

(C) (1) THE COURT OR THE HEALTH CLAIMS ARBITRATION PANEL MAY ORDER THAT ALL OR PART OF THE FUTURE ECONOMIC DAMAGES PORTION OF THE AWARD BE PAID IN THE FORM OF ANNUITIES OR OTHER APPROPRIATE FINANCIAL INSTRUMENTS, OR THAT IT BE PAID IN PERIODIC OR OTHER PAYMENTS CONSISTENT WITH THE NEEDS OF THE PLAINTIFF, FUNDED IN FULL BY THE DEFENDANT OR THE DEFENDANT'S INSURER AND EQUAL WHEN PAID TO THE AMOUNT OF THE FUTURE ECONOMIC DAMAGES AWARD.

(2) IN THE EVENT THAT THE COURT OR PANEL SHALL ORDER THAT THE AWARD FOR FUTURE ECONOMIC DAMAGES BE PAID IN A FORM OTHER THAN A LUMP SUM, THE COURT OR PANEL SHALL ORDER THAT THE DEFENDANT OR THE DEFENDANT'S INSURER PROVIDE ADEQUATE SECURITY FOR THE PAYMENT OF ALL FUTURE ECONOMIC DAMAGES.

(3) THE COURT OR PANEL MAY APPOINT A CONSERVATOR UNDER THIS SUBSECTION FOR THE PLAINTIFF, UPON SUCH TERMS AS THE COURT OR PANEL MAY IMPOSE, WHO SHALL HAVE THE FULL AND FINAL AUTHORITY TO RESOLVE ANY DISPUTE BETWEEN THE PLAINTIFF AND THE DEFENDANT OR THE DEFENDANT'S INSURER REGARDING THE NEED OR COST OF EXPENSES FOR THE PLAINTIFF'S MEDICAL, SURGICAL, CUSTODIAL, OR OTHER CARE OR TREATMENT.

(D) IF THE PLAINTIFF UNDER THIS SECTION DIES BEFORE THE FINAL PERIODIC PAYMENT OF AN AWARD IS MADE, THE UNPAID BALANCE OF THE AWARD FOR FUTURE LOSS OF EARNINGS SHALL REVERT TO THE ESTATE OF THE PLAINTIFF AND THE UNPAID BALANCE OF THE AWARD FOR FUTURE MEDICAL EXPENSES SHALL REVERT TO THE DEFENDANT OR TO THE DEFENDANT'S INSURER IF THE INSURER PROVIDED THE FUNDS FOR THE FUTURE DAMAGES AWARD.

SECTION 2. AND BE IT FURTHER ENACTED, That every insurer providing professional liability insurance to a health care provider in this State shall submit to the Insurance Commissioner information on the nature and cost of reinsurance, the claims experience by category of health care providers, the amount of claims settlements and claims awards, the amount of reserves for claims incurred and incurred but unreported claims, the number of structured settlements used in payment of claims, and any other information relating to ~~medical~~ health care malpractice claims as prescribed by the Insurance Commissioner in rule and regulation. ~~The Insurance Commissioner may require, by rule and regulation, insurers of other lines of liability insurance to submit such reports.~~ The Insurance Commissioner shall report its findings as to the impact of this Act on the availability and affordability of ~~medical~~ health care malpractice and other liability insurance in this State to the Legislative Policy Committee of the General Assembly by October 31 of each year. This section shall remain effective through October 31, 1996, and with no further action required by the General Assembly, this section shall be abrogated and of no further force and effect.