

The background of the entire cover is a microscopic view of coronavirus particles, appearing as blue, spherical structures with numerous protruding spikes. The particles are scattered across the frame, with a larger, more detailed one in the center. The overall color palette is dominated by shades of blue and cyan.

MEDICAL MALPRACTICE & COVID-19

A stylized map of the United States, composed of a grid of small, glowing yellow dots, set against a dark blue background.

A COMPARATIVE
LAW REVIEW

Modifications to Statutes Regulating Medical Malpractice Liability

Medical Malpractice & COVID-19

A Comparative Law Review

This comparative law survey provides a comparison by state, and the District of Columbia, of any regulations enacted to protect health care workers from liability, modify licensing requirements for health care providers and facilities, and/or extend the statute of limitations as states grapple with the social health impact of the COVID-19 pandemic. The information is accurate as of December 7, 2020.

Disclaimer: This publication is for informational purposes only and is general in nature. The law is constantly changing and Wilson Elser cannot guarantee the accuracy of the information at the time it is read. Matters involving insurance claims typically are complex, involve unique situations and require careful consideration. The material is not intended to and does not constitute legal advice. Moreover, the material is not intended to and does not constitute a solicitation for the formation of an attorney-client relationship. Wilson Elser reserves the right to correct, change or update this material at any time without prior notice.

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Richard Ng – Editor
Partner
New York
212.915.5792
richard.ng@wilsonelser.com



Lori Semlies – Editor
Partner
White Plains
914.872.7731
lori.semlied@wilsonelser.com



Jodi Terranova – Editor
Partner
Washington, DC
202.626.7661
jodi.terranova@wilsonelser.com

In appreciation for their expertise and thorough research devoted to the preparation of this Medical Malpractice Liability & COVID-19 Comparative Law Review, the Editors gratefully recognize the attorneys listed on the [contributor page](#).

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The Public Readiness and Emergency Preparedness (PREP) Act of 2005 authorizes the Secretary of the United States Department of Health and Human Services (HHS) to issue a declaration providing individuals and entities with liability immunity for loss caused by, arising out of, relating to or resulting from the use of countermeasures to diseases and threats that either constitute or present a credible risk of public health emergency, with the exception of claims based on “willful misconduct.”

On March 10, 2020, the Secretary of HHS set forth a Declaration pursuant to the PREP Act, providing legal immunity to certain persons and entities performing qualified countermeasures to fight against COVID-19. Under this Declaration, which is retroactive to February 4, 2020, liability immunity is provided, in general, to individuals and entities that manufacture, develop, distribute, test, administer and dispense covered COVID-19 countermeasures. There is no liability immunity from loss or injury caused by, arising out of, relating to or resulting from “willful misconduct.” Covered countermeasures are any medication, drug, antiviral, vaccine, diagnostic test and any device used to treat, diagnose, cure, prevent or mitigate COVID-19 or a virus mutating therefrom, including any component and constituent materials of any such product. The Declaration will remain in force through October 1, 2024, but may be extended beyond that date. In addition, manufacturers are provided an additional 12 months of immunity after the Declaration expires, to aid with the disposition of countermeasures.¹

On March 27, 2020, President Trump signed into law the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). The CARES Act grants liability immunity to volunteer health care providers for acts or omissions during the course of providing health care services in response to the COVID-19 public health emergency, unless injury or death was caused by willful or criminal misconduct, gross negligence, reckless misconduct, conscious indifference or while under the influence of alcohol or intoxicating drugs.

Some states have issued legislation and Executive Orders providing liability immunity to persons and entities providing health care and medical services in good faith in response to the COVID-19 health crisis, with the exception of willful conduct or gross negligence. Some states have relaxed licensing requirements for health care providers or supervision requirements for allied health care providers and emergency response providers to permit out-of-state health care providers to practice in their state. Some states also have modified statutes of limitation, extending the time frame for bringing lawsuits in certain civil matters. The immunity and protections provided by the March 10, 2020, HHS Declaration, as well as individual state legislation and orders, include qualifications and exceptions that must be evaluated case by case to determine whether immunity exists.

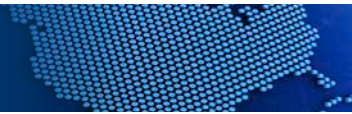
On December 3, 2020, Health and Human Services (HHS) Secretary Alex. M. Azar II issued a fourth amendment to his original Public Readiness and Emergency Preparedness (PREP) Act Declaration, which was issued on March 10, 2020, and published in the Federal Register on March 17, 2020. The newest amendment is a blockbuster for addressing current disputes involving federal jurisdiction for courts hearing disputes about the PREP Act’s application to claims for injury, and further suggests an intention for a broad application of the PREP Act, including for claims where covered countermeasures for COVID-19 have not been administered to claimants due to shortages or other limitations relating to the distribution of those countermeasures.

Read our in-depth analysis of the fourth amendment to the PREP Act [here](#).

¹ Through the Countermeasures Injury Compensation Program (CICP), the Declaration provides an avenue for compensation benefits to individuals or the estates of individuals who sustain serious physical injury as the direct result of the administration or use of covered countermeasures. To be considered for benefits, the individual or estate must establish by “compelling, reliable, valid, medical and scientific evidence” that the countermeasure is causally connected to the serious physical injury. This compensation program is overseen by the Health Resources and Services Administration, a division within HHS.

QUICK REFERENCE

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ALABAMA

What immunity is provided?

May 8, 2020, Proclamation by the Governor

A business, health care provider or other covered entity shall not be liable for the death or injury to persons arising from any act or omission related to, or in connection with, COVID-19 transmission or a covered COVID-19 response activity (definition below) unless the alleged injury, damage or death was caused by wanton, reckless, reckless, willful or intentional misconduct.

If liability is established and the actions do not result in serious physical injury, a covered entity's liability shall be limited to actual economic compensatory damages.

In no event will the covered entity be liable for non-economic or punitive damages. A party asserting a wrongful death claim is only entitled to an award for punitive damages.

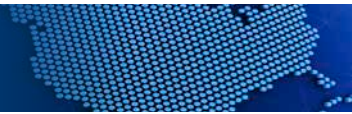
For any cause of action related to COVID-19 transmission or a covered COVID-19 response activity, where the cause of action accrued before the issuance of the proclamation, and where the above does not apply:

Standard of Care: No liability for negligence related to COVID-19 transmission or response activity unless claimant establishes by clear and convincing evidence that the covered entity did not reasonably attempt to comply with the then applicable public health guidelines.

Adjustment of Remedies: No covered entity will be liable for mental anguish, emotional distress or punitive damages but could be liable for economic compensatory damages in a cause of action that does not involve serious physical injury. Punitive damages will be awarded for wrongful death claims but no other damages in wrongful death claims may be awarded.

Covered COVID-19 response activity includes: Any performance or provision of health care services or treatment by a health care provider that resulted from, was negatively affected by, was negatively impacted by a lack of resources caused by, or was done in response to the COVID-19 pandemic or the State's response thereto.

Section 31-9-16 of the Code of Alabama All health care workers who are "Emergency Management Workers" have immunity from liability for torts resulting from emergency management activities except in cases of willful misconduct, gross negligence, or bad faith.



Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

By Governor Kay Ivey's April 2, 2020, Proclamation:

- Permits expedited reinstatement of medical licenses to qualified physicians who desire to provide health care to individuals with COVID-19 in Alabama. This reinstatement will be provided to those physicians who practiced in good standing in Alabama, who have no disciplinary history and who are competent to practice medicine with reasonable skill and safety to patients
- Permits expedited licensure or temporary permission for out-of-state medical providers who have valid licensure in other states
- Expands scope of practice for Certified Nurse Practitioners, Certified Nurse Midwives, Certified Nurse Anesthetists, Physician Assistants, and Anesthesia Assistants.

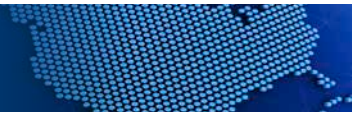
Licensure modifications currently set to expire on November 8, 2020.

On July 20, 2020, the Board and Commission extended the expiration of existing and new emergency licenses to November 17, 2020. All temporary emergency licensees that wish to continue practicing in Alabama after Nov. 17 should apply now for permanent licensure through the Board (typically 2-3 months) or the Interstate Medical Licensure Compact (within 30 days). It is anticipated that licenses should be issued within 48 hours of receipt of application.

The Board and Commission recognize the difficulty licensees may have meeting the annual continuing medical education requirement in 2020 due to the public health emergency. Consequently, all licensees (MD/DO/PA/AA) are exempt for 2020 from the annual requirement to earn 25 credits for license renewal, and no compliance audit for these 2020 credits will be conducted. Credits earned in 2020 may not be "rolled over" to 2021 to meet the 2022 license renewal requirement.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



ALASKA

What immunity is provided?

The Governor of Alaska declared a public health disaster emergency on March 11, 2020. The disaster emergency was recently extended for 30 days beginning on November 15, 2020 until December 16, 2020.

Alaska Code, Sec. 09.65.091. Civil liability for responding to disaster states that:

(a) A person who provides equipment or services on the request of a police agency, fire department, rescue or emergency squad, or other governmental agency during a state of emergency declared by an authorized representative of the state or local government is not liable for the death of or injury to any person or damage to any property caused by that person's actions, except when the trier of facts finds that the person acted intentionally, recklessly, or with gross negligence.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Healthcare providers can apply for courtesy licenses to practice in Alaska, including for purposes of providing care during a state of emergency, as declared by Governor Dunleavy. This was in place before the pandemic and the rules have not been relaxed.

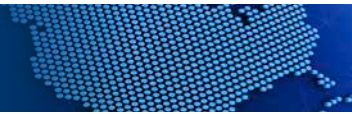
On April 10, Gov. Dunleavy signed SB 241, which says, in part, "... Notwithstanding any other provision of law, during the public health disaster emergency declared by the governor... a professional or occupational licensing board... may grant a license, permit, or certificate on an expedited basis to an individual who holds a corresponding license, permit, or certificate in good standing in another jurisdiction to the extent necessary to respond to the public health disaster emergency. A license expedited under this section expires on the earlier of September 1, 2020; or the date the governor determines... that the public health disaster emergency no longer exists..."

(J) The board, executive administrator, or the board's designee may issue an emergency courtesy license... to an applicant who practices medicine or osteopathy... to provide emergency medical or mental health care within the scope and duration of the declared emergency; a courtesy license may be issued... to a person who (1) holds a current unencumbered license to practice as a physician, osteopath, PA... in another jurisdiction... (2) submits a completed application on a form provided by the department, and... in good standing and not under investigation in the jurisdiction in which the applicant resides.

Status – Active, until the end of Alaska State of Emergency; currently scheduled to expire December 16, 2020.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



ARIZONA

What immunity is provided?

Executive Order 2020-13, issued March 23, 2020, reiterates existing law (A.R.S. Section 36-790(a)), which states that any health care provider undertaking any activity required by A.R.S. Title 36, Chapter 6, Article 9 is immune from civil or criminal liability provided they have acted in good faith.

Executive Order issued on April 9, 2020, called the “Good Samaritan Order,” grants civil liability immunity to health care providers acting in good faith. Immunity does not apply in cases of gross negligence, recklessness, or willful misconduct. The immunity extends to health care professionals, health care facilities, “any entity operating a modular treatment facility,” or any site, even a non-licensed institution, which has been designated by the Arizona Department of Health Services for temporary use in support of the COVID-19 emergency response.

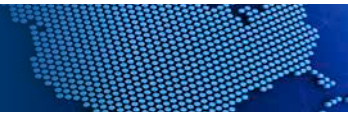
As of July 17, 2020, only health care professionals, volunteers, and organizations providing care services in support of the State’s COVID-19 public health emergency are immune from COVID-19 claims. This immunity is in place until December 31, 2020. However, these individuals and organizations are not immune from civil liability for gross negligence or willful misconduct claims.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Arizona medical board made temporary emergency licenses for physicians available to practice in Arizona due to COVID-19. Physicians licensed in another state are eligible to apply for temporary licensure in AZ using an emergency temporary licensure applications. Physicians with inactive AZ licenses are eligible for temporary reactivation if they have been on an inactive status for less than four years. These licenses will last 90 days or at the conclusion of the state of emergency.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



ARKANSAS

What immunity is provided?

Pursuant to Executive Order 20-18, dated April 13, 2020, Arkansas has expanded the definition of “emergency responders” provided in Ark. Code Ann. Section 12-75-103(7)(C), to include physicians, physician assistants, specialist assistants, nurse practitioners, licensed registered nurses, and licensed practical nurses for the purposes of providing immunity from liability for any injury or death sustained in the course of providing medical services in support of the State’s response to COVID-19; and excepting from liability immunity an emergency responder who causes injury or death and was either acting outside of his or her scope of practice or acted in gross negligence, willful misconduct, or bad faith.

The provisions provided for immunity of health care providers were extended for 60 days starting on August 14, 2020, by Executive Order 20-45.

The provisions for immunity of health care providers were extended for 60 days starting on October 13, 2020, by Executive Order 20-48.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Arkansas has enacted the Uniform Emergency Volunteer Health Practitioner Act, which allows it to recognize out-of-state licensees for a variety of health practitioners during a declared state of emergency. The Arkansas State Medical Board is expediting the licensing of health care workers under orders from the Governor. Additionally, the Arkansas Department of Health and state medical boards are also issuing temporary emergency licenses to medical residents and nursing students and waiving initial licensing fees. Arkansas Act 432 of 2009.

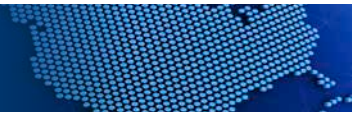
Executive Order 20-18 (April 13, 2020) orders the following for the duration of the emergency: (1) a suspension of Arkansas Code to the extent necessary to remove limits on working hours for health care providers in order to allow health care facilities to maintain adequate staffing and respond to the COVID-19 outbreak; (2) an authorization and request to emergency responders, health care providers legally permitted to practice in the state, and all licensed health care facilities legally permitted to provide services in the state to provide medical and health care assistance during the state of emergency; and (3) a suspension of Arkansas Code to the extent necessary to allow emergency medical treatment protocol developments or modifications to occur solely with the approval of the Secretary of the Arkansas Department of Health.

