> <p>Civil immunity to medical professionals (licensed in state or any othe state) and medical facilities who render services during any state of war emergency, a state of emergency, or a local emergency at the express or implied request of any responsible state or local official or agency, regardless of how or under what circumstances or by what cause those injuries are sustained. Exception for a willfull act or omission.</p>	
Colorado*	https://law.justia.com/codes/colorado/2016/title-24/principal-departments/article-33.5/part-7/section-24-33.5-711.5/		<p>C.R.S. 24-33.5-711.5</p> <p>(2) The conduct and management of the affairs and property of each hospital, physician, health insurer or managed health care organization, health care provider, public health worker, or emergency medical service provider shall be such that they will reasonably assist and not unreasonably detract from the ability of the state and the public to successfully control emergency epidemics that are declared a disaster emergency. Such persons and entities that in good faith comply completely with board of health rules regarding the emergency epidemic and with executive orders regarding the disaster emergency shall be immune from civil or criminal liability for any action taken to comply with the executive order or rule.</p>	

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Connecticut	https://portal.ct.gov/-/media/Office-of-the-Governor/Executive-Orders/Lamont-Executive-Orders/Executive-Order-No-7V.pdf	https://portal.ct.gov/-/media/Office-of-the-Governor/Executive-Orders/Lamont-Executive-Orders/Executive-Order-No-10A.pdf	<p>Executive Order 7V</p> <p>Notwithstanding any provision of the Connecticut General Statutes or any other state law, including the common law, or any associated regulations, rules, policies, or procedures, any health care professional shall be immune from suit for civil liability for any injury or death alleged to have been sustained because of the individual's acts or omissions undertaken in good faith while providing health care services in support of the State's COVID-19 response, including but not limited to acts or omissions undertaken because of a lack of resources, attributable to the COVID-19 pandemic, that renders the health care professional unable to provide the level or manner of care that otherwise would have been required in the absence of the COVID-19 pandemic and which resulted in the damages at issue, provided that nothing in this order shall remove or limit any immunity conferred by any provision of the Connecticut General Statutes or other law. Such immunity shall not extend to acts or omissions that constitute a crime, fraud, malice, gross negligence, willful misconduct, or would otherwise constitute a false claim or prohibited act pursuant to Section 4-275 et seq. of the Connecticut General Statutes or 31 U.S.C. §§3729 et seq.</p> <p>The term "health care professional" means an individual who is licensed, registered, permitted, or certified in any state in the United States to provide health care services and any retired professional, professional with an inactive license, or volunteer approved by the Commissioner of the Department of Public Health or her designee. The immunity conferred by this order applies to acts or omissions subject to this order occurring at any time during the public health and civil preparedness emergency declared on March 10, 2020, including any period of extension or renewal, including acts or omissions occurring prior to the issuance of this order attributable to the COVID-19 response effort.</p>	Terminated on April 19, 2021 (pursuant to Executive Order No. 11)
Delaware				
District of Columbia				

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<p>Florida*</p>	<p>http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0700-0799/0768/Sections/0768.13.html</p>	<p>Senate Bill 7014</p>	<p>Fla. Stat. § 768.13</p> <p>(2)</p> <p>(a) Any person, including those licensed to practice medicine, who gratuitously and in good faith renders emergency care or treatment either in direct response to emergency situations related to and arising out of a public health emergency declared pursuant to s. 381.00315, a state of emergency which has been declared pursuant to s. 252.36 or at the scene of an emergency outside of a hospital, doctor’s office, or other place having proper medical equipment, without objection of the injured victim or victims thereof, shall not be held liable for any civil damages as a result of such care or treatment or as a result of any act or failure to act in providing or arranging further medical treatment where the person acts as an ordinary reasonably prudent person would have acted under the same or similar circumstances.</p> <p>(b)</p> <p>1. Any health care provider, including a hospital licensed under chapter 395, providing emergency services pursuant to obligations imposed by 42 U.S.C. s. 1395dd, s. 395.1041, s. 395.401, or s. 401.45 shall not be held liable for any civil damages as a result of such medical care or treatment unless such damages result from providing, or failing to provide, medical care or treatment under circumstances demonstrating a reckless disregard for the consequences so as to affect the life or health of another.</p> <p>2. The immunity provided by this paragraph applies to damages as a result of any act or omission of providing medical care or treatment, including diagnosis:</p> <p>a. Which occurs prior to the time the patient is stabilized and is capable of receiving medical treatment as a nonemergency patient, unless surgery is required as a result of the emergency within a reasonable time after the patient is stabilized, in which case the immunity provided by this paragraph applies to any act or omission of providing medical care or treatment which occurs prior to the stabilization of the patient following the surgery.</p> <p><i>Continued on next page</i></p>	<p>6/1/2023</p>

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<p><i>Florida continued</i></p>			<p>b. Which is related to the original medical emergency.</p> <p>4. Every emergency care facility granted immunity under this paragraph shall accept and treat all emergency care patients within the operational capacity of such facility without regard to ability to pay, including patients transferred from another emergency care facility or other health care provider pursuant to Pub. L. No. 99-272, s. 9121. The failure of an emergency care facility to comply with this subparagraph constitutes grounds for the department to initiate disciplinary action against the facility pursuant to chapter 395.</p> <p>(c)</p> <p>1. Any health care practitioner as defined in s. 456.001(4) who is in a hospital attending to a patient of his or her practice or for business or personal reasons unrelated to direct patient care, and who voluntarily responds to provide care or treatment to a patient with whom at that time the practitioner does not have a then-existing health care patient-practitioner relationship, and when such care or treatment is necessitated by a sudden or unexpected situation or by an occurrence that demands immediate medical attention, shall not be held liable for any civil damages as a result of any act or omission relative to that care or treatment, unless that care or treatment is proven to amount to conduct that is willful and wanton and would likely result in injury so as to affect the life or health of another.</p> <p>2. The immunity provided by this paragraph does not apply to damages as a result of any act or omission of providing medical care or treatment unrelated to the original situation that demanded immediate medical attention.</p>	

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Georgia	http://www.legis.ga.gov/Legislation/20192020/195211.pdf	https://gov.georgia.gov/executive-action/executive-orders/2020-executive-orders	<p>Georgia COVID-19 Pandemic Business Safety Act (SB 359)</p> <p>Section 3</p> <p>51-16-2. (a) No healthcare facility, healthcare provider, entity, or individual, shall be held liable for damages in an action involving a COVID-19 liability claim against such healthcare facility, healthcare provider, entity, or individual, unless the claimant proves that the actions of the healthcare facility, healthcare provider, entity, or individual, showed: gross negligence, willful and wanton misconduct, reckless infliction of harm, or intentional infliction of harm. (b) The immunity set forth in subsection (a) of this Code section shall be provided in addition to, and shall in no way limit, any other immunity protections that may apply in state or federal law.</p> <p>51-16-4. (a) Except for gross negligence, willful and wanton misconduct, reckless infliction of harm, or intentional infliction of harm, in an action involving a COVID-19 liability claim for transmission, infection, exposure, or potential exposure of COVID-19 to a claimant at any healthcare facility or on the premises of any healthcare provider, resulting in injury to or death of a claimant there shall be a rebuttable presumption of assumption of the risk by the claimant when a healthcare facility or a healthcare provider has posted at a point of entry, if present, to the premises, a sign in at least one-inch Arial font placed apart from any other text, a written warning stating the following: 'Warning Under Georgia law, there is no liability for an injury or death of an individual entering these premises if such injury or death results from the inherent risks of contracting COVID-19. You are assuming this risk by entering these premises.' (b) The provisions in this Code section shall not be construed so as to limit or restrict the immunities from liability provided in Code Section 51-16-2; further failure to participate as provided in subsection (a) of this Code section shall in no way limit or restrict the immunities from liability provided in Code Section 51-16-2 nor shall such failure to participate be admissible. <i>Continued on next page</i></p>	7/14/2021

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<i>Georgia continued</i>			<p>SECTION 4. This Act shall apply to causes of action accruing until July 14, 2021, and shall not apply to any causes of action accruing thereafter.</p> <p>Executive Order 4.14.20.01</p> <p>Immunity for employees, staff, and contractors of healthcare institutions and medical facilities for personal injury or property damage sustained by any person appointed or acting as a volunteer emergency management worker or member of any agency engaged in emergency management activity during the declared public health emergency, except in cases of willful misconduct, gross negligence, or bad faith.</p> <p>§ O.C.G.A Section 38-3-35 provides civil liability immunity for personal injury or property damage sustained by any person appointed or acting as a volunteer emergency management worker or member of any agency engaged in emergency management activity. Exception for personal injury or property damage resulting from cases of willful misconduct, gross negligence, or bad faith.</p>	<i>See above</i>

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Hawaii	https://governor.hawaii.gov/wp-content/uploads/2020/04/2004090-ATG_Executive-Order-No.-20-05-distribution-signed-1.pdf		<p>Executive Order 20-05: During the pendency of the Emergency Proclamations, health care facilities, that in good faith comply completely with all state and federal orders regarding the disaster emergency, shall be immune from civil liability for any death or injury to persons, or property damage alleged to have been caused by any act or omission by the health care facility, which death of or injury to persons, or property damage occurred at a time when the health care facility was engaged in the course of rendering assistance to the State by providing health care services in response to the COVID-19 outbreak, unless it is established that such death or injury to persons, or property damage was caused by willful misconduct, gross negligence, or recklessness of the health care facility.</p> <p>During the pendency of the Emergency Proclamations, health care professionals, who in good faith comply completely with all state and federal orders regarding the disaster emergency, shall be immune from civil liability for any death or injury to persons, or property damage alleged to have been caused by any act or omission by the health care professional, which death of or injury to persons, or property damage occurred at a time when the health care professional was engaged in the course of rendering assistance to the State by providing health care services in response to the COVID-19 outbreak, unless it is established that such death or injury to persons, or property damage was caused by willful misconduct, gross negligence, or recklessness of the health care professional.</p> <p>During the pendency of the Emergency Proclamations, any health care volunteer, who in good faith comply completely with all state and federal orders regarding the disaster emergency, shall be immune from civil liability for any death of or injury to persons, or property damage alleged to have been caused by any act or omission by the health care volunteer at a time when the health care volunteer was engaged in the course of rendering assistance to the State by providing services, assistance, or support in response to the COVID-19 outbreak, unless it is established that such death of or injury to persons, or property damage was caused by the willful misconduct, gross negligence, or recklessness of the health care volunteer.</p>	Terminated on March 25, 2022

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Idaho	https://legislature.idaho.gov/wp-content/uploads/sessioninfo/2020spcl/legislation/H0006.pdf		<p>CORONA VIRUS LIMITED IMMUNITY ACT</p> <p>6-3401. SHORT TITLE. This chapter shall be known and may be cited as the "Corona Virus Limited Immunity Act."</p> <p>"Person" means any entity recognized in this state and shall include but not be limited to an individual, corporation, limited liability company, partnership, trust, association, church or religious organization, city, county, school district, college, university or other institution of higher education, or other unit of local government. However, "person" shall not include any Idaho public health district; the federal government or any of its agencies; the state of Idaho or any of its agencies, except colleges, universities, and other institutions of higher education; nor any foreign government or foreign jurisdiction.</p> <p>3403. LIMITED IMMUNITY FROM LIABILITY.</p> <p>(1) Subject to the other provisions of this section, a person is immune from civil liability for damages or an injury resulting from exposure of an individual to coronavirus.</p> <p>(2) Immunity as described in this section shall not apply to acts or omissions that constitute an intentional tort or willful or reckless misconduct as defined in section 6-1601, Idaho Code.</p> <p>(3) Nothing in this chapter shall be construed to modify the application of title 72, Idaho Code, worker's compensation and related laws of the industrial commission.</p> <p>(4) The immunity provided in this section is in addition to any other immunity protection that may apply in state or federal law.</p> <p>SECTION 2. An emergency existing therefor, which emergency is hereby declared to exist, this act shall be in full force and effect on and after its passage and approval.</p> <p>SECTION 3. The provisions of Section 1 of this act shall be null, void, and of no force and effect on and after July 1, 2021.</p>	<p>Pursuant to H 444 till July 1, 2023</p>

