

(2) AN ADMISSION OF LIABILITY OR FAULT THAT IS PART OF OR IN ADDITION TO A COMMUNICATION MADE UNDER PARAGRAPH (1) OF THIS SUBSECTION IS ADMISSIBLE AS EVIDENCE OF AN ADMISSION OF LIABILITY OR AS EVIDENCE OF AN ADMISSION AGAINST INTEREST IN AN ACTION DESCRIBED UNDER PARAGRAPH (1) OF THIS SUBSECTION.

~~(2) AN ADMISSION OF LIABILITY OR FAULT THAT IS PART OF OR IN ADDITION TO A COMMUNICATION MADE UNDER PARAGRAPH (1) OF THIS SUBSECTION IS ADMISSIBLE AS EVIDENCE OF AN ADMISSION OF LIABILITY OR AS EVIDENCE OF AN ADMISSION AGAINST INTEREST IN AN ACTION DESCRIBED UNDER PARAGRAPH (1) OF THIS SUBSECTION.~~

11-108.

(c) An award by the health claims arbitration panel in accordance with [§ 3-2A-06] § 3-2A-05 of this article FOR DAMAGES IN WHICH THE CAUSE OF ACTION AROSE BEFORE JANUARY 1, 2005, shall be considered an award for purposes of this section.

(E) THE PROVISIONS OF THIS SECTION DO NOT APPLY TO A VERDICT UNDER TITLE 3, SUBTITLE 2A OF THIS ARTICLE FOR DAMAGES IN WHICH THE CAUSE OF ACTION ARISES ON OR AFTER JANUARY 1, 2005.

Article - Health - General

15-102.7.

THE PREMIUM TAX IMPOSED UNDER § 6-102 OF THE INSURANCE ARTICLE APPLIES TO MANAGED CARE ORGANIZATIONS.

19-304.

(A) A HOSPITAL OR RELATED INSTITUTION SHALL:

(1) REPORT AN UNEXPECTED OCCURRENCE RELATED TO AN INDIVIDUAL'S MEDICAL TREATMENT THAT RESULTS IN DEATH OR SERIOUS DISABILITY THAT IS NOT RELATED TO THE NATURAL COURSE OF THE INDIVIDUAL'S ILLNESS OR UNDERLYING DISEASE CONDITION; AND

(2) SUBMIT THE REPORT TO THE DEPARTMENT WITHIN 5 DAYS OF THE HOSPITAL'S OR RELATED INSTITUTION'S KNOWLEDGE OF THE OCCURRENCE.

(B) A HOSPITAL OR RELATED INSTITUTION MAY REPORT TO THE DEPARTMENT AN UNEXPECTED OCCURRENCE OR OTHER INCIDENT RELATED TO AN INDIVIDUAL'S MEDICAL TREATMENT THAT DOES NOT RESULT IN DEATH OR SERIOUS DISABILITY.

(C) A HOSPITAL OR RELATED INSTITUTION SHALL:

(1) CONDUCT A ROOT CAUSE ANALYSIS OF AN OCCURRENCE REQUIRED TO BE REPORTED UNDER SUBSECTION (A) OF THIS SECTION; AND