The Governor’s Executive Order 20-05 suspends the Rules and Regulations of the Arkansas Board of Examiners in Counseling regarding the requirement for a Technology-assisted Distance Counseling or Marriage Family Therapy specialization license do counselors and therapists in good standing with the Board may provide reasonable mental health treatment, using any technology deemed appropriate by the provider. This Order was extended for 60 days starting on August 14, 2020, by Executive Order 20-45.

The Emergency Order is currently scheduled to expire December 12, 2020, by Executive Order 20-48.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



CALIFORNIA

What immunity is provided?

Immunity for any physician or health care provider who renders services during any state of emergency at the express or implied request of any responsible state or local official or agency. This does not include a willful act or omission. Govt. Code 8659 and B&P Code 900e.

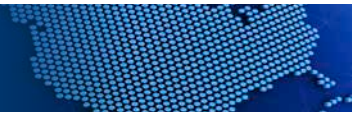
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

In Governor Newsom's March 4, 2020, State of Emergency Proclamation, the governor relaxed licensing requirements for out-of-state practitioners for duration of the pandemic. Out-of-state personnel are permitted to provide services in the same manner as those licensed by California under Government Code Section 179.5.

Executive Order N-39-20 – CME and other examination requirements for renewals of licenses that expire from 3/31 – 6/30 are waived for now; Reinstatement of inactive/retired HPCs (5 years or less) can be done within CME requirements; Nursing students can get credit for working toward clinical hour requirements; and Regulatory limits on the ratios for physicians supervising NPs have been relaxed.

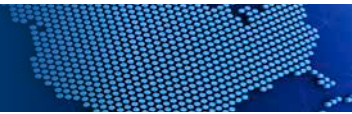
Have statutes of limitations been extended?

Statutes of limitations for civil cases that exceed 180 days are tolled from April 6, 2020, until October 1, 2020. Statutes of limitations for civil cases that do not exceed 180 days are tolled from April 6, 2020, until August 3, 2020.



COLORADO

<p>What immunity is provided?</p>	<p>Colorado has not enacted legislation or issued an order providing individuals or entities with liability immunity relating to COVID-19.</p>
<p>Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?</p>	<p>Executive Order D2020-15, issued March 25, 2020, DOH CARE POLICY AND FINANCING is authorized to allow physicians or other providers of services in Medicaid or Children’s Health Insurance Program (CHIP) to continue to provide services if their license is due to expire by the end of April 2020. Likewise, Department of Public Health and Environment authorized to extend the licenses/ certifications/ registrations of clinic, air ambulances, paramedics, assisted-living facilities and home care agencies.</p> <p>Executive Order issued on April 15, 2020, permits nurses, nurse anesthetists, physicians, physician assistants and respiratory therapists to cross train, supervise and delegate responsibilities to one another and other health care professionals so long as the delegated responsibilities are appropriate based on that professional’s education, training and experience. The Order also permits certified nurse anesthetists and anesthesiology assistants to perform airway management for COVID-19 patients. Also, rules for nurses regarding the completion of clinic training and written examinations are suspended, and temporary certifications of nurse aides will be permitted.</p> <p>Division of Professions and Occupations, Board of Nursing Emergency Rule (May 1, 2020): Allows the Board of Nursing to temporarily register on the advanced practice registry an applicant that is a new graduate of an approved advanced practice nurse program who meets all qualifications for registry with the exception of national certification, provided the lack of national certification is due to unavailability of the examination required for such certification.</p> <p>Colorado Board of Nursing Temporary Emergency Rule (May 11, 2020): Expands delegation and training powers of CRNAs. The rule also expands the scope of practice for CRNAs while working in a hospital or inpatient facility to perform airway management outside of the operative setting.</p> <p>Colorado Board of Medicine Temporary Emergency Rule (May 11, 2020): Expands Anesthesiologist Assistant scope of practice while working in a hospital or inpatient facility as needed to perform airway management outside of the operative setting.</p>
<p>Have statutes of limitations been extended?</p>	<p>Statutes of limitations have not been modified or extended.</p>



CONNECTICUT

What immunity is provided?

On April 5, 2020, Governor Ned Lamont issued Executive Order No. 7U, providing civil liability immunity for any good faith acts and omissions by health care providers in the course of providing health care services in response to the COVID-19 health emergency. Immunity from liability does not extend to acts or omissions that constitute a crime, fraud, malice, gross negligence, or willful misconduct. The Order expressly provides that liability immunity attaches to acts or omissions due to lack of resources of the health care provider attributable to the COVID-19 health emergency, which prevent the health care provider from furnishing the level of medical care that would otherwise be provided in the absence of the public health crisis. Individual health care professionals and health care facilities may be provided with liability immunity.

The Executive Order defines “health care professional” as an individual licensed, registered, permitted, or certified in any state to provide health care services, as well as, any retired professional with an inactive license, or volunteer approved by the Department of Public Health. “Health care facility” is defined as a licensed or state-approved hospital, clinic, nursing home, field hospital, or facility designated by the Department of Public Health to provide medical services in response to the COVID-19 health emergency.

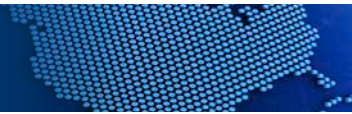
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

CT Executive Order No. 7HHH superseded Section 3 of Governor Lamont’s Executive Order No. 7DD, effectively extending the suspension of licensure requirements for physicians and PAs until January 14, 2021.

2020 CT HB 6001 expands telehealth coverage through March 15, 2021.

Have statutes of limitations been extended?

Executive Order No. 7G, dated March 19, 2020, suspended the statutes of limitations until the end of Connecticut’s public health emergency. The Order was amended and the suspension lifted, effective June 10, 2020, by order of the Chief Justice.



DELAWARE

What immunity is provided?

Under Joint Order of the Department of Health and Social Services and Delaware Emergency Management Agency, Delaware Ann. Code Title 10, Section 3144 is extended to health care providers, such that they are immune to civil liability so long as they are not grossly negligent.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

At the onset of COVID-19, Delaware issued the Delaware Emergency Management Agency / Division of Public Health Order stating: Out-of-state health care providers with an active license or certification in good standing in any United States jurisdiction are hereby authorized to provide health care services in Delaware.

This was rescinded on July 16, 2020, with DE HB 348.

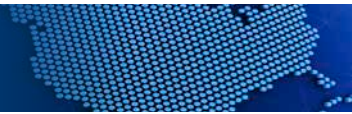
- DE HB 348 eliminated authorization for out-of-state practitioners to practice telemedicine and telehealth in Delaware **with the exception of mental health care providers.**
- It retains the suspension of certain regulations which limit the practice of telemedicine, including:
 - Allowing audio-only telemedicine
 - Not requiring a pre-existing patient provider relationship necessary
 - Allowing the prescription of opioids.

License renewal dates will remain the same. License renewal is accomplished on-line and no profession requires licensees to report to the Division in person.

Have statutes of limitations been extended?