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Illinois	https://www2.illinois.gov/Pages/ExecutiveOrders/ExecutiveOrder2020-19.aspx	https://www2.illinois.gov/Pages/ExecutiveOrders/ExecutiveOrder2020-37.aspx	<p>Executive Order 2020-19 & Executive Order No. 2020-17: During the pendency of the Gubernatorial Disaster Proclamation, Health Care Facilities shall be immune from civil liability for any injury/death alleged to have been caused by any act/ omission by the Health Care Facility, which injury or death occurred when Health Care Facility was engaged in the course of rendering assistance to the State by providing health care services in response to the COVID-19 outbreak, unless it is established that such injury/death was caused by gross negligence or willful misconduct of such Health Care Facility or by willful misconduct.</p> <p>During the pendency of the Gubernatorial Disaster Proclamations, Health Care Professionals, shall be immune from civil liability for any injury/ death alleged to have been caused by any act/omission by the Health Care Professional, which injury/death occurred when a Health Care Professional was engaged in the course of rendering assistance to the State by providing health care services in response to the COVID-19 outbreak, unless it is established that such injury or death was caused by gross negligence or willful misconduct of such Health Care Professional or by willful misconduct.</p> <p>Executive Order 37: Immunity for Hospitals that continue to cancel or postpone all elective surgeries/ procedures in order to respond to the COVID-19 outbreak, or Health Care Professionals providing service in such a Hospital, for any injury or death alleged to have been caused by any act or omission by the Hospital or Health Care Professional, which injury or death occurred at a time when a Hospital or Health Care Professional was rendering assistance to the State in response to the COVID-19 outbreak by providing health care services consistent with current guidance issued by IDPH. Immunity for Hospitals that conduct elective surgeries/procedures beginning on or after 5/11/2020, or Health Care Professionals providing services in such a Hospital, <i>Continued on next page</i></p>	Rescinded on June 26, 2020

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Illinois <i>continued</i>		https://www2.illinois.gov/Pages/Executive-Orders/ExecutiveOrder2020-44.aspx	for any injury or death relating to the diagnosis, transmission, or treatment of COVID-19 alleged to have been caused by any act or omission by the Hospital or the Health Care Professional, which injury or death occurred at a time when a Hospital or Health Care Professional was rendering assistance to the State in response to the COVID-19 outbreak by providing health care services consistent with current guidance issued by IDPH. Immunity for Health Care Facilities or Health Care Professionals providing services in a Health Care Facility, for any injury/death relating to the diagnosis, transmission, or treatment of COVID-19 alleged to have been caused by any act/ omission by the Health Care Facility or the Health Care Professional, which injury or death occurred at a time when a Health Care Facility or Health Care Professional was rendering assistance to the State in response to the COVID-19 outbreak by providing health care services consistent with current guidance issued by IDPH. Immunity for any Health Care Volunteer, for any injury/death alleged to have been caused by any act/omission by such Health Care Volunteer, which injury or death occurred at a time when the Health Care Volunteer was rendering assistance to the State in response to the COVID-19 outbreak by providing services, assistance, or support consistent with current guidance issued by IDPH. Immunity does not include acts of gross negligence or willful misconduct.	See above
Indiana*	http://iga.in.gov/legislative/2021/bills/house/1002#document-124867ac https://track.govhark.com/public/bills	http://iga.in.gov/legislative/laws/2019/ic/titles/034#34-30-13.5	HB 1002 http://iga.in.gov/legislative/2021/bills/house/1002#document-124867ac SECTIONS 5.IC25-1-20 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE MARCH 1, 2020 (RETROACTIVE)]: Chapter 20. Effect of a State Disaster Emergency on Professional Disciplinary Action Sec. 1. This chapter applies during a period of a state disaster emergency declared under IC10-14-3-12 to respond to COVID-19, if the state of disaster emergency was declared: (1) after February 29, 2020; and	HB 1002 - April 1, 2022 SB 1 - December 31, 2024

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Iowa	https://www.legis.iowa.gov/legislation/BillBook?ga=&ba=S5111		<p>House Amendment to Senate File 2338: A health care provider shall not be liable for civil damages for causing or contributing, directly or indirectly, to the death or injury of an individual as a result of the health care provider’s acts or omissions while providing or arranging health care in support of the state’s response to COVID-19. This subsection shall apply to all of the following: (a) Injury/death resulting from screening, assessing, diagnosing, caring for, or treating individuals with a suspected or confirmed case of COVID-19; (b). Prescribing, administering, or dispensing a pharmaceutical for off-label use to treat a patient with a suspected or confirmed case of COVID-19; or (c.) Acts or omissions while providing health care to individuals unrelated to COVID-19 when those acts or omissions support the state’s response to COVID-19, including any of the following:</p> <ol style="list-style-type: none"> 1) Delaying or canceling non-urgent or elective dental, medical, or surgical procedures, or altering the diagnosis or treatment of an individual in response to any federal or state statute, regulation, order, or public health guidance. 2) Diagnosing or treating patients outside the normal scope of the health care provider’s license or practice. 3) Using medical devices, equipment, or supplies outside of their normal use for the provision of health care, including using or modifying medical devices, equipment, or supplies for an unapproved use. 4) Conducting tests or providing treatment to any individual outside the premises of a health care facility. 5) Acts or omissions undertaken by a health care provider because of lack of staffing, facilities, medical devices, equipment, supplies, or other resources attributable to COVID-19 that renders the health care provider unable to provide the level or manner of care to any person that otherwise would have been required in the absence of COVID-19. 6) Acts or omissions undertaken by a health care provider relating to use or nonuse of personal protective equipment. <p>This section shall not relieve any person of liability for civil damages for any act or omission which constitutes recklessness or willful misconduct.</p>	

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Kansas**/**	http://www.kslegislature.org/li/b2021_22/statute/060_000_0000_chapter/060_055_0000_article/	http://www.kslegislature.org/li/2012/b2011_12/statute/065_000_0000_chapter/065_028_0000_article/065_028_0091_section/065_028_0091_k/	<p>K.S.A. 60-5503. Healthcare provider immunity. COVID-19 public health emergency. [Effective until July 1, 2021]</p> <p>(a) Notwithstanding any other provision of law, except as provided in subsection (c), a healthcare provider is immune from civil liability for damages, administrative fines or penalties for acts, omissions, healthcare decisions or the rendering of or the failure to render healthcare services, including services that are altered, delayed or withheld, as a direct response to any state of disaster emergency declared pursuant to K.S.A. 48-924, and amendments thereto, related to the COVID-19 public health emergency.</p> <p>(b) The provisions of this section shall apply to any claims for damages or liability that arise out of or relate to acts, omissions or healthcare decisions occurring during any state of disaster emergency declared pursuant to K.S.A. 48-924, and amendments thereto, related to the COVID-19 public health emergency.</p> <p>(c)</p> <p>(1) The provisions of this section shall not apply to civil liability when it is established that the act, omission or healthcare decision constituted gross negligence or willful, wanton or reckless conduct.</p> <p>(2) The provisions of this section shall not apply to healthcare services not related to COVID-19 that have not been altered, delayed or withheld as a direct response to the COVID-19 public health emergency.</p> <p>K.S.A. §60-5503. Healthcare provider immunity. COVID-19 public health emergency. [Effective July 1, 2021]</p> <p>(a) Notwithstanding any other provision of law, except as provided in subsection (c), a healthcare provider is immune from civil liability for damages, administrative fines or penalties for acts, omissions, healthcare decisions or the rendering of or the failure to render healthcare services, including services that are altered, delayed or withheld, as a direct response to the COVID-19 public health emergency.</p> <p>(b) The provisions of this section shall apply to any claims for damages or liability that arise out of or relate to acts, omissions or healthcare decisions occurring between March 12, 2020, and March 31, 2022, related to the COVID-19 public health emergency. <i>Continued on next page</i></p>	3/31/2022

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<p><i>Kansas continued</i></p>			<p>(c) (1) The provisions of this section shall not apply to civil liability when it is established that the act, omission or healthcare decision constituted gross negligence or willful, wanton or reckless conduct. (2) The provisions of this section shall not apply to healthcare services not related to COVID-19 that have not been altered, delayed or withheld as a direct response to the COVID-19 public health emergency.</p> <p>K.S.A. 60-5508. Retroactivity. [Effective until July 1, 2021] (a) The provisions of sections 11, 12 & 14, and amendments thereto, shall apply retroactively to any cause of action accruing on or after March 12, 2020. (b) The provisions of sections 10 & 13, and amendments thereto, shall apply retroactively to any cause of action accruing on or after March 12, 2020, and prior to termination of the state of disaster emergency related to COVID-19 public health emergency declared pursuant to K.S.A. 48-924, and amendments thereto.</p> <p>K.S.A. § 60-5508. Retroactivity. [Effective July 1, 2021] (a) The provisions of K.S.A. 2020 Supp. 60-5504, 60-5505 and 60-5507, and amendments thereto, shall apply retroactively to any cause of action accruing on or after March 12, 2020. (b) The provisions of K.S.A. 2020 Supp. 60-5506, and amendments thereto, shall apply retroactively to any cause of action accruing on or after March 12, 2020, and prior to termination of the state of disaster emergency related to the COVID-19 public health emergency declared pursuant to K.S.A. 48-924, and amendments thereto. (c) The provisions of K.S.A. 2020 Supp. 60-5503, and amendments thereto, shall apply retroactively to any cause of action accruing on or after March 12, 2020, and prior to March 31, 2022.</p> <p>K.S.A 65-2891 provides limited civil liability immunity to healthcare professionals for acts or omissions stemming from emergency care or assistance provided to an injured person. Exception for gross negligence and willful or wanton acts or omissions.</p> <p>K.S.A 48-915 provides civil liability immunity whenever a proclamation is issued delaring a state of disaster emergency.</p>	

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<p>Kentucky</p>	<p>https://apps.legislature.ky.gov/recorddocuments/bill/20RS/sb150/bill.pdf</p>	<p>https://track.govhawk.com/public/bills/1394947</p>	<p>Kentucky SB 5 SECTION 1. (1) As used in this section: (c) "Health care providers" means: 1. Any health facility as defined in KRS 216B.015; 2. Any person or entity providing health care or health services, including those licensed, certified, or registered under, or subject to, KRS 194A.700 to 194A.729 or KRS Chapters 310, 311, 311A, 311B, 312, 313, 314, 314A, 315, 319, 319A, 319B, 319C, 320, 327, 333, 334A, or 335; 3. The current and former employers, officers, directors, administrators, agents, or employees of those entities listed in paragraphs (a) and (b) of this subsection; or 4. Any person acting within the course and scope of his or her office, employment, or agency relating to a health care provider; (8) Those persons providing essential services related to the SARS-COV-2 pandemic and the declared emergency related to the pandemic during the period from when an emergency was declared on March 6, 2020 until one (1) year after the emergency declaration is withdrawn, revoked, or lapses, shall not, except in cases of willful, grossly negligent, or intentional misconduct, be liable for an act or omission related directly to the provision of an essential service that results in: (a) The death of or injury to an individual; (b) Damage to property; or (c) Any other harm or injury alleged to have resulted from, or that is related to, in whole or in part, the facilities, premises, or work of an essential services provider or changes in the medical, manufacturing, or educational environment made in response to the SARS-COV-2 pandemic or the SARS24 COV-2 declared emergency. <i>Continued on next page</i></p>	<p>12/31/2023</p>

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<p><i>Kentucky continued</i></p>			<p>(9) All decisions made by an essential service provider in carrying out executive actions related to the SARS-COV-2 pandemic or to executive actions taken under the SARS-COV-2 emergency declaration shall be considered discretionary.</p> <p>(10) The following businesses and service providers shall be deemed essential service providers for the duration of the SARS-COV-2 declaration of emergency, first entered March 6, 2020:</p> <p>(a) The following service providers identified in Executive Order No. 2020-257 dated March 25, 2020:</p> <ol style="list-style-type: none"> 1. Organizations that provide charitable and social services; 2. Individuals and businesses needed for transportation; 3. Financial institutions; 4. Mail, post, shipping, and pick-up services; 5. Individuals and businesses that produce, supply, prepare, and sell food; 6. Home-based care and services; 7. Individuals and businesses that work in the supply chain for critical medical and pharmaceutical products; <p>(b) Health care providers;</p> <p>(c) Medicaid waiver providers;</p> <p>(d) Elementary and secondary schools, whether public or private;</p> <p>(e) Child care service providers and facilities;</p> <p>(f) Local government agencies and political subdivisions; and</p> <p>(g) Manufacturers located in the Commonwealth of Kentucky that produced or are producing, or that distributed or are distributing, medical, medicinal, hygienic items such as face masks and hand sanitizers, or other personal protective equipment.</p> <p><i>Continued on next page</i></p>	

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<i>Kentucky continued</i>			<p>Section 8. Whereas Section 1 of this Act provides liability protection and immunity and sets forth the legal requirements for bringing suit against any owner or person providing essential services during an emergency, disaster, or catastrophe, and whereas the SARS-COV-2 virus pandemic appeared in Kentucky in early March 2020, leading to executive actions that altered the relationships and interactions among members of the public beginning with the declaration of an emergency on March 6, 2020, Section 1 this Act shall be retroactive to March 6, 2020.</p> <p>Section 10. Section 1 of this Act is repealed effective Dec. 31, 2023. (Became Law 4/11/2021) Senate Bill 20 RS SB 150/EN</p> <p>AN ACT relating to the state of emergency in response to COVID-19 and declaring an emergency. Provides immunity for a health care provider who in good faith renders care or treatment of a COVID-19 patient during the state of emergency.</p> <p>Defense to civil liability for ordinary negligence for any personal injury resulting from said care or treatment, or from any act or failure to act in providing or arranging further medical treatment, if the health care provider acts as an ordinary, reasonable, and prudent health care provider would have acted under the same or similar circumstances. Includes a health care provider who:</p> <ul style="list-style-type: none"> o Prescribes or dispenses medicines for off-label use to attempt to combat; o Provides health care services, upon the request of health care facilities or public health entities, that are outside of the provider's professional scope of practice; o Utilizes equipment or supplies outside of the product's normal use for medical practice and the provision of health care services. <p>With regard to the cancellation of elective procedures, the Provider will be considered in compliance with the federal directives to proceed with any elective procedures that:</p> <ul style="list-style-type: none"> o The health care provider deems to be emergent or urgent o Or provided by a Physical therapists, Occupational therapists, Speech-language, Speech pathologists, Pain management facilities or an, Alcohol and drug abuse treatment programs 	
Louisiana*	http://legis.la.gov/egis/Law.aspx?d=207689		<p>LSA R.S.29:771(B)(2)(c)</p> <p>Provides civil liability immunity to any healthcare providers who causes the death of, or injury to, any person or damage to any property during a declared public health emergency; excepts gross negligence or willful misconduct.</p>	

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<p>Maine**</p>	<p>https://legislature.maine.gov/statutes/37-B/title37-Bsec784-A.html</p>	<p>https://legislature.maine.gov/statutes/37-B/title37-Bsec822.html</p>	<p>37-B M.R.S. § 784-A The Maine Emergency Management Agency and local organizations for emergency management may employ any person considered necessary to assist with emergency management activities. All persons called and employed for assistance shall proceed as directed by the Maine Emergency Management Agency or the local organization. Any person called and employed for assistance either within the State or in another state under chapter 16 or in a Canadian province under chapter 16-A is deemed to be an employee of the State for purposes of immunity from liability pursuant to sections 822, 926 and 940 and for purposes of workers' compensation insurance pursuant to sections 823, 928 and 942, except for persons excluded from the definition of employee pursuant to Title 39-A, section 102, subsection 11. A person holding a professional license in the State may be designated a member of the emergency management forces in that professional capacity only after the individual or the license issuer provides confirmation of a valid license.</p> <p>37-B M.R.S. § 822 Neither the State nor any of its agencies or political subdivisions nor a person called out pursuant to section 784-A, including a voluntary and uncompensated grantor of a permit for the use of the grantor's premises as an emergency management shelter, may, while engaged in any emergency management activities and while complying with or attempting to comply with this chapter or any rule adopted pursuant to this chapter, be liable for the death of or injury to any person, or damage to property, as a result of those activities. This section does not affect the right of any person to receive benefits to which that person would otherwise be entitled under this chapter, under the Maine Workers' Compensation Act of 1992, under any pension law or under any act of Congress.</p>	
<p>Maryland*</p>	<p>https://governor.maryland.gov/wp-content/uploads/2020/04/Alternate-Care-Sites-4.20.20.pdf</p>	<p>https://law.justia.com/codes/maryland/2014/public-safety/title-14/subtitle-3a/section-14-3a-06/</p>	<p>Executive Order 20-04-20-01 Grants immunity to Health care providers at any alternate care site who act in good faith and under the catastrophic health emergency proclamation are immune from civil or criminal liability.</p> <p>Grants immunity to Maryland Responds Medical Reserve Corps volunteers who provide services at an alternate care site have the immunity.</p> <p>Code, Public Safety § 14-3A-06 Provides civil or criminal liability immunity to a healthcare provider who acts in good faith and under a catastrophic health emergency proclamation.</p>	<p>Terminated July 1, 2022</p>

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Massachusetts	https://malegislature.gov/Laws/SessionLaws/Acts/2020/Chapter64		<p>Chapter 64 of the Acts of 2020</p> <p>Civil liability immunity to healthcare professionals and facilities for any damages alleged to have been sustained by an act or omission in the course of providing healthcare services in good faith during COVID-19 emergency pursuant to an emergency rule. Exception for acts or omissions constituting gross negligence, recklessness or conduct with an intent to harm to discriminate based on race, ethnicity, national origin, religion, disability, sexual orientation, or gender identity by a healthcare facility or professional providing healthcare services.</p> <p>Also provides civil immunity to a volunteer organization for damages arising from the use of organization's facility to render medical treatment related to COVID-19 emergency, unless damages resulted from organization's gross negligence, recklessness, or conduct with an intent to harm.</p>	15-Jun-21
Michigan*	https://legiscan.com/Mi/text/HB6159/2019	http://www.legislature.mi.gov/(S(3kxhq2ilt5u23bkgohuwoox))/mileg.aspx?page=getobject&objectname=mcl-30-411	<p>HB 6159 Pandemic Healthcare Immunity Act</p> <p>Sec. 3. As used in this act:</p> <p>(b) "Health care facility" means an entity that is 1 or more of the following:(i) A health facility or agency as defined in section 20106 of the public health code, 1978 PA 368, MCL 333.20106; (ii) A state-owned surgical center; (iii) A state-operated outpatient facility; (iv) A state-operated veterans facility; or (v) A facility used as surge capacity for any of the healthcare facilities described in this subdivision.</p> <p>(c) "Health care provider" means an individual that is 1 or more of the following:</p> <p>(i) An individual licensed under article 15 of the public health code, 1978 PA 368, MCL 333.16101 to 333.18838.</p> <p>(ii) An individual permitted to engage in the practice of a health profession under section 16171(c) of the public health code, 1978 PA 368, MCL 333.16171.</p> <p>(iii) Emergency medical services personnel as defined in section 20904 of the public health code, 1978 PA 368, MCL 333.20904.</p> <p>(iv) A student, volunteer, or any other licensed healthcare professional at a health care facility.</p> <p>(d) "Health care services" means services provided to an individual by a healthcare facility or healthcare provider regardless of the location where those services are provided, including the provision of healthcare services via telehealth or other remote method.</p> <p>Sec. 5. A healthcare provider or healthcare facility that provides healthcare services in support of this state's response to the COVID-19 pandemic is not liable for an injury, including death, sustained by an individual by reason of those services, regardless of how, under what circumstances, or by what cause those injuries are sustained, unless it is established that the provision of the services constituted willful misconduct, gross negligence, intentional and willful criminal misconduct, or intentional infliction of harm by the healthcare provider or healthcare facility.</p> <p>The liability protection provided by this act applies retroactively, and applies on or after March 29, 2020 and before July 14, 2020. <i>Continued on next page</i></p>	

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State	Guidance Link	Adttl. Guidance Link	Medical Malpractice Immunity during COVID-19 Pandemic	End Date
Michigan <i>continued</i>			<p>MCLS § 30.411</p> <p>(4) A person licensed to practice medicine or osteopathic medicine and surgery or a licensed hospital, whether licensed in this or another state or by the federal government or a branch of the armed forces of the United States, or an individual listed in subsection (6), who renders services during a state of disaster declared by the governor and at the express or implied request of a state official or agency or county or local coordinator or executive body, is considered an authorized disaster relief worker or facility and is not liable for an injury sustained by a person by reason of those services, regardless of how or under what circumstances or by what cause those injuries are sustained. The immunity granted by this subsection does not apply in the event of an act or omission that is willful or gross negligence. If a civil action for malpractice is filed alleging an act or omission that is willful or gross negligence resulting in injuries, the services rendered that resulted in those injuries shall be judged according to the standards required of persons licensed in this state to perform those services.</p>	
Minnesota*	https://www.revisor.mn.gov/statutes/cite/12.61		<p>Minn. Stat. § 12.61</p> <p>Subd. 2. Emergency Executive Order.</p> <p>(a) During a national security emergency or a peacetime emergency declared under section 12 .31, the governor may issue an emergency executive order upon finding that the number of seriously ill or injured persons exceeds the emergency hospital or medical transport capacity of one or more regional hospital systems and that care for those persons has to be given in temporary care facilities.</p> <p>(b) During the effective period of the emergency executive order, a responder in any impacted region acting consistent with emergency plans is not liable for any civil damages or administrative sanctions as a result of good faith acts or omissions by that responder in rendering emergency care, advice, or assistance. This section does not apply in case of malfeasance in office or willful or wanton actions.</p>	

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Mississippi	https://legiscan.com/MS/text/SB3049/2020		<p>SB 3049</p> <p>SECTION 3: (1) A person, or agent of that person, who attempts in good faith to follow applicable public health guidance shall be immune from suit for civil damages for any injuries or death resulting from or related to actual or alleged exposure or potential exposure to COVID-19 in the course of or through the performance or provision of its functions or services; (2) A person, or agent of that person, shall be immune from suit for civil damages for injuries or death resulting from or related to actual or alleged exposure or potential exposure to COVID-19 in the course of or through the performance or provision of its functions or services in the time before applicable public health guidance was available; (3) An owner, lessee, occupant or any other person in control of a premises, who attempts, in good faith, to follow applicable public health guidance and directly or indirectly invites or permits any person onto a premises shall be immune from suit for civil damages for any injuries or death resulting from or related to actual or alleged exposure or potential exposure to COVID-19.</p> <p>SECTION 4. (1) Any health care professional or health care facility shall be immune from suit for any injury or death directly or indirectly sustained because of the health care professional's or health care facility's acts or omissions while providing health care services related to a COVID-19 state of emergency. The immunity takes effect when the COVID-19 state of emergency is declared, applies to any health care services performed during the COVID-19 state of emergency, including any period of renewal or extension, and terminates one (1) year after the end of the COVID-19 state of emergency. The immunity includes, but is not limited to, injury or death resulting from screening, assessing, diagnosing or treating persons in relation to the COVID-19 state of emergency or the medical conditions causing the COVID-19 state of emergency, or acts or omissions while providing health care services to persons unrelated to the COVID-19 state of emergency when those acts or omissions were intended to support the state's response to the COVID-19 state of emergency, including, but not limited to, the following: (a) Delaying or cancelling nonurgent or elective dental, medical or surgical procedures, or altering the diagnosing or treatment of any person in response to an order, directive or guideline issued by the federal, state or a local government; <i>Continued on next page</i></p>	20-Nov-22

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<i>Mississippi continued</i>			<p>(b) Diagnosing or treating patients outside the normal scope of the health care professional's license or practice; (c) Using equipment or supplies outside of the product's normal use for medical practice and the provision of health care services, including using or modifying a medical device for an unapproved use or indication; (d) Prescribing, administering or dispensing a pharmaceutical for off-label use to treat a patient in relation to a COVID-19 state of emergency; (e) Conducting tests or providing treatment to any person outside of the premises of standard health care facilities; or (f) Acts or omissions undertaken by a health care professional or health care facility because of a lack of staffing, facilities, equipment, supplies or other resources attributable to the COVID-19 state of emergency that make it impractical for the health care professional or health care facility to provide the level or manner of care to any person that otherwise would have been required in the absence of the COVID-19 state of emergency; (2) This act shall be liberally construed with regard to immunizing health care professionals or health care facilities for acts or omissions undertaken while providing health care services related to a COVID-19 state of emergency.</p> <p>SECTION 6. (1) Notwithstanding any other provision of this act, the immunities provided in this act shall not apply where the plaintiff shows, by clear and convincing evidence, that a defendant, or any employee or agent thereof, acted with actual malice or willful, intentional misconduct.</p>	<i>See above</i>