Originally the tolling period was extended from March 23, 2020, to June 12, 2020. A subsequent order (Administrative Order No. 6) issued on May 14, 2020, extending this tolling period to July 1, 2020, stating:

- “Statutes of limitations and statutes of repose that would otherwise expire during the period between March 23, 2020, and June 13, 2020, are extended through July 1, 2020”



DISTRICT OF COLUMBIA (WASHINGTON, D.C.)

What immunity is provided?

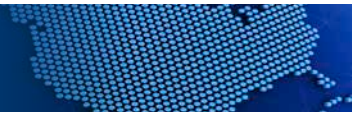
D.C. has enacted legislation that provides civil liability immunity to a health care provider, first responder, or volunteer who renders care or treatment to a potential, suspected, or diagnosed person with COVID-19 for damages resulting from such care or treatment of COVID-19; or from any act or failure to act in providing or arranging medical treatment for COVID-19 during a declared public-health emergency. D.C. Code § 7-2304.01(d)(3).

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Certain health care providers who are properly licensed, registered or certified, and in good standing in their home jurisdictions, are to be appointed as temporary agents of DC so they may provide health care services to DC residents without a DC license. The licensing waiver is in effect so long as the public health emergency continues (it is currently in effect through December 31, 2020), or until the date to which the state of emergency is extended.

Have statutes of limitations been extended?

All statutes of limitations and other deadlines and time limits that would otherwise expire during the period of emergency (through at least January 15, 2021) are suspended, tolled, and extended during the period of emergency, except: (1) deadlines applicable to parties represented by counsel in pending cases (except deadlines for service of process); (2) discovery-related deadlines applicable to all parties; (3) motions-related deadlines applicable to all parties for motions filed on or after November 10, 2020; and (4) deadlines in orders issued after March 18, 2020.



FLORIDA

What immunity is provided?

Florida has not enacted legislation or issued an order providing individuals or entities with liability immunity relating to COVID-19, although trade associations for physicians, hospitals, and nursing homes have requested that Governor DeSantis issue an Executive Order to protect them from liability due the COVID-19 pandemic.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

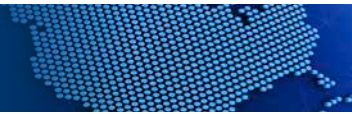
Florida EO 20-52 - Medical professionals, social workers, and counselors with good and valid professional licenses issued by states other than the State of Florida may render such services in Florida during this emergency for persons affected by this emergency with the condition that such services be rendered to such persons free of charge, and with the further condition that such services be rendered under the auspices of the American Red Cross or the Florida Department of Health. This Order was extended to January 2, 2020 by EO 20-276.

Florida DOH EO 20-002 - For purposes of preparing for, responding to, and mitigating any effect of COVID-19, health care professionals, advanced life support professionals, and basic life support professionals holding a valid, unrestricted, and unencumbered license in any state, territory, and/or district may render such services in Florida during a period not to exceed thirty days. Out-of-state licensed health care professionals can also register to provide telehealth in Florida.

Florida's Surgeon General issued an emergency order extending licensure renewal deadlines until August 31, 2020, for some categories of medical providers whose original deadlines fell between May 31, 2020, and July 31, 2020.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



GEORGIA

What immunity is provided?

Georgia Executive Order 04.14.20.01 designates employees of hospitals, licensed nursing homes and other medical service providers as emergency management workers. The Order provides designated health care providers with civil liability immunity for acts or omissions taken in connection with the State's response to the COVID-19 public health emergency; except for cases involving willful misconduct, gross negligence, or bad faith. The Georgia COVID-19 Pandemic Business Safety Act- the Act became effective on August 7, 2020. The Act provides that "no health care facility, health care provider, entity, or individual, shall be held liable for damages in an action involving a COVID-19 liability claim against such health care facility, health care provider, entity, or individual, unless the claimant proves that the actions of the health care facility, health care provider, entity, or individual, showed: gross negligence, willful and wanton misconduct, reckless infliction of harm, or intentional infliction of harm."

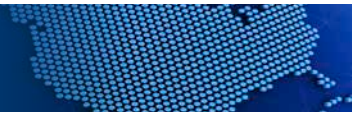
- COVID-19 Liability Claim" includes a cause of action for "acts or omissions by a health care facility or health care provider in arranging for or providing health care services or medical care to the claimant resulting in injury or death of the claimant for COVID-19 or where the response to COVID-19 reasonably interfered with the arranging for or the providing of health care services or medical care at issue to the claimant."

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

On March 5, 2020, the Georgia Composite Medical Board announced that it would issue emergency practice permits to previously unlicensed physicians, physician assistants, advance practice registered nurses, and respiratory care professionals who wish to practice medicine during the COVID-19 emergency response with the Board's approval of the application; valid for 90 days or when the governor lifts the state of emergency. Existing Georgia law provides that the Medical Board is authorized to issue telemedicine licenses to physicians who are licensed in other states but not licensed in Georgia if physicians: (1) Hold a full and unrestricted license to practice medicine in another state; (2) Have not had any disciplinary or other action taken against him or her by any other state or jurisdiction; and (3) Meet such other requirements established by the board pursuant to subsection (c) of this Code section as deemed necessary by the board to ensure patient safety. (OCGA § 43-34-31.1)

Have statutes of limitations been extended?

Pending deadlines, filing deadlines, and statutes of limitation are suspended through June 12, 2020.



HAWAII

What immunity is provided?

Health Care Facilities/Workers are immune from civil liability for any death or injury to persons alleged to have been caused by any act or omission by the health care facility, which death of or injury to persons 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. Executive Order 20-05, April 17, 2020.

Nursing Homes are included in the definition of Health Care Facilities.

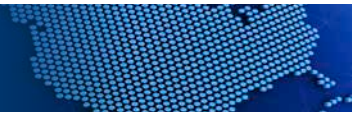
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Out of state physicians, osteopaths, PAs, nurses, occupational and physical therapists, respiratory therapists, speech pathologists, audiologists, nuclear medicine technologists, and radiation therapists with a current active license, or those previously licensed pursuant to chapter 453 HRS but who are no longer current and active, are permitted to practice in. March 16, 2020, Supplementary Emergency Proclamation.

Hawaii's 13th Supplementary Proclamation establishes that, with respect to controlled substances, that out-of-state physicians and nurses may dispense controlled substances (including prescribing and administering) without having to register in Hawaii, as contemplated in the DEA's COVID-19 Policy Concerning Separate Registration Across State Lines, dated March 25, 2020. Such physicians or nurses must maintain active registration in at least one state and be authorized under that state's law to dispense controlled substances. The state of emergency has been extended until December 31, 2020.

Have statutes of limitations been extended?

"API deadlines, time schedules, filing requirements imposed by statutes, rules, or court orders in all civil, criminal, and administrative matters in the circuit, district, and family courts in the State of Hawaii that expire between March 23, 2020, through and including April 3, 2020, are extended to April 6, 2020." https://www.courts.state.hi.usiwp-content/uploads72020/03/032019_scurf-20-152_In_Re_COVID-19-deadline-extension.pdf. The extension has expired.



IDAHO

What immunity is provided?

Any licensed physician and surgeon shall be conclusively presumed to be qualified to undertake and to furnish any emergency medical or surgical care and treatment ... whenever, in the good faith judgment of such physician and surgeon, the condition and best interests of the patient require care and treatment. No physician or hospital shall be held liable for civil liability in the absence of gross negligence under the existing circumstances, arising out of the furnishing of such emergency care and treatment. ID ST § 39-1391c.

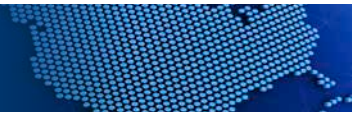
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

During the public health state of emergency, MDs, DOs, and PAs holding a license in good standing from another state or country are permitted to treat patients in Idaho without an Idaho license. Idaho State Board of Medicine Proclamation March 18, 2020.

Additionally, the Board will issue 120-day temporary unrestricted licenses to qualified MDs, DOs, PAs, and RTs who have retired or hold an inactive license. The renewal cycle for all Board licensees was extended up to 90 days after the Idaho State of Emergency is lifted by the Governor. The Board of Medicine is allowing graduated Respiratory Therapists and graduated Physician Assistants who have not yet completed their national certifying examination to qualify for the Board's 120-day COVID-19 temporary license with full practice privileges during the emergency and is allowing MD and DO Residents-in-Training (who have completed their internship) to qualify for the Board's 120-day COVID-19 temporary license with full practice privileges during the emergency. ACTIONS TAKEN BY BOARD OF MEDICINE IN RESPONSE TO COVID-19 (as of March 27, 2020).

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



ILLINOIS

What immunity is provided?

Liability immunity is provided to health care professionals, facilities, and health care volunteers for acts or omissions taken in connection with the State's response to the COVID-19 health emergency; with the exception of acts or omissions due to willful conduct or gross negligence.

Covered health care facilities include any temporary government-operated sites established for the purpose of providing health care services in support of the State's response to COVID-19. Covered health care facilities include nursing homes.

Covered health care professionals include those working under the supervision of the Illinois Emergency Management Agency or Department of Health in response to the Governor's Disaster Proclamations.

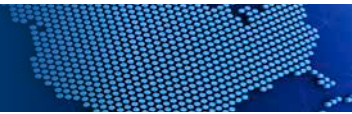
Similarly, covered health care volunteers include those working under the supervision of the Illinois Emergency Management Agency or Department of Health in response to the Governor's Disaster Proclamations.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Governor Pritzker's Executive Order 2020-23 issued on April 9, 2020, suspends permanent and temporary licensing requirements for health care providers licensed in another state; modifies the scope of practice restrictions under licensing overseen by the Department of Public Health; and modifies restrictions on the practice of pharmacists during the COVID-19 emergency. Modifications set to expire December 31, 2020.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



INDIANA

What immunity is provided?

Health care providers who are employees and volunteers are immune from civil liability, if the health care provider has a license to provide health care services under Indiana law or the law of another state; and provide the health care service within the provider’s scope of practice during the COVID-19 emergency declaration. Providers that did not hold an active license prior to this outbreak, but are providing health care services in accordance with the requirements of Executive Order 20-13, including registration with the Indiana Professional Licensing Agency, are licensed for purposes of this liability protection. Indiana Code 34-30-13.5.

Immunity from civil liability under this chapter does not apply if the damages relating to the provision of health care services resulted from the person’s gross negligence of willful misconduct.

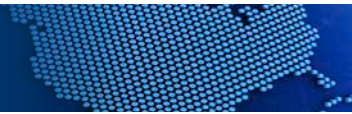
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Executive Order 20-05, issued on March 19, 2020:

- The Commissioner of the Indiana State Department of Health (ISDH) is authorized to waive requirements of the nursing home certificate-of-need statute, pursuant to I.C. 16-29-7, as the Commissioner deems necessary to respond to COVID-19 issues for nursing homes and on terms and conditions appropriate for each situation.
- Mental health professionals are permitted to practice via telemedicine.
- ARPNs are permitted to provide services in multiple locations while under a single written collaboration agreement.

Have statutes of limitations been extended?

By order of the Indiana Supreme Court on May 29, 2020, statutes of limitations are extended through August 14, 2020. The extension has expired.



IOWA

What immunity is provided?

Under Iowa Code Annotated 135.147, a person, corporation, or other legal entity, who in good faith and at the request or the direction of the Department of Public Health renders emergency care or assistance to a victim of the public health emergency is immune from civil liability, with the exception of acts or omissions that constitute recklessness.

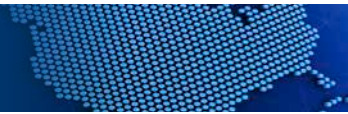
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

New Proclamation (E.O.) signed November 10, 2020 effective through December 10, 2020.

- Continues to suspend the following:
 - o initial and continuing trauma education requirements for trauma team members
 - o doctor or medical staff be licensed in the state if they are licensed to practice in another state or in accordance with the proclamation of disaster emergency
 - o regulatory provisions that all nurses employed in a hospital must have an active Iowa license if they have a license in another state
 - o nurses to engage in challenge examinations
 - o rules that prohibit practice of physician or nurse that has not obtained initial license if the board determines they have sufficient education and granted emergency license
 - o rules that prohibit nurses or physicians from practice whose license is inactive or lapsed within last 5 years.
 - o Continuing education for physicians/nurses
 - o Expiration or renewal requirements
 - o Requirement to obtain clinical or practical or internship experience to obtain license as health counselor, psychologist, or pharmacist
 - o Requirement to obtain background checks to obtain license
- Continues to suspend restrictions on telehealth and telemedicine services and suspend requirements for face to face interactions.

Have statutes of limitations been extended?

The Iowa Supreme Court previously entered an order tolling the statute of limitations or other deadline for commencing an action from March 17, 2020 to June 1, 2020 (76 days). On May 8, the court expanded on this order to explain what would happen if the statute of limitations is otherwise scheduled to run ON OR AFTER June 1. Do the 76 days still get added? The answer is yes if the statute of limitations would otherwise run on or before December 31, 2020 - the end of this year. After that, tolling is immediately phased out and eliminated, with one day of tolling dropped for each day that passes.



KANSAS

What immunity is provided?

April 22, 2020 – Executive Order 20-26: Health care providers, including nursing homes, registered nurses, advanced practice registered nurses, licensed practical nurses, pharmacists, unlicensed volunteers, military personnel, or students and other support personnel and all entities or individuals referenced in K.S.A. 48-915, making clinical and triage decisions and rendering assistance, testing, care or advice in the care of patients reasonably suspected or confirmed to be infected with COVID-19, rendered in response to any Kansas Department of Emergency Management mission related to the COVID-19 outbreak, and the proclamation issued declaring a state of disaster emergency pursuant to K.S.A. 48-924, shall be deemed immune from suit pursuant to K.S.A. 48-915, unless it is established that any adverse event or injury was caused by the willful misconduct, gross negligence, recklessness, or bad faith of such facility or health care provider. Nothing in this Executive Order shall be construed to modify, impair or supersede State law governing legal standards, procedures or judicial interpretation used in any civil action against an entity or individual where this Order is deemed not to cover such an entity or individual because of an allegation of willful misconduct or for any other reason.