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Missouri	https://legiscan.com/MO/text/SB51/id/2397135/Missouri-2021-SB51-Enrolled.pdf		<p>537.1000. As used in sections 537.1000 to 537.1035, 2 the following terms mean:</p> <p>(11) "Health care provider", any physician, hospital, health maintenance organization, ambulatory surgical center, long-term care facility including those licensed under chapter 198, dentist, registered or licensed practical nurse, optometrist, podiatrist, pharmacist, chiropractor, professional physical therapist, psychologist, physician-in 79 training, any person authorized to practice consumer directed services, personal care assistance services, or home-based care, any person providing behavioral or mental health services, any person or entity that provides health care services pursuant to a license or certificate, and the respective employers or agents of any such person or entity providing health care services, and any person, health care system, or other entity that takes measures to coordinate, arrange for, provide, verify, respond to, or address issues related to the delivery of health care services;</p> <p>537.1010. 1. Notwithstanding any other provision of law to the contrary, and except as provided in subsection 2 of this section, no health care provider shall be liable in a COVID-19 medical liability action unless the plaintiff can prove:</p> <p>(1) Recklessness or willful misconduct by the health care provider; and</p> <p>(2) That the alleged harm, damage, breach, or tort resulting in the personal injury was caused by the alleged recklessness or willful misconduct.</p> <p>2. For purposes of this section, an elective procedure that is delayed with good cause shall not be considered recklessness or willful misconduct. In any COVID-19 related action, punitive damages:</p> <p>(1) May be awarded in accordance with sections 510.261 to 510.265 and subsection 8 of section 538.210; and</p> <p>(2) Shall not exceed an amount in excess of nine times the amount of compensatory damages awarded.</p> <p>1. The provisions of sections 537.1000 to 537.1035 shall expire four years after the effective date of this act.</p> <p>2. Except as otherwise explicitly provided for in the provisions of sections 537.1000 to 537.1035, nothing in sections 537.1000 to 537.1035 expands any liability otherwise imposed or limits any defense otherwise available.</p>	7/7/2025

State Medical Malpractice Immunity During COVID-19

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Montana*	https://legiscan.com/MT/text/SB65/id/2287895/Montana-2021-SB65-Enrolled.pdf		<p>SB 65</p> <p>Section 1. Definitions. As used in [sections 1 through 8], unless the context clearly indicates otherwise, the following definitions apply:</p> <p>(2) "Health care professional" means, for the purposes of [sections 1 through 8], physicians, physician assistants, nurse practitioners, nurses, nursing assistants, chiropractors, pharmacists, pharmacy technicians, dentists, dental hygienists, optometrists, medication aides, respiratory therapist practitioners, professional counselors, occupational therapists, midwives, psychologists, and other health care practitioners who are licensed, certified, or otherwise authorized or permitted by the laws of this state to administer health care services in the ordinary course of business or in the practice of a profession, whether paid or unpaid. This term includes persons engaged in telemedicine as defined in 33-22-138, and a similar professional's employer or agent who provides or arranges health care.</p> <p>(3) "Health care provider" means and includes, for the purposes of [sections 1 through 8], a health care professional, health care facility, home health care facility, assisted living facility, and any other person or facility otherwise authorized or permitted by any federal or state statute, regulation, order, or public health guidance to administer health care services or treatment. It does not include a government entity or a health care professional that is employed by a government entity.</p> <p>Section 4. Liability of health care providers. A health care provider is not liable for civil damages for causing or contributing, directly or indirectly, to the death or injury of an individual as a result of the health care provider's acts or omissions while providing or arranging health care in support of the response to covid-19 unless the health care provider caused the death or injury of an individual through an act or omission that constitutes gross negligence, willful and wanton misconduct, or an intentional tort. This section applies to:</p> <p>(1) injury or death resulting from screening, assessing, diagnosing, caring for, or treating individuals with a suspected or confirmed case of covid-19;</p> <p>(2) prescribing, administering, or dispensing a pharmaceutical for off-label use to treat a patient with a suspected or confirmed case of covid-19; <i>Continued on next page</i></p>	[This act] terminates January 1, 2031.

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<p><i>Montana continued</i></p>			<p>(3) acts or omissions while providing health care to individuals with a condition unrelated to covid-19 when those acts or omissions support the response to covid-19, including the following:</p> <ul style="list-style-type: none"> (a) delaying or canceling nonurgent or elective dental, medical, or surgical procedures, or altering the diagnosis or treatment of an individual in response to a federal or state statute, regulation, order, or public health guidance; (b) diagnosing or treating patients outside the normal scope of the health care provider's license or practice; (c) using medical devices, equipment, or supplies outside of their normal use for the provision of health care, including using or modifying medical devices, equipment, or supplies for an unapproved use; (d) conducting tests or providing treatment to an individual outside the premises of a health care facility; (e) acts or omissions undertaken by a health care provider because of a lack of staffing, facilities, medical devices, equipment, supplies, or other resources attributable to covid-19 that renders the health care provider unable to provide the level or manner of care to a person that otherwise would have been required in the absence of covid-19; or (f) acts or omissions undertaken by a health care provider relating to the use or nonuse of personal protective equipment. <p>Section 6. Affirmative defense -- reasonable measures consistent with regulations, orders, and public health guidance.</p> <ul style="list-style-type: none"> (1) In addition to all other defenses, a person may assert as an affirmative defense that the person took reasonable measures consistent with a federal or state statute, regulation, order, or public health guidance related to covid-19 that was applicable to the person or activity at issue at the time of the alleged injury, death, or property damage. (2) If two or more sources of public health guidance are applicable, a person does not breach a duty of care if the person took reasonable measures consistent with one applicable set of public health guidance. (3) If a person proves the affirmative defense contained in this section, the affirmative defense is a complete bar to any action relating to covid-19. (4) This section may not be construed to impose liability on a person for failing to comply with a federal or state statute, regulation, order, or public health guidance related to covid-19. <p><i>Continued on next page</i></p>	

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<p><i>Montana continued</i></p>		<p>https://leg.mt.gov/bills/mca/title_0100/chapter_0030/part_0010/section_0100/0100-0030-0010-0100.html</p>	<p>10-3-110, MCA</p> <p>(1) Except as provided in subsection (3), a health care professional licensed to practice in Montana who, in good faith and regardless of compensation, renders or fails to render emergency care, health care services, or first aid during a declared emergency or disaster is not liable for any civil damages or injury unless the damages or injury was caused by gross negligence or willful and wanton misconduct and as a result of:</p> <ul style="list-style-type: none"> (a) an act or omission arising out of activities undertaken in response to the disaster or emergency; (b) any act or omission related to the rendering of or failure to render services; or (c) evacuation or treatment or the failure to evacuate or provide treatment conducted in accordance with disaster medicine or at the direction of military or government authorities. <p>(2) A licensing program, licensing board, or any other disciplinary authority in Montana may impose administrative sanctions upon a health care professional for unprofessional conduct in response to a declared public health emergency that occurs in Montana. An administrative disciplinary sanction imposed upon a health care professional who is licensed in another state must be reported to the licensing authority in the health care professional’s state and each state in which the health care professional is licensed. The standard of review for administrative disciplinary sanctions must be whether the health care professional exercised good faith clinical judgment given the circumstances under which the judgment was exercised.</p> <p>(3) This section does not apply to a health care provider employed by the United States, a state, or a political subdivision acting within the scope of the provider’s employment or duties.</p>	
<p>Nebraska</p>				

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Nevada**	https://www.leg.state.nv.us/App/NELEIS/REL/32nd2020Special/Bill/7156/Text	https://gov.nv.gov/News/EmergencyOrders/2020-04-01-COVID-19-Declaration-of-Emergency-Dir-ective-011/	<p>SB 4</p> <p>Sec. 25. 1. "Business" means a natural person, or a corporation, partnership, association or other business organization, engaging in an activity for profit at a premises located in this State.</p> <p>2. The term does not include a business that operates: (a) An agency to provide nursing in the home as defined in NRS 449.0015; (b) A facility for hospice care as defined in NRS 449.0033; (c) A facility for intermediate care as defined in NRS 449.0038; (d) A facility for skilled nursing as defined in NRS 449.0039; (e) A hospital as defined in NRS 449.012; or (f) An independent center for emergency medical care as defined in NRS 449.013.</p> <p>Sec. 26. "COVID-19" means: 1. The novel coronavirus identified as SARS-CoV-2; 2. Any mutation of the novel coronavirus identified as SARS-CoV-2; or 3. A disease or health condition caused by the novel coronavirus identified as SARS-CoV-2.</p> <p>Sec. 28. 1. "Nonprofit organization" means any private organization not operated for profit. 2. The term, includes, without limitation, an organization for youth sports or an alumni, charitable, civic, educational, fraternal, patriotic, religious, labor or veterans' organization, a credit union organized under the provisions of chapter 672 of NRS or the Federal Credit Union Act, or a state or local bar association, that:</p> <p>(a) Has been determined pursuant to NRS 372.326 to be created for religious, charitable or educational purposes; or (b) Qualifies as a tax exempt organization pursuant to 26 U.S.C. § 501(c).</p> <p>3. The term does not include a nonprofit organization that operates: (a) An agency to provide nursing in the home as defined in NRS 449.0015; (b) A facility for hospice care as defined in NRS 449.0033; (c) A facility for intermediate care as defined in NRS 449.0038; (d) A facility for skilled nursing as defined in NRS 449.0039; (e) A hospital as defined in NRS 449.012; or (f) An independent center for emergency medical care as defined in NRS 449.013.</p> <p><i>Continued on next page</i></p>	

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Nevada <i>continued</i>		https://www.leg.state.nv.us/NRS/NRS-414.html#NRS414Sec110	<p>Sec. 29. 1. In any civil action where a plaintiff alleges a personal injury or death as a result of exposure to COVID-19 while on a premises owned or operated by an entity, or during an activity conducted or managed by the entity:</p> <p>(a) The complaint must be pled with particularity.</p> <p>(b) If the entity was in substantial compliance with controlling health standards, the entity is immune from liability unless the plaintiff pleads sufficient facts and proves that:</p> <p>(1) The entity violated controlling health standards with gross negligence; and</p> <p>(2) The gross negligence was the proximate cause of the plaintiff’s personal injury or death.</p> <p>(c) If the entity was not in substantial compliance with controlling health standards:</p> <p>(1) The plaintiff may pursue any claim recognized at common law or by statute; and</p> <p>(2) The immunity described in paragraph (b) does not apply to the entity.</p> <p>2. The court shall determine as a matter of law whether an entity was in substantial compliance with controlling health standards at the time of an alleged exposure to COVID-19. The plaintiff has the burden of establishing the entity was not in substantial compliance with controlling health standards.</p> <p>3. As used in this section:</p> <p>(a) “Controlling health standards” means any of the following that are clearly and conspicuously related to COVID-19 and that prescribed the manner in which an entity must operate at the time of the alleged exposure: (1) A federal, state or local law, regulation or ordinance; or (2) A written order or other document published by a federal, state or local government or regulatory body.</p> <p>(b) “Entity” means a business, governmental entity or nonprofit organization and the officers and employees of the business, governmental entity or nonprofit organization.</p> <p>(d) “Substantial compliance” means the good faith efforts of an entity to help control the spread of COVID-19 in conformity with controlling health standards. The entity may demonstrate substantial compliance by establishing policies and procedures to enforce and implement the controlling health standards in a reasonable manner. Isolated or unforeseen events of noncompliance with the controlling health standards do not demonstrate noncompliance by the entity.</p>	
			<p>The provisions of sections 24 to 29, inclusive, of this act apply only to a cause of action or claim arising from a personal injury or death specified in section 29 of this act that accrues before, on or after the effective date of this act and before the later of: 1. The date on which the Governor terminates the emergency described in the Declaration of Emergency for COVID-19 issued on March 12, 2020; or 2. July 1, 2023.</p> <p>Directive 011: Clarifies that healthcare professionals performing emergency management services in response to the COVID-19 pandemic pursuant to NRS 414.110 will be immune from civil liability. The directive also requires professional licensing boards to temporarily waive licensing requirements pertaining to out-of-state, foreign, and other skilled medical professionals who are not licensed in the state. The directive temporarily authorizes professionals to practice outside their scope of practice, within the limits of competency.</p> <p>NRS 414.110 provides civil liability immunity to healthcare professionals who perform emergency management services. Exception for cases of willful misconduct, gross negligence, or bad faith.</p>	