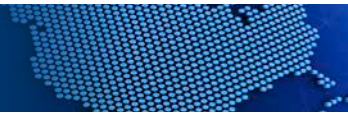
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

April 22, 2020 – Executive Order 20-26 temporarily suspends the supervision and delegation requirements for certain providers without any criminal, civil, or administrative penalty related to a lack of such supervision or agreement; permits students enrolled in programs to become licensed, registered, or certified health care professionals to volunteer or work within the facility; allows licensed, registered, or certified health care professionals and emergency medical personnel who are serving in the military in any duty status, to volunteer or work within the facility; allows medical students, physical therapists, and emergency medical personnel to volunteer or work within the facility as “respiratory therapist extenders” under the supervision of physicians, respiratory therapists, or advanced practice registered nurses; permits health care providers in good standing in any state or territory in the United States to practice in Kansas without criminal, civil, or administrative penalty related to lack of licensure; authorizes a designated health care facility to use qualified volunteers or qualifies personnel affiliated with other designated health care facilities, as if the volunteers or personnel were affiliated with the facility.

Have statutes of limitations been extended?

Kansas Supreme Court Chief Justice Marla Luckert ordered that “all statutes of limitations and statutory time standards or deadlines applying to the conduct or processing of judiciary proceedings [are] suspended until further order.” The Court subsequently issued Administrative Order 2020-PR-101 “Continuing Administrative Orders Suspending Statutes of Limitation, Statutory Time Standards, Deadlines, and Time Limitations Under State Finance Council’s Extension of the State of Disaster Emergency related to COVID-19.”

On November 13, 2020, Kansas entered Administrative Order 2020-PR suspending statute of limitations through December 15, 2020.



KENTUCKY

What immunity is provided?

By legislation enacted on March 30, 2020, Kentucky provides civil liability immunity to health care providers, including telehealth providers, who render ordinary, reasonable, and prudent care in good faith to COVID-19 patients. In other words, health care providers who provide medical care and treatment to COVID-19 patients are immune from civil liability for acts and omissions that would otherwise constitute ordinary negligence.

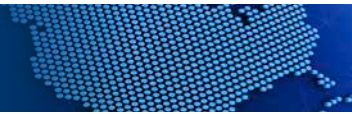
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Executive Order 2020-749 extends previous orders allowing pharmacists to dispense emergency refills for up to a 30-day supply of any non-scheduled medication for Kentucky residents. Pharmacists may temporarily operate a pharmacy in an area not designated on the pharmacy permit. This order will expire on October 6, 2020.

Kentucky Board of Medical Licensure, effective March 17, 2020, allow Medical and Osteopathic physicians not already licensed to practice in Kentucky to register to practice during this state of emergency by completing and submitting the Emergency System Application for Health Practitioners. No fee is required for this type of registration. Additionally, "treating clinical social worker" for purposes of providing telehealth services under KRS 335.158, shall include CSWs that are under board-approved clinical supervision of an LCSW supervisor. This expanded definition will only apply until the state of emergency is lifted.

The Kentucky Board of Nursing (KBN) has created a registry and application process for nurses and board certified dialysis technicians to practice in the Commonwealth during the state of emergency. Additionally, certain clinical education requirements have been suspended. Additionally, the KBN allows for provisional licensure for exam applicants, and temporary work permits for endorsement applicants, in circumstances where a criminal background check has not yet been completed. The provisional licenses and temporary work permits expire after six months.

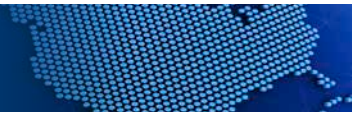
- The 30 day refill of a non-controlled prescription is a continuous standing order throughout the duration of the State of Emergency and is not limited to a one time refill if the pharmacist is unable to contact the prescriber. (Updated April 10, 2020). **Currently set to expire December 5, 2020 but subject to renewal.**
- Medical and Osteopathic physicians not already licensed to practice in the Commonwealth of Kentucky may still register to practice within Kentucky during the state of emergency declared by Governor Beshear.
- Additionally, the law [KY SB 150] waives requirements of in-person examination for establishing a provider-patient relationship for the purposes of providing telehealth (to the extent this complies with federal law). It also gives the Kentucky Board of Medical Licensure, the Kentucky Board of Emergency Medical Services, and the Board of Nursing the ability to waive or modify state statutes and regulations: ...
(f) For standards that are not necessary for the applicable standards of care to establish a patient provider relationship, diagnose, and deliver treatment recommendations utilizing telehealth technologies.



- DMS has made changes to the 1915(c) HCBS (Medicaid) waivers include:...
Expanding the provider base by waiving requirements that out of state providers be licensed and located in Kentucky as long as they are licensed by another state's Medicaid agency.
- DMS is allowing providers to deliver services via phone and telehealth, as is appropriate.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



LOUISIANA

What immunity is provided?

La. Rev. Stat. Ann. § 29:771(B)(2)(c): During a state of public health emergency, any health care providers shall not be civilly liable for causing the death of, or injury to, any person or damage to any property except in the event of gross negligence or willful misconduct.” The state of public health emergency related to COVID-19 was renewed via Proclamation Number 135 JBE 2020 on October 8, 2020 and is in effect until November 6, 2020.

The State of emergency was extended from November 6, 2020 to December 4, 2020, thereby extending the immunity protections.

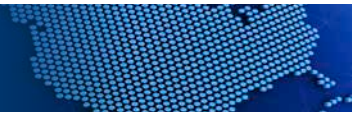
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

The Louisiana State Board of Medical Examiners has an emergency temporary permit application on their website for licensed out-of-state medical professionals seeking a temporary, voluntary license in the state of Louisiana. Prospective individuals must be licensed in another state.

- The following requirements have been suspended:
 - o Requirement to have license in state if they have license in good standing in another state and submit a copy of their license
 - o Requirements for supervision of physicians assistants as long as they practice within their scope of practice/skills/education.
 - o Requirement that out of state nurse obtain license in Louisiana
- Telehealth:
 - o All licensing board are encouraged to maintain emergency rules so that it will not be considered a violation of licensing standards of the health care provider as a result of telehealth
 - o Prescribing controlled substances via telehealth must be medically appropriate and well documented and conform with rules applicable to such prescription
- Also:
 - o No healthcare professional licensing board shall issue an adverse action or penalty against an applicant or licensee for failure to comply with procedural licensing requirement during state of emergency if made a good faith attempt to comply.

Have statutes of limitations been extended?

None. Parties may file motions for extension of time supported by appropriate documentation.



MAINE

What immunity is provided?

Maine has not enacted legislation or issued an order providing individuals or entities with liability immunity relating to COVID-19.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

The state enacted the following policies on March 20, 2020:

A physician, physician assistant, or nurse who is licensed in good standing in another state can be issued an emergency Maine license that shall remain valid during the state of emergency.

A physician, physician assistants, or nurse who is licensed in good standing in another state and who has existing Maine patients that travel to them to receive ongoing health care may provide those health care services to their Maine patients via telemedicine or telehealth without obtaining a Maine license during the state of emergency.

All physicians, physician assistants, and nurses who have retired in good standing in this State within 2 years can have their licenses immediately reactivated upon request and such license shall remain valid during the state of emergency.

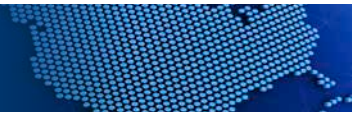
Mandatory supervision or collaborative practice requirements for otherwise qualified physician assistants and advanced practice registered nurses who are assisting or will assist in the health care response to COVID-19 are suspended during the public health emergency.

License expiration dates extended until 30 days after the expiration of the March 15, 2020, Proclamation of State of Civil Emergency to Further Protect Public Health or any subsequent emergency orders.

All physicians, physician assistants and nurses licensed in Maine or authorized to perform services pursuant to this emergency order are permitted to perform health care services through audio only telehealth.

April 6, 2020:

All Maine-licensed psychologists, psychological examiners, clinical social workers, clinical professional counselors, pastoral counselors, marriage and family therapists, alcohol and drug counselors, physical therapists, physical therapy assistants, chiropractic doctors, pharmacists, pharmacy interns, pharmacy technicians, podiatrists, occupational therapists, occupational therapy assistants, speech-language pathologists, hearing aid dealers and fitters, audiologists, certified interpreters, certified deaf interpreters, limited interpreters, and limited deaf interpreters, athletic trainers, naturopathic doctors, acupuncturists, dietitians, radiologic technologists, respiratory care practitioners, and certified professional midwives may provide necessary health care services permitted by their licenses through the use of all modes of telehealth, including video and audio, audio-only, or other electronic media.

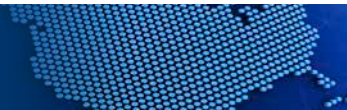


April 7, 2020:

Governor Mills issued the Order (35 FY 19/20 which allows all health care providers licensed by the Office of Professional and Occupational Regulation (OPOR), including psychologists, social workers, respiratory therapists, podiatrists, midwives, radiologist technologist, pharmacy techs/interns, chiropractors, and physical/occupational therapists to provide their services via telehealth, have their license expiration dates extended until 30 days following the end of the declared state of emergency, and provides that they do not have to complete continuing education requirements for license renewals that occur through March 20, 2021 In addition, these providers may receive a temporary license to provide health care in person or through telehealth, with no application fee, if currently licensed in another state as well as reactivate their Maine license immediately, with no application fee, if retired within the last three years.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



MARYLAND

What immunity is provided?

Maryland Public Safety Code Ann. § 14-3A-06 states: a health care provider is immune from civil or criminal liability if the health care provider acts in good faith and under a catastrophic health emergency proclamation.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

March 16, 2020 – Executive Order Relating to Various Health Care Matters

- Any person who holds a valid, unexpired license as a HCP that is issued by another state may, at a health care facility in Maryland, engage in the activities authorized under such license without first obtaining a license or practice letter from the applicable Maryland licensing agency/board if doing so is necessary, they are otherwise eligible to obtain a license and the person applies for a temporary health care license within 10 days after first working at a facility in Maryland.
- Any inactive practitioner may, at a health care facility in Maryland, engage in activities that would have been authorized under their inactive license without reinstating if (i) qualified supervisory personnel at facility reasonably conclude that the inactive practitioner can competently engage in such activities; (ii) doing so is necessary to meet required staffing ratios or ensure the continued and safe delivery of health care services; and (iii) the person could not reasonably reinstate his/her license in sufficient time.
- HCP may engage in activities that are not authorized by his/her license at a health care facility in Maryland if (a) it is necessary to allow the facility to meet required staffing ratios or otherwise ensure the continued and safe delivery of health care services, and (b) qualified supervisory personnel at the health care facility:
 - (i) reasonably conclude that the HCP can competently engage in the activities; and
 - (ii) reasonably supervise the HCP during those activities.

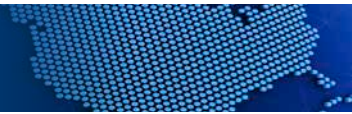
March 19, 2020 – Executive Order No. 20-03-19-03 generally allows the Executive Director of the Maryland Institute for Emergency Medical Services Systems and chairperson of the State Emergency Medical Services Board to suspend the effect of any provision of Maryland Code Education Article §§ 13-515, 13-516, or 13-517 upon a finding that such suspension will not endanger public health welfare, augment the EMS workforce, and improve emergency response.

During the pendency of the state of emergency or as otherwise ordered, the Maryland Department of Health is allowing out-of-state practitioners in good standing in their home state to prescribe CDS in Maryland without obtaining a Maryland CDS registration. The practitioner must execute an acknowledgement that the waiver only lasts as long as the DEA waiver lasts.

***Have statutes of limitations
been extended?***

The Maryland Court of Appeals ordered that for the purposes of statutes of limitations and other deadlines related to matter initiation, the days of March 16, 2020 through July 20, 2020 do not count against the time remaining for the initiation of that matter. Initiating parties were also granted an additional 15-day extension within which they must file.

Additionally, for the purposes of tolling of all statutes and rules deadlines to conduct pending judicial proceedings, the days of March 16, 2020 through July 20, 2020 do not count against the time remaining to conduct judicial proceedings.



MASSACHUSETTS

What immunity is provided?

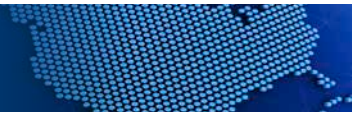
- Enacted Chapter 64, S2640 on 4/17/20 – “An Act to Provide Liability Protections for Health Care Workers and Facilities During the Covid-19 Pandemic”. This provides that Notwithstanding any general or special law to the contrary, except as provided in subsection (b), health care professionals and health care facilities shall be immune from suit and civil liability for any damages alleged to have been sustained by an act or omission by the health care professional or health care facility in the course of providing health care services during the period of the COVID-19 emergency; provided, however, that: (i) the health care facility or health care professional is arranging for or providing health care services pursuant to a COVID-19 emergency rule and in accordance with otherwise applicable law; (ii) arranging for or providing care or treatment of the individual was impacted by the health care facility’s or health care professional’s decisions or activities in response to treatment conditions resulting from the COVID-19 outbreak or COVID-19 emergency rules; and (iii) the health care facility or health care professional is arranging for or providing health care services in good faith.
- (b) The immunity provided in subsection (a) shall not apply: (i) if the damage was caused by an act or omission constituting gross negligence, recklessness or conduct with an intent to harm or to discriminate based on race, ethnicity, national origin, religion, disability, sexual orientation or gender identity by a health care facility or health care professional providing health care services; (ii) to consumer protection actions brought by the attorney general; or (iii) to false claims actions brought by or on behalf of the commonwealth.
- The act is to remain in effect while MA is still in a state of emergency. As of 12/3/20, Massachusetts is still listed as in a COVID-19 State of Emergency.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Massachusetts’ COVID-19 Order No. 41, effective June 26, 2020, states that for all active physicians scheduled for license renewal from March 17 to August 31, who have not yet renewed, the renewal date for licensure was extended to October 8, 2020. For out-of-State physicians who applied for emergency temporary license, the license is valid until 30 days after the State of Emergency is terminated or December 31, 2020, whichever occurs last. Emergency temporary license applications for out-of-state physicians were not accepted after July 10, 2020. Physicians who were scheduled to renew their licenses beginning September 1, 2020 are required to renew in the ordinary course.