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<p>New Hampshire**</p>	<p>https://law.justia.com/codes/new-hampshire/2015/title-i/chapter-21-p/section-21-p-41</p>		<p>RSA 21-P:41</p> <p>I. All functions under this subdivision and all other activities relating to emergency management are hereby declared to be governmental functions. Neither the state nor any of its political subdivisions nor any agency of the state or political subdivision, nor any private corporations, organizations, or agencies, nor any emergency management worker complying with or reasonably attempting to comply with this subdivision, or any order or rule adopted or regulation promulgated pursuant to the provisions of this subdivision, or pursuant to any ordinance relating to precautionary measures enacted by any political subdivision of the state, shall be liable for the death of or injury to persons, or for damage to property, as a result of any such activity. The provisions of this section shall not affect the right of any person to receive benefits to which he or she would otherwise be entitled under this subdivision, under the workers' compensation law, or under any retirement law, nor the right of any such person to receive any benefits or compensation under any act of Congress.</p> <p>II. Any requirement for a license to practice any professional, mechanical, or other skill shall not apply to any authorized emergency management worker who shall, in the course of performing his or her duties as such, practice such professional, mechanical, or other skill during an emergency.</p> <p>III. As used in this section the term "emergency management worker" includes any full or part-time paid, volunteer, or auxiliary employee of this state, other states, territories, possessions, the District of Columbia, the federal government, any neighboring country, or of any political subdivision of such entities, or of any corporation, agency or organization, public or private, performing emergency management services at any place in this state subject to the order or control of, or pursuant to a request of, the state government or any of its political subdivisions.</p> <p><i>Continued on next page</i></p>	

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<p><i>New Hampshire continued</i></p>			<p>IV. Dentists licensed in this state, nurses registered in this state, student nurses undergoing training at a licensed hospital in this state, or emergency medical care providers licensed under RSA 153-A, during any emergency, shall be regarded as authorized emergency management workers and while so engaged may practice, in addition to the authority granted them by other statutes, administration of anesthetics; minor surgery; intravenous, subcutaneous, and intramuscular procedures; and oral and topical medication under the general but not necessarily direct supervision of a member of the medical staff of a legally incorporated and licensed hospital of this state, and to assist such staff members in other medical and surgical procedures.</p> <p>V. Any emergency management worker, performing emergency management services at any place in this state pursuant to agreements, compacts or arrangements for mutual aid and assistance, to which the state or one of its political subdivisions is a party, shall possess the same powers, duties, immunities, and privileges the worker would ordinarily possess if performing his or her duties in the state or political subdivision in which normally employed or rendering services.</p> <p>VI. Any emergency management worker shall:</p> <p>(a) If the worker is an employee of the state, have the powers, duties, rights, and privileges and receive the compensation incidental to his or her employment;</p> <p>(b) If the worker is an employee of a political subdivision of the state, whether serving within or without such political subdivision, have the powers, duties, rights, privileges, and immunities and receive the compensation incidental to his or her employment; and</p> <p>(c) If the worker is not an employee of the state or one of its political subdivisions, be entitled to the same rights as to compensation for injuries as are provided by law for the employees of this state. The emergency management personnel shall, while on duty, be subject to the operational control of the authority in charge of emergency management activities in the area in which they are serving, and shall be reimbursed for all actual travel and subsistence expenses incurred under orders issued by the director.</p>	

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New Jersey	https://nj.gov/infobank/eo/056murphy/pdf/EO-112.pdf	https://legiscan.com/NJ/text/S2333/id/2179928/New_Jersey-2020-S2333-Chaptered.html	<p>Executive Order 112</p> <p>Any individual granted a temporary license, certificate, registration or certification to practice a healthcare profession/occupation in connection with the State’s COVID-19 response, including those granted pursuant to paragraph 1 or 2 of this Order, shall be immune from civil liability for any damages alleged to have been sustained as a result of the individual’s acts or omissions undertaken in good faith, whether or not within the scope of the licensee’s practice, in the course of providing healthcare services in support of the State’s COVID-19 response, whether or not such immunity is otherwise available under current law. Such immunity shall not extend to acts or omissions that constitute a crime, actual fraud, actual malice, gross negligence or willful misconduct.</p> <p>Any indiv. holding a license, certificate, registration or certification to practice a healthcare profession or occupation in NJ, including but not limited to any advanced practice nurse or physician assistant acting outside the scope of their ordinary practice pursuant to paragraph 3 or 4 of this Order, shall be immune from civil liability for any damages alleged to have been sustained as a result of the individual’s acts or omissions undertaken in good faith in the course of providing healthcare services in support of the State’s COVID-19 response, whether or not within the scope of their practice and whether or not such immunity is otherwise available under current law. Such immunity shall not extend to acts or omissions that constitute a crime, actual fraud, actual malice, gross negligence or willful misconduct.</p> <p>Any healthcare facility, within the meaning of N.J.S.A. 26:13-2, any modular field treatment facility, and any other site designated by the Commissioner of the Dept of Health for temp use for the purpose of providing essential services in support of the State’s COVID-19 response, including hotels & student dormitories, shall be immune from civil liability for any damages alleged to have been sustained as a result of an act or omission undertaken in good faith in the course of providing services in support of the State’s COVID-19 response by 1 or more of its agents, officers, employees, servants, reps or volunteers, if, and to the extent, such agent, officer, employee, servant, rep or volunteer is immune from liability, whether or not such immunity is otherwise available under current law. Such immunity shall not extend to acts or omissions that constitute a crime, actual fraud, actual malice, gross negligence or willful misconduct.</p> <p><i>Continued on next page</i></p>	September 1, 2021 (Pursuant to Assembly Bill 5820)

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<p><i>New Jersey continued</i></p>			<p>P.L. 2020, c.18: 1.(c). Notwithstanding the provisions of any law, rule, or regulation to the contrary: (1) a health care professional shall not be liable for civil damages for injury or death alleged to have been sustained as a result of an act or omission by the health care professional in the course of providing medical services in support of the State's response to the outbreak of coronavirus disease during the public health emergency and state of emergency declared in Executive Order 103 of 2020; and (2) a health care facility or a health care system that owns or operates more than one health care facility shall not be liable for civil damages for injury or death alleged to have been sustained as a result of an act or omission by one or more of its agents, officers, employees, servants, reps or volunteers, if, and to the extent, such agent, officer, employee, servant, representative or volunteer is immune from liability pursuant to paragraph (1) of this subsection.</p> <p>Immunity shall also include any act or omission undertaken in good faith by a health care professional, healthcare facility or a health care system to support efforts to treat COVID-19 patients and prevent the spread of COVID-19 during the public health emergency/state of emergency declared in Executive Order 103 of 2020, including but not limited to engaging in telemedicine or telehealth, and diagnosing or treating patients outside the normal scope of the health care professional's license or practice. The immunity granted shall not apply to acts or omissions constituting a crime, actual fraud, actual malice, gross negligence, recklessness, or willful misconduct, and shall be retroactive to March 9, 2020.</p> <p>1.(d). Notwithstanding the provisions of any law, rule, or regulation to the contrary, a health care facility or a health care system that owns or operates more than one health care facility shall not be criminally or civilly liable for damages for injury or death alleged to have been sustained as a result of an act or omission by the facility or system or one or more of the facility's or system's agents, officers, employees, servants, rep or volunteers during the public health emergency and state of emergency declared in Executive Order 103 of 2020 in connection with the allocation of mechanical ventilators or other scarce medical resources, if the health care facility or system adopts and adheres to a scarce critical resource allocation policy that at a minimum incorporates the core principles identified by the Commissioner of Health in an executive directive or administrative order, and the health care facility's or system's agents, officers, employees, servants, rep and volunteers shall not be civilly or criminally liable for an injury caused by any act or omission pursuant to this subsection during the public health emergency and state of emergency declared in Executive Order 103 of 2020 pursuant to, and consistent with, such policy.</p>	<p><i>See above</i></p>
<p>New Mexico</p>				

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New York**	http://public.leginfo.state.ny.us/lawssrch.cgi?NVLWO:	https://legislation.nysenate.gov/pdf/bills/2019/s8835	<p>SB 8835 which amends PBH Article 30D - Section 3082:</p> <p>1. Notwithstanding any law to the contrary, except as provided in subdivision two of this section, any healthcare facility or healthcare professional shall have immunity from any liability, civil or criminal, for any harm or damages alleged to have been sustained as a result of an act or omission in the course of providing healthcare services, if:</p> <p>(a) the healthcare facility or healthcare professional is providing healthcare services in accordance with applicable law, or where appropriate pursuant to a COVID-19 emergency rule;</p> <p>(b) the act or omission occurs in the course of providing healthcare services and the treatment of the individual is impacted by the healthcare facility's or healthcare professional's decisions or activities in response to or as a result of the COVID-19 outbreak and in support of the state's directives; and</p> <p>(c) the healthcare facility or healthcare professional is providing healthcare services in good faith.</p> <p>2. The immunity provided by subdivision one of this section shall not apply if the harm or damages were caused by an act or omission constituting willful or intentional criminal misconduct, gross negligence, reckless misconduct, or intentional infliction of harm by the healthcare facility or healthcare professional providing healthcare services, provided, however, that acts, omissions or decisions resulting from a resource or staffing shortage shall not be considered to be willful or intentional criminal misconduct, gross negligence, reckless misconduct, or intentional infliction of harm.</p> <p>3. Notwithstanding any law to the contrary, a volunteer organization shall have immunity from any liability, civil or criminal, for any harm or damages irrespective of the cause of such harm or damage occurring in or at its facility or facilities arising from the state's response and activities under the COVID-19 emergency declaration and in accordance with any applicable COVID-19 emergency rule, unless it is established that such harm or damages were caused by the willful or intentional criminal misconduct, gross negligence, reckless misconduct, or intentional infliction of harm by the volunteer organization.</p>	<p>Repealed on April 6, 2021 (pursuant to Senate Bill S5177)</p>

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<p>North Carolina</p>	<p>https://www.ncleg.gov/Sessions/2019/Bills/Senate/PDF/S704v6.pdf</p>	<p>https://www.ncleg.net/EnactedLegislation/Statutes/HTML/ByChapter/Chapter_166A.html</p>	<p>Emergency or Disaster Treatment Protection Act (SB 704) § 90-21.133. Immunity. (a) Notwithstanding any law to the contrary, except as provided in subsection (b) of this section, any health care facility, health care provider, or entity that has legal responsibility for the acts or omissions of a health care provider shall have immunity from any civil liability for any harm or damages alleged to have been sustained as a result of an act or omission in the course of arranging for or providing health care services only if all of the following apply:</p> <p>(1)The health care facility, health care provider, or entity is arrangin for or providing health care services during the period of the COVID-19 emergency declaration, including, but not limited to, the arrangement or provision of those services pursuant to a COVID-19 emergency rule.</p> <p>(2)The arrangement or provision of health care services is impacted, directly or indirectly: a. By a health care facility, health care provider, or entity's decisions or activities in response to or as a result of the COVID-19 pandemic; or b. By the decisions or activities, in response to or as a result of the COVID-19 pandemic, of a health care facility or entity where a health care provider provides health care services.</p> <p>(3) The health care facility, health care provider, or entity is arranging for or providing health care services in good faith.</p> <p>(b)The immunity from any civil liability provided in subsection (a) of this section shall not apply if the harm or damages were caused by an act or omission constituting gross negligence, reckless misconduct, or intentional infliction of harm by the health care facility or health care provider providing health care services; provided that the acts, omissions, or decisions resulting from a resource or staffing shortage shall not be considered to be gross negligence, reckless misconduct, or intentional infliction of harm. <i>Continued on next page</i></p>	<p>15-Aug-22</p>

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<p><i>North Carolina continued</i></p>			<p>(c) Notwithstanding any law to the contrary, a volunteer organization shall have immunity from any civil liability for any harm or damages occurring in or at its facility or facilities arising from the State's response and activities under COVID-19 emergency declaration and in accordance with any applicable COVID-19 emergency rule, unless it is established that such harm or damages were caused by the gross negligence, reckless misconduct, or intentional infliction of harm by the volunteer organization.</p> <p>SECTION 3D.7.(b) This section is effective when it becomes law and applies to acts or omissions occurring during the time of Executive Order No. 116 issued on March 10, 2020, and any subsequent time period during which a state of emergency is declared to be in effect during calendar year 2020 by the Governor in response to COVID-19.</p> <p>N.C.G.S 166A-19.60 provides immunity from liability for the death of or injury to any person, or damage to any property, for emergency management workers complying with or reasonably attempting to comply with requirements under state emergency management law. Exceptions to these protections exist for acts occurring through willful misconduct, gross negligence, or bad faith.</p>	

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North Dakota	https://legiscan.com/ND/text/1175/2021		<p>HB 1175</p> <p>SECTION 1. A new chapter to title 32 of the North Dakota Century Code is created and enacted as follows:</p> <p>Safe harbor for compliance with statutes, regulations, or executive orders.</p> <p>A person is immune from civil liability for an act or omission resulting in damage or injury sustained from exposure or potential exposure to COVID - 19 if the act or omission was in substantial compliance or was consistent with a federal or state statute, regulation, or order related to COVID - 19 which was applicable to the person or activity at issue at the time of the alleged exposure or potential exposure.</p> <p>Liability of health care providers and health care facilities.</p> <p>1. A health care provider or health care facility is immune from civil liability for any act or omission in response to COVID - 19 that causes or contributes, directly or indirectly, to the death or injury of an individual. The immunity provided under this subsection includes:</p> <p>a. Injury or death resulting from screening, assessing, diagnosing, caring for, triaging, or treating an individual with a suspected or confirmed case of COVID - 19.</p> <p>b. Prescribing, administering, or dispensing a pharmaceutical for off-label use to treat or prevent a suspected or confirmed case of COVID - 19.</p> <p>c. An act or omission while providing a health care service to an individual unrelated to COVID - 19 if the act or omission supports the state's response to COVID - 19, including:</p> <p>(1) Delaying or canceling a nonurgent or elective dental, medical, or surgical procedure; delaying the diagnosis of an individual; or altering the treatment of an individual.</p> <p>(2) Conducting a test or providing treatment to an individual outside the premises of a health care facility.</p> <p>(3) An act or omission undertaken by a health care provider or a health care facility because of a lack of staff, facility, medical device, treatment, equipment, or other resource, attributable to COVID - 19 which renders the health care provider or health care facility unable to provide the level or manner of care to an individual which otherwise would have been required in the absence of COVID - 19.</p>	

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Ohio	https://legiscan.com/OH/text/HB606/2019		<p>House Bill 606, Section 1</p> <p>(B)</p> <p>(1) Subject to division (C)(3) of this section, a health care provider that provides healthcare services, emergency medical services, first-aid treatment, or other emergency professional care, including the provision of any medication or other medical equipment or product, as a result of or in response to a disaster or emergency is not subject to professional disciplinary action and is not liable in damages to any person or government agency in a tort action for injury, death, or loss to person or property that allegedly arises from any of the following:</p> <p>(a) An act or omission of the health care provider in the health care provider's provision, withholding, or withdrawal of those services;</p> <p>(b) Any decision related to the provision, withholding, or withdrawal of those services;</p> <p>(c) Compliance with an executive order or director's order issued during and in response to the disaster or emergency.</p> <p>(2) Division (B)(1) of this section does not apply in a tort action if the health care provider's action, omission, decision, or compliance constitutes a reckless disregard for the consequences so as to affect the life or health of the patient or intentional misconduct or willful or wanton misconduct on the part of the person against whom the action is brought.</p> <p>(3) Division (B)(1) of this section does not apply in a professional disciplinary action if the health care provider's action, omission, decision, or compliance constitutes gross negligence.</p> <p><i>Continued on next page</i></p>	9/30/2021

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<i>Ohio continued</i>			<p>(4) A health care provider is not subject to professional disciplinary action and is not liable in damages to any person or government agency in a tort action for injury, death, or loss to person or property that allegedly arises because the provider was unable to treat, diagnose, or test the person for any illness, disease, or condition, including the inability to perform any elective procedure, due to an executive or director's order or an order of a board of health of a city or general health district issued in relation to an epidemic or pandemic disease or other public health emergency.</p> <p>(C)</p> <p>(1) This section does not create a new cause of action or substantive legal right against a health care provider.</p> <p>(2) This section does not affect any immunities from civil liability or defenses established by another section of the Revised Code or available at common law to which a health care provider may be entitled in connection with the provision of health care services, emergency medical services, first-aid treatment, or other emergency professional care, including the provision of medication, medical equipment, or other medical product.</p> <p>(3) This section does not grant an immunity from tort or other civil liability or a professional disciplinary action to a health care provider for actions that are outside the skills, education, and training of the health care provider, unless the health care provider undertakes the action in good faith and in response to a lack of resources caused by a disaster or emergency.</p> <p>(4) This section does not affect any legal responsibility of a health care provider to comply with any applicable law of this state or rule of an agency of this state.</p> <p><i>Continued on next page</i></p>	<i>See above</i>

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<i>Ohio continued</i>			<p>(5) Division (B) of this section applies only to the provision, withholding, or withdrawal of health care services, emergency medical services, first-aid treatment, or other emergency professional care, including the provision of any medication or other medical equipment or product, decisions related to such services or care, or compliance with an executive order or director's order by a healthcare provider as a result of or in response to a disaster or emergency and through the duration of the disaster or emergency.</p> <p>SECTION 2.</p> <p>(A) No civil action for damages for injury, death, or loss to person or property shall be brought against any person if the cause of action on which the civil action is based, in whole or in part, is that the injury, death, or loss to person or property is caused by the exposure to, or the transmission or contraction of, MERS-CoV, SARS-CoV, or SARS-CoV-2, or any mutation thereof, unless it is established that the exposure to, or the transmission or contraction of, any of those viruses or mutations was by reckless conduct or intentional misconduct or willful or wanton misconduct on the part of the person against whom the action is brought.</p> <p>(B) A government order, recommendation, or guideline shall neither create nor be construed as creating a duty of care upon any person that may be enforced in a cause of action or that may create a new cause of action or substantive legal right against any person with respect to the matters contained in the government order, recommendation, or guideline. A presumption exists that any such government order, recommendation, or guideline is not admissible as evidence that a duty of care, a new cause of action, or a substantive legal right has been established.</p>	<i>See above</i>

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Oklahoma	http://webserver1.sb.state.ok.us/cf_pdf/2019-20%20ENR/SB/SB300%20ENR.PDF		<p>COVID-19 Public Health Emergency Limited Liability Act (SB 300)</p> <p>C. A health care facility or health care provider shall be immune from civil liability for any loss or harm to a person with a suspected or confirmed diagnosis of COVID-19 caused by an act or omission by the facility or provider that occurs during the COVID-19 public health emergency, if:</p> <ol style="list-style-type: none"> 1.The act or omission occurred in the course of arranging for or providing COVID-19 health care services for the treatment of the person who was impacted by the decisions, activities or staffing of, or the availability or capacity of space or equipment by, the health care facility or provider in response to or as a result of the COVID-19 public health emergency; and 2.The act or omission was not the result of gross negligence or willful or wanton misconduct of the health care facility or health care provider rendering the health care services. <p>D. In no event shall this act be construed to grant immunity from civil liability for an act or omission in the provision of health care services to a person who did not have a suspected or confirmed diagnosis of COVID-19 at the time of the services.</p> <p>E. This act shall apply to any civil action filed on or after the effective date of this act. The provisions of this act shall be in effect until October 31, 2020, or until such time as the Governor affirmatively concludes the emergency declarations specified in paragraph 1of subsection B of this section, whichever is later.</p> <p>76 O.S. § 5.9. Limited Civil Immunity for Rendering Care, Aid, Shelter, or Assistance During a Natural Disaster or Catastrophy: Any individual, business, church or school that renders emergency care, aid, shelter or other assistance during a natural disaster or catastrophic event shall not be liable for damages resulting from the rendering of emergency care, aid, shelter or assistance unless the damage was caused by the gross negligence or willful or wanton misconduct of the individual or entity rendering the emergency care, aid, shelter or assistance.</p>	Terminated on May 4, 2021 (pursuant to Executive Order 2021-07)
Oregon				
Pennsylvania	https://www.governor.pa.gov/wp-content/uploads/2020/05/20200506-GOV-health-care-professionals-protection-order-COVID-19.pdf		<p>Executive Order 5-6: Any individual who holds a license, certificate, registration or certification or is otherwise authorized to practice a health care occupation in the Commonwealth, any health care facility, and any alternate care site, community based testing site, or non-congregate care facility and who is engaged in emergency services activities or the provision of disaster services activities related to the Commonwealth's COVID- 19 disaster emergency response, shall be immune from civil liability and shall not be liable for the death of or any injury to a person or for loss of or damage to property as a result of the emergency services activity or disaster services activity described above, except in the cases of willful misconduct or gross negligence, to the fullest extent permitted by law.</p> <p>This grant of immunity shall not extend to health care professionals rendering non-COVID-19 medical and health treatment or services to individuals.</p>	10-Jun-21

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<p>Rhode Island</p>	<p>https://governor.ri.gov/documents/orders/Executive-Order-20-70.pdf</p>	<p>https://governor.ri.gov/documents/orders/Executive-Order-21-38.pdf</p>	<p>Executive Order 20-70: "Immunity for Responding Health Care Facilities, Health Care Workers and Other": The following are deemed and/or affirmed to be "disaster response workers" entitled to immunity under R.I. Gen. Laws§ 30-15-15(a) and to provide services beyond or without a license as permitted by R.I. Gen. Laws§ 30-15-15(b):</p> <p>a. All persons and organizations subject to this Order, including health care workers providing community-based health care, services at surge hospitals and services in existing hospitals, nursing facilities and alternative nursing care sites. However, nothing in this Order provides immunity to such persons and organizations, including health care workers, for negligence that occurs in the course of providing patient care to patients without COVID-19 whose care has not been altered by the existence of this disaster emergency.</p> <p>§ 30-15-15. Immunity from liability -- Compensation for death or injury of disaster response workers (a) All functions under this chapter, and all other activities relating to disaster response, are hereby declared to be governmental functions. Neither the state, nor any political subdivision thereof, nor other agencies of the state or political subdivision thereof, nor, except in cases of willful misconduct, gross negligence, or bad faith, any disaster response worker complying with, or reasonably attempting to comply with this chapter, or any order, rule, or regulation promulgated pursuant to the provisions of this chapter, or pursuant to any ordinance relating to precautionary measures enacted by any political subdivision of the state, shall be liable for the death of, or injury to, persons, or for damage to property, as a result of disaster response activity. The provisions of this section shall not affect the right of any person to receive benefits to which he or she would otherwise be entitled under this chapter, nor under the Workers' Compensation Act, chapters 29 — 38 of title 28, nor under any pension law, nor the right of any person to receive any benefits or compensation under any act of Congress.</p> <p>(b) Any requirement for a license to practice any professional, mechanical, or other skill shall not apply to any authorized disaster response worker who shall, in the course of performing his or her duties as such, practice such professional, mechanical, or other skill during a disaster emergency.</p>	<p>EO 20-70 terminated on May 1, 2021,</p>

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<p>South Carolina*</p>	<p>https://www.scstatehouse.gov/sess124_2021-2022/prever/147_20210421.htm</p>	<p>https://www.scstatehouse.gov/code/t44c004.php</p>	<p>S 147</p> <p>SECTION 1. This joint resolution must be known and may be cited as the "South Carolina COVID-19 Liability Immunity Act".</p> <p>SECTION 2. The General Assembly hereby finds and declares that providing businesses and health care providers with reasonable protections from the risk and expense of lawsuits related to actual, alleged, or feared exposure to or contraction of the coronavirus will help encourage them to reopen and remain open and will help to protect those who provided services or goods that were novel or altered in an effort to combat the coronavirus pandemic. Providing such immunity to businesses and health care providers that operate consistently with applicable public health guidance will help ameliorate the adverse impacts of a closed economy and the resulting unemployment.</p> <p>SECTION 3. The following terms shall have the following meanings unless otherwise specified:</p> <p>(1) "Coronavirus claim" means any claim or cause of action arising from:</p> <p>(a) an actual, alleged, or feared exposure to or contraction of coronavirus:</p> <p>(i) from the premises of a covered entity;</p> <p>(ii) from the operations, products, or services provided on-premises or off-premises for a covered entity; or</p> <p>(iii) from the acts or omissions of a covered individual or covered entity, to include the delay or withholding of medical care for the treatment or diagnosis of the coronavirus;</p> <p>(b)(i) the prescribing or dispensing of medicines for off-label use to attempt to combat the coronavirus;</p> <p>(ii) the providing of health care services related to the coronavirus that are outside of a provider's professional scope of practice; or</p> <p>(iii) the utilizing of equipment or supplies to combat or treat the coronavirus in a manner outside of the equipment or supplies' normal use in medical practice or in the provision of health care services; or</p> <p>(c) the manufacturing or donating of precautionary equipment or supplies, including personal protective equipment, due to shortages that occurred during the coronavirus pandemic.</p> <p>(2) "Coronavirus disease 2019" or "coronavirus", commonly abbreviated as "COVID-19", means the virus generally known as "severe acute respiratory syndrome coronavirus 2", any mutation thereof, and any</p>	<p>December 3, 2021</p>

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			<p>(C)</p> <p>(1) Any health care provider appointed by the department pursuant to this section must not be held liable for any civil damages as a result of medical care or treatment including, but not limited to, trauma care and triage assessment, related to the appointment of the health care provider and the prescribed duties unless the damages result from providing, or failing to provide, medical care or treatment under circumstances demonstrating a reckless disregard for the consequences so as to affect the life or health of the patient.</p> <p>(2) This subsection applies if the health care provider does not receive payment from the State other than as allowed in Section 8-25-40 for the appointed services and prescribed duties. However, if the health care provider is an employee of the State, the health care provider may continue to receive compensation from the health care provider’s employer. This subsection applies whether the health care provider was paid, should have been paid, or expected to be paid for the services at the time of rendering the services from sources including, but not limited to, Medicaid, Medicare, reimbursement under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. Section 512, et seq., or private health insurance.</p>	

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<p>South Dakota</p>	<p>https://legiscan.com/SD/text/HB1046/id/2279708/South-Dakota-2021-HB1046-Enrolled.pdf</p>		<p>HB 1046 ENTITLED An Act to limit liability for certain exposures to COVID-19. BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF SOUTH DAKOTA: Section 1. That a NEW SECTION be added: 21-68-1. Definitions. Terms used in this Act mean: (1) "COVID-19," the novel coronavirus identified as SARS-CoV-2, the disease caused by the novel coronavirus SARS-CoV-2 or a virus mutating therefrom, and conditions associated with the disease caused by the novel coronavirus SARS-CoV2 or a virus mutating therefrom; (2) "Disinfecting or cleaning supplies," hand sanitizers, disinfectants, sprays, and wipes; (3) "First responders," law enforcement officers, firemen, emergency medical services workers, and other similarly situated persons; (4) "Health care facility": (a) Any facility regulated under chapter 34-12; or (b) Residential care facilities, nursing facilities, intermediate care facilities for persons with mental illness, intermediate care facilities for persons with intellectual disabilities, hospice programs, elder group homes, dental clinics, orthodontic clinics, optometric clinics, chiropractic clinics, and assisted living programs; (5) "Health care professional," physicians and other health care practitioners who are licensed, certified, or otherwise authorized or permitted by the laws of this state to administer health care services in the ordinary course of business or in the practice of a profession, whether paid or unpaid, including persons engaged in telemedicine or telehealth. The term includes the employer or agent of a health care professional who provides or arranges health care;21.196.15 2 99 (6) "Health care provider," a health care professional, health care facility, home health care facility, and any other person or facility otherwise authorized or permitted by any federal or state statute, rule, order, or</p>	<p>December 31, 2022</p>

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Tennessee	https://legiscan.com/TN/text/SB8002/2019		<p>Tennessee Code Annotated, is amended by adding the following as a new section 29-34-801. This part shall be known and may be cited as the "Tennessee COVID-19 Recovery Act."</p> <p>29-34-802.</p> <p>(a) As used in this part:</p> <p>(1) "Arising from COVID-19" means caused by or resulting from the actual, alleged, or possible exposure to or contraction of COVID-19, or caused by or resulting from services, treatment, or other actions in response to COVID-19, including, but not limited to:</p> <p>(A) Implementing policies and procedures to prevent or minimize the spread of COVID-19;</p> <p>(B) Testing;</p> <p>(C) Monitoring, collecting, reporting, tracking, tracing, disclosing, or investigating COVID-19 exposure or other COVID-19-related information;</p> <p>(D) Using, designing, manufacturing, providing, donating, or servicing precautionary, diagnostic, collection, or other health equipment or supplies, such as personal protective equipment;</p> <p>(E) Closing or partially closing to prevent or minimize the spread of COVID-19;</p> <p>(F) Delaying or modifying the schedule or performance of any medical procedure; or</p> <p>(G) Providing services or products in response to government appeal or repurposing operations to address an urgent need for personal protective equipment, sanitation products, or other products necessary to protect the public;</p> <p>(2) "COVID-19" means the novel coronavirus, SARS-CoV-2, and coronavirus disease 2019, commonly referred to as COVID-19, including any mutation of SARS-CoV-2 or COVID-19;</p> <p>(3) "Healthcare provider " means a healthcare practitioner, person, or facility licensed, authorized, certified, registered, or regulated under title 33, title 63, title 68, federal law or order, or an executive order of the governor, including but not limited to any employees, agents, or contractors of such a practitioner, person, or facility, and residents, interns, students, fellows, or volunteers of an accredited school or of such school's affiliated teaching or training hospitals or programs in Tennessee; and</p> <p style="text-align: right;"><i>Continued on next page</i></p>	<p>This act is repealed on July 1, 2022, but continues to apply to any loss, illness, injury, or death occurring before that date.</p>

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<p><i>Tennessee continued</i></p>			<p>(4) "Person" means an individual, healthcare provider, sole proprietorship, corporation, limited liability company, partnership, trust, religious organization, association, nonprofit organization described in § 501(c) of the Internal Revenue Code that is exempt from federal income taxation under § 501(a) of the Internal Revenue Code, 26 U.S.C. § 501(a), or any other legal entity whether formed as a for-profit or not-for-profit entity.</p> <p>(b) Notwithstanding any law to the contrary, there is no claim against any person for loss, damage, injury, or death arising from COVID-19, unless the claimant proves by clear and convincing evidence that the person caused the loss, damage, injury, or death by an act or omission constituting gross negligence or willful misconduct.</p> <p>(c)</p> <p>1) In any claim alleging loss, damage, injury, or death arising from COVID-19, the claimant must file a verified complaint pleading specific facts with particularity from which a finder of fact could reasonably conclude that the alleged loss, damage, injury, or death was caused by the defendant's gross negligence or willful misconduct.</p> <p>(2) In any claim alleging loss, damage, injury, or death based on exposure to or contraction of COVID-19, the claimant must also file a certificate of good faith stating that the claimant or claimant's counsel has consulted with a physician duly licensed to practice in the state or a contiguous bordering state, and the physician has provided a signed written statement that the physician is competent to express an opinion on exposure to or contraction of COVID-19 and, upon information and belief, believes that the alleged loss, damage, injury, or death was caused by an alleged act or omission of the defendant or defendants.</p> <p>(3) The failure of a claimant to satisfy the requirements of subdivisions(c)(1) and (2), if required by subdivision (c)(2), shall, upon motion, make the action subject to dismissal with prejudice</p> <p>(d) This part does not:</p> <p>(1) Create a cause of action;</p> <p>(2) Eliminate a required element of any existing cause of action.</p> <p>(3) Affect workers' compensation claims under the Workers' Compensation Law, compiled in title 50, chapter 6, including the exclusive application of such law; or</p> <p>(4) Amend, repeal, alter, or affect any immunity, defense, limitation of liability, or procedure available or required under law or contract.</p> <p>This act is repealed on July 1, 2022, but continues to apply to any loss, illness, injury, or death occurring before that date.</p>	<p><i>See above</i></p>

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Texas	https://legiscan.com/TX/text/SB6/id/2407683/Texas-2021-SB6-Enrolled.html		<p>SB 6</p> <p>SECTION 2. Subchapter D, Chapter 74, Civil Practice and Remedies Code, is amended by adding Section 74.155 to read as follows:</p> <p>Sec. 74.155. LIABILITY OF PHYSICIANS, HEALTH CARE PROVIDERS, AND FIRST RESPONDERS DURING PANDEMIC.</p> <p>(a) In this section:</p> <p>(1) "Disaster declaration" means a declaration of a state of disaster or emergency by the president of the United States applicable to the entire state, a declaration of a state of disaster by the governor under Chapter 418, Government Code, for the entire state, and any amendment, modification, or extension of the declaration.</p> <p>(2) "First responder" has the meaning assigned by Section 421.095, Government Code.</p> <p>(3) "Pandemic disease" means an infectious disease that spreads to a significant portion of the population of the United States and that poses a substantial risk of a significant number of human fatalities, illnesses, or permanent long-term disabilities.</p> <p>(b) Except in a case of reckless conduct or intentional, willful, or wanton misconduct, a physician, health care provider, or first responder is not liable for an injury, including economic and noneconomic damages, or death arising from care, treatment, or failure to provide care or treatment relating to or impacted by a pandemic disease or a disaster declaration related to a pandemic disease if the physician, health care provider, or first responder proves by a preponderance of the evidence that:</p> <p>(1) a pandemic disease or disaster declaration related to a pandemic disease was a producing cause of the care, treatment, or failure to provide care or treatment that allegedly caused the injury or death; or</p> <p>(2) the individual who suffered injury or death was diagnosed or reasonably suspected to be infected with a pandemic disease at the time of the care, treatment, or failure to provide care or treatment.</p> <p>(c) A physician, health care provider, or first responder may not use the showing under Subsection (b)(2) as a defense to liability under Subsection (b) for negligent care, treatment, or failure to provide care or treatment</p>	

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Utah	https://le.utah.gov/~2020S3/bills/static/SB3002.html		<p>58-13-2.7. Limited immunity during a declared major public health emergency.</p> <p>(1) As used in this section:</p> <p>(f) “Qualified treatment” means the use of a prescription drug or prescription device: (i) during a declared major public health emergency; (ii) to treat a patient who has been diagnosed with illness or condition that resulted in the declared major public health emergency; and (iii) that has been approved for sale but not indicated by the United States Food and Drug Admin to treat the illness or condition described in Subsection (1)(f)(ii).</p> <p>(2)</p> <p>(a) A health care provider is immune from civil liability for any harm resulting from any act or omission in the course of providing health care during a declared major public health emergency if:</p> <p>(i) (A) the health care is provided in good faith to treat a patient for illness or condition that resulted in the declared major public health emergency; or (B) the act or omission was the direct result of providing health care to a patient for illness or condition that resulted in the declared major public health emergency; and</p> <p>(ii) the acts or omissions of the health care provider were not: (A) grossly negligent; or (B) intentional or malicious misconduct.</p> <p>(b) The immunity in Subsection (2)(a) applies: (i) even if health care provider has a duty to respond or an expectation of payment or remuneration; and (ii) in addition to any immunity protections that may apply under state or federal law.</p> <p>(c) During a declared major public health emergency, it is not a breach of the applicable standard of care for a health care provider to provide health care that is not within the health care provider’s education, training, or experience, if: (i) the health care is within the applicable scope of practice for the type of license issued to the health care provider; (ii) (A) the health care is provided in good faith to treat a patient for illness or condition that resulted in the declared major public health emergency; or(B) there is an urgent shortage of health care providers as a direct result of the declared major public health emergency; and(iii) providing the health care is not: (A) grossly negligent; or (B) intentional or malicious misconduct. <i>Continued on next page</i></p>	

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Utah continued			<p>(3)</p> <p>(a) A health care provider is not subject to civil liability, criminal liability, or sanctions against the health care provider’s license for providing a qualified treatment to a patient if:</p> <p>(i) the qualified treatment is within the scope of the health care provider’s license;</p> <p>(ii) if written recommendations have been issued by a federal government agency regarding the use of the qualified treatment for treatment of the illness or condition that resulted in the declared major public health emergency, the health care provider provides the qualified treatment in accordance with the most current written recommendations issued by the federal government agency;</p> <p>(iii) the health care provider:</p> <p>(A) describes to the patient or the patient’s representative, based on the health care provider’s knowledge of the qualified treatment, the possible positive and negative outcomes the patient could experience if the health care provider treats the patient with the qualified treatment; and</p> <p>(B) documents in the patient’s medical record the information provided to the patient or the patient’s representative under Subsection (3)(a)(iii)(A) and whether the patient or the patient’s representative consented to the treatment; and</p> <p>(iv) the acts or omissions of the health care provider were not: (A) grossly negligent; or (B) intentional or malicious misconduct.</p> <p>(b) If two or more written recommendations described in Subsection (3)(a)(ii) are issued by federal government agencies, a health care provider satisfies the requirement described in Subsection (3)(a)(ii) by providing the qualified treatment in accordance with the most current written recommendations of any one federal government agency.</p>	
Vermont	https://governor.vermont.gov/sites/scott/files/documents/ADDENDUM%20TO%20EXECUTIVE%20ORDER%201-20.pdf	https://governor.vermont.gov/sites/scott/files/documents/Addendum%2014%20to%20Amended%20and%20Restated%20Executive%20Order%20No.%2001-20.pdf	<p>Executive Order 01-20, Addendum 10</p> <p>COVID-19 Emergency Response Services, Health Care Facilities, Health Care Providers, and Health Care Volunteers, as defined herein, who are providing COVID-19 related emergency management services or response activities are granted legal immunity.</p> <p>Health Care Facilities, Health Care Providers, and Health Care Volunteers would be immune from civil liability for any death, injury, or loss resulting from COVID-19 related emergency management services or response activities, except in the case of willful misconduct or gross negligence.</p>	Terminated on June 15, 2021

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Virginia**	https://www.governor.virginia.gov/media/governorvirginia/gov/executive-actions/EO-60-Clarification-of-Certain-Immunity-From-Liability-For-Healthcare-Providers-in-Response-to-Novel-Coronavirus-(COVID-19).pdf		<p>Executive Order No. 60 (2020): References Section 8.01-225-.01 & 8.01-225.02 of the Code of Virginia which provides certain liability protection during a state of emergency, and makes it clear that the liability protections in these provisions are meant for healthcare providers providing healthcare in response to the COVID-19 health emergency.</p> <p>Section 8.01-225.01: In the absence of gross negligence or willful misconduct, any health care provider who responds to a disaster by delivering health care to persons injured in such disasters shall be immune from civil liability for any injury or wrongful death arising from abandonment by such health care provider of any person to whom such health care provider owes a duty to provide health care when (a) state/local emergency has been or subsequently declared; and (b) provider was unable to provide requisite health care to the person as a result of provider's voluntary or mandatory response to the relevant disaster.</p> <p>Section 8.01-225.02: In the absence of gross negligence or willful misconduct, any health care provider who responds to a disaster shall not be liable for any injury or wrongful death of any person arising from the delivery or withholding of health care when (a) state/local emergency has been or subsequently declared; and (b) emergency and subsequent conditions caused a lack of resources, attributable to disaster that otherwise would have been required in the absence of the emergency and which resulted in the injury or wrongful death at issue.</p>	30-Jun-21

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Washington	http://lawfilesexternal.wa.gov/Biennium/2021-22/Htm/Bills/Senate%20Bills/5271.htm		<p>SB 5271</p> <p>AN ACT Relating to amending the necessary elements of proof of injury during the state of emergency declared due to the COVID-19 pandemic; amending RCW 7.70.040; and creating a new section.</p> <p>BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:</p> <p>NEW SECTION. Sec. 1. (1) The legislature finds that the COVID-19 pandemic, a public health crisis, has placed an oversized burden on Washington's health care providers and health care facilities, as they care for communities and families.</p> <p>(2) The legislature further finds that during the pandemic, the law should accurately reflect the realities of the challenging practice conditions. It is fair and appropriate to give special consideration to the challenges arising during the pandemic, such as evolving and sometimes conflicting direction from health officials regarding treatment for COVID-19 infected patients, supply chain shortages of personal protective equipment and testing supplies, and a proclamation on nonurgent procedures resulting in delayed or missed health screenings and diagnoses.</p> <p>(3) The legislature intends, during the period of the declared state of emergency due to the COVID-19 pandemic, to amend the current standard of care law governing health care providers to give special consideration to additional relevant factors.</p> <p>Sec. 2. RCW 7.70.040 and 2011 c 336 s 251 are each amended to read as follows:</p> <p>(1) The following shall be necessary elements of proof that injury resulted from the failure of the health care provider to follow the accepted standard of care:</p> <p>((1))(a) The health care provider failed to exercise that degree of care, skill, and learning expected of a reasonably prudent health care provider at that time in the profession or class to which he or she belongs, in the state of Washington, acting in the same or similar circumstances;</p> <p>((2))(b) Such failure was a proximate cause of the injury complained of.</p> <p>(2)(a) The following shall be necessary elements of proof that injury resulted from the failure of a health care provider to follow the accepted standard of care in acting or failing to act following the proclamation of a</p>	<p>Until the state of emergency is terminated.</p>

State Medical Malpractice Immunity During COVID-19

State	Guidance Link	Addtl. Guidance Link	Medical Malpractice Immunity during COVID-19 Pandemic	End Date
West Virginia	http://www.wvlegislature.gov/Bill_Statutes/bills_text.cfm?billdoc=SB277%20SUB1%20ENR.htm&vyr=2021&sesstype=RS&i=277		<p>SB 277 ARTICLE 19. COVID-19 JOBS PROTECTION ACT. §55-19-1. Short title. This article shall be known and may be cited as the COVID-19 Jobs Protection Act. §55-19-2. Findings and purpose. (a) The West Virginia Legislature finds that: (1) The novel coronavirus, also known as COVID-19, has been deemed a pandemic and the President of the United States has declared a national emergency. (2) The Governor issued a State of Preparedness on March 4, 2020, to allow agencies to coordinate and create necessary measures to prepare for COVID-19. (3) The Governor proclaimed a State of Emergency on March 16, 2020, finding that the COVID-19 pandemic constitutes a disaster under §15-5-2 of this code. (4) To protect public health, safety, and welfare, all nonessential businesses were directed to cease all activities except for minimum basic operations in the state. (5) To protect public health, safety, and welfare, and to ensure the health care system is capable of serving all citizens in need, especially those at high risk and vulnerable to COVID-19, all West Virginia residents were directed to stay at home unless performing an essential activity. (6) Health care providers have operated with shortages of medical personnel, equipment, and supplies while responding to COVID-19 and were prohibited by Executive Order No. 16-20 from engaging in elective medical procedures. (7) There is a critical need for personal protective equipment, such as masks, respirators, ventilators, and other medical equipment and products designed to guard against or treat COVID-19. (8) Manufacturers have substantially increased production of essential products and have made products outside their ordinary course of business to aid in response to COVID-19. (9) West Virginia is reopening its businesses, including restaurants, retail stores, office buildings, fitness</p>	

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Wisconsin	https://docs.legis.wisconsin.gov/2019/related/acts/185		<p>2019 Wisconsin Act 185</p> <p>895.4801 Immunity for health care providers during COVID-19 emergency. (1) Definitions. In this section:</p> <p>(a) "Health care professional" means an individual licensed, registered, or certified by the medical examining board under subch. II of ch. 448 or the board of nursing under ch. 441.</p> <p>(b) "Health care provider" has the meaning given in s. 146.38 (1) (b) and includes an adult family home, as defined in s. 50.01 (1).</p> <p>(2) Immunity. Subject to sub. (3), any health care professional, health care provider, or employee, agent, or contractor of a health care professional or health care provider is immune from civil liability for the death of or injury to any individual or any damages caused by actions or omissions that satisfy all of the following:</p> <p>(a) The action or omission is committed while the professional, provider, employee, agent, or contractor is providing services during the state of emergency declared under s. 323.10 on March 12, 2020, by executive order 72, or the 60 days following the date that the state of emergency terminates.</p> <p>(b) The actions or omissions relate to health services provided or not provided in good faith or are substantially consistent with any of the following:</p> <ol style="list-style-type: none"> 1. Any direction, guidance, recommendation, or other statement made by a federal, state, or local official to address or in response to the emergency or disaster declared as described under par. (a). 2. Any guidance published by the department of health services, the federal department of health and human services, or any divisions or agencies of the federal department of health and human services relied upon in good faith. <p>(c) The actions or omissions do not involve reckless or wanton conduct or intentional misconduct.</p>	30-Apr-21

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Wyoming	https://legiscan.com/WY/text/SF1002/2020/X1	https://track.gowhawk.com/public/bills/1361847	<p>SF 19 (ENROLLED ACT NO. 57)</p> <p>Section 1. W.S. 1-1-141 is created to read:</p> <p>1-1-141. COVID-19 exposure and illness; assumption of the risk.</p> <p>(a) As used in this section: (iii) "COVID-19 liability claim" means a cause of action for:</p> <p>(A) The transmission, infection, exposure or potential exposure of COVID-19 to a claimant:</p> <p>(I) At any health care facility or on any person's or entity's premises that resulted in injury to or death of the claimant; or</p> <p>(II) Caused by the actions of any health care provider or other person that resulted in injury to or death of the claimant.</p> <p>(B) Acts or omissions by a health care facility or provider in arranging for or providing health care services or medical care to the claimant that resulted in injury to or death of the claimant, or where the response to COVID-19 reasonably interfered with the arranging for or the providing of health care services or medical care for the claimant; or</p> <p>(C) Manufacturing, labeling, donating or distributing personal protective equipment or sanitizer that is directly related to the provision of personal protective equipment or sanitizer to the claimant by any person or entity during the public health emergency declared under COVID-19 that departs from the normal manufacturing, labeling, donating or distributing of personal protective equipment by an entity and that proximately causes injury to or the death of the claimant.</p> <p>(b) Subject to subsection (c) of this section, in any action involving a COVID-19 liability claim against a person or entity, there shall be a rebuttable presumption that the claimant accepted and assumed the risk of catching COVID-19 if the claimant entered the premises of another person or entity.</p> <p>(c) The assumption of risk specified in subsection (b) of this section shall not apply to acts or omissions constituting gross negligence or willful or wanton misconduct. <i>Continued in next page</i></p>	

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<i>Wyoming continued</i>			<p>(d) Nothing in this section shall be construed to limit or restrict the immunity available in W.S. 35-4-114(d) or any other immunity available under law.</p> <p>Section 2. W.S. 27-14-102(a)(xi)(A), 35-4-114(a) and by creating new subsections (d) and (e) are amended to read: 27-14-102. Definitions.</p> <p>(a) As used in this act:</p> <p>(xi) "Injury" means any harmful change in the human organism other than normal aging and includes damage to or loss of any artificial replacement and death, arising out of and in the course of employment while at work in or about the premises occupied, used or controlled by the employer and incurred while at work in places where the employer's business requires an employee's presence and which subjects the employee to extra hazardous duties incident to the business. "Injury" does not include:</p> <p>(A) Any illness or communicable disease unless the risk of contracting the illness or disease is increased by the nature of the employment. For the period beginning January 1, 2020 through December 30, 2020 March 31, 2022 unless otherwise extended by the legislature, if any employee in an employment sector for which coverage is provided by this act is infected with the COVID-19 Coronavirus, it shall be presumed that the risk of contracting the illness or disease was increased by the nature of the employment;</p> <p>35-4-114. Immunity from liability.</p> <p>(a) During a public health emergency as defined by W.S. 35-4-115(a)(i) and subject to subsection (d) of this section, any health care provider or other person, including a business entity, who in good faith follows the instructions of a state, city, town or county health officer or who acts in good faith in responding to the public health emergency is immune from any liability arising from complying with those instructions or acting in good faith. This immunity shall apply to health care providers who are retired, who have an inactive license or who are licensed in another state without a valid Wyoming license and while performing as a volunteer during a declared public health emergency as defined by W.S. 35-4-115(a)(i).</p> <p><i>Continued on next page</i></p>	

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Wyoming <i>continued</i>			<p>This immunity shall not apply to acts or omissions constituting gross negligence or willful or wanton misconduct.</p> <p>(d) Any health care provider, person or entity shall be immune from liability for damages in an action involving a COVID-19 liability claim unless the person seeking damages proves that the health care provider, person or entity took actions that constitutes gross negligence or willful or wanton misconduct. Nothing in this subsection shall be construed to limit any other immunity available under law, including the immunity provided in subsection (a) of this section. As used in this subsection, "COVID-19 liability claim" means as defined by W.S. 1-1-141(a)(iii).</p> <p>(e) Any acts or omissions constituting the basis of a COVID-19 liability claim as defined by W.S. 1-1-141(a)(iii) shall be stated with particularity and shall be proven by clear and convincing evidence.</p> <p>Section 3. Notwithstanding W.S. 35-4-114(d), as created by Section 2 of this act, this act shall apply to all actions and omissions that cause injury occurring on and after the effective date of this act.</p> <p>Section 4. This act is effective immediately upon completion of all acts necessary for a bill to become law as provided by Article 4, Section 8 of the Wyoming Constitution. (Signed by Governor on 4/6/2021)</p>	

*Represents those states with immunity granted under general good samaritan laws and declared state disasters, not COVID-19 specific.

**Represents those states with civil liability immunity provided to emergency management workers