Have statutes of limitations been extended?

Statutes of limitations were not tolled beyond June 30, 2020.



MICHIGAN

What immunity is provided?

Pursuant to H.B. 6159, effective October 22, 2020, the “Pandemic Healthcare Immunity Act” provides civil liability immunity to healthcare providers and facilities providing healthcare services in response to the COVID-19 health emergency, except in cases of wilful misconduct, gross negligence, intentional and willful criminal misconduct, or intentional infliction of harm. The immunity protection applies to causes of action arising between March 29 and July 14, 2020.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Executive Order 2020-30 allowed for health care professionals licensed in a different state to practice without criminal or civil liability. The order also allows for individuals who hold professional certifications in basic life support, advanced cardiac life support, or first aid, such certifications shall continue to remain in effect while the emergency declaration is in effect, even if they are otherwise due to expire during the emergency.

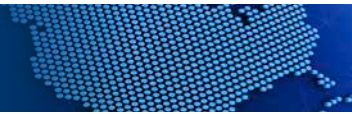
Pursuant to Executive Order 2020-39, licenses for emergency medical service personnel and certifications in basic cardiac life support (CPR) which would otherwise have expired during the State’s declared emergency were extended through 6 months after the conclusion of the COVID-19 health crisis.

The exemption permitting physicians with out of state licenses to practice in Michigan have since been rescinded, but the suspension of licensure requirements of exams, fingerprinting, and continuing education still in place.

Have statutes of limitations been extended?

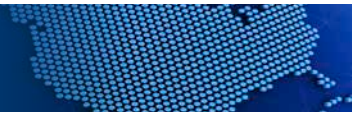
Originally, all deadlines pertaining to case initiation and the filing of initial responsive pleadings in civil matters were extended during the state of emergency declared by the Governor. The State Supreme Court issued an order that tolls filing deadlines, including statutes of limitations and responsive pleadings, while the Governor’s Shelter Order was in effect.

The Order tolling statute of limitations rescinded on June 12, 2020. Filers now have same number of days to complete filing as they did when tolling went into place. For time periods that began to run during tolling period, filers will have the full period to file beginning on June 20.



MINNESOTA

<p><i>What immunity is provided?</i></p>	<p>Minnesota has not enacted legislation or issued an order providing individuals or entities with liability immunity relating to COVID-19.</p>
<p><i>Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?</i></p>	<p>Executive Order 20-23, dated March 27, 2020, extends the CME and licensure renewal deadlines.</p> <p>Executive Order 20-28, dated April 6, 2020, permits out-of-state mental health providers to provide teletherapy in Minnesota.</p> <p>Executive Order 20-41, dated April 25, 2020 permits out-of-state Health Care Professionals who hold active, relevant license, certificate or other permit of good standing issued by a state of the United States or District of Columbia to render care if they are engaged with a health care system or provider such as a hospital, clinic, or other health care entity.</p> <p>Executive Order 20-51, dated May 6, 2020, imposes requirements for facilities to prioritize surgery and conduct elective surgical procedures with appropriate protections against COVID-19.</p>
<p><i>Have statutes of limitations been extended?</i></p>	<p>Statutes of limitations have not been modified or extended.</p>

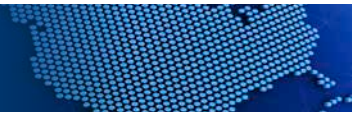


MISSISSIPPI

What immunity is provided?

Pursuant to Executive Order 1471, liability immunity is afforded to health care providers and health care facilities for acts or omissions taken in support of the State's response to the COVID-19 health emergency; absent cases of malice, reckless disregard, or willful misconduct. Health care providers include out-of-state licensed professionals, as well as, volunteers approved by the State Department of Health. Health care facilities include hospitals, clinics, nursing homes, mental health centers, and field hospitals.

Mississippi Senate Bill 3049 provides healthcare facilities very liberal immunity for injuries arising from acts/omissions by healthcare professionals. Acts of malice and intentional misconduct would be excluded from such immunity. The act has retroactive effect from March 14, 2020 until one year after the end of the COVID-19 state of emergency. Specifically, the bill outlines that (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 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; (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.



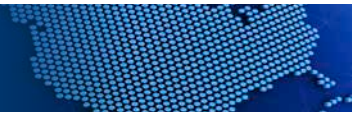
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

On October 26, 2020, the Mississippi State Board of Medical Licensure (MS-BML) issued a Proclamation that supersedes the March 15, 2020, March 24, 2020 and April 5, 2020 proclamations. The October 26th Proclamation details that regular licensure procedures resumed effective immediately. The out-of-state physicians who currently hold emergency license to treat Mississippi patients via telemedicine shall remain in full force and effect until January 31, 2021; and out-of-state physicians holding temporary /emergency licenses wishing to continue to provide care must submit an application for a full unrestricted license on or before December 31, 2020.

Further, for physicians holding a valid unrestricted license to practice medicine in Mississippi, the emergency telemedicine waiver of the requirement of pre-existing doctor patient relationship and prohibition against prescribing controlled substances remains in effect.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



MISSOURI

What immunity is provided?

On November 13, 2020 the Missouri State Senate introduced SB 1, providing that any health care provider who provides care as necessitated by an emergency shall not be liable for any civil damages or administrative sanctions for any failure to exercise the skill and learning of an ordinarily careful health care provider in similar circumstances in the delivery or non-delivery of such health care. Liability does not attach in cases of malicious misconduct or conduct that intentionally caused damage.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

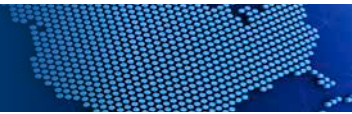
Governor Parson has approved, through June 15, 2020, a waiver that grants full reciprocity for physicians and surgeons who wish to assist Missourians during the COVID-19 crisis. During this State of Emergency, physicians and surgeons who are licensed in another state can provide care in-person or using telemedicine, as long as they are actively licensed in another state and their license has not been disciplined.

The Order also expands, through June 15, 2020, the ability of advanced practice registered nurses to provide health care services in support of the State’s response to COVID-19 by suspending and waiving requirements relating to collaborative agreements between these nurses and physicians.

Executive Order 20-19 extends, until March 31, 2021, prior orders suspending certain statutory and regulatory provisions related to telemedicine where strict compliance would hinder the State’s response to COVID-19, and to ease licensing requirements to eliminate barriers to the provision of health care services and other professions.

Have statutes of limitations been extended?

On March 22, 2020, the Missouri Supreme Court issued an order extending certain court deadlines, but the order specifically provides that “[t]his authorization does not apply to any deadline or time limitations set by statute or constitutional provision.”



MONTANA

What immunity is provided?

Montana Code 10-3-110 provides:

Medical services during declared emergency or disaster – limitation of liability – administrative disciplinary sanctions. (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: (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.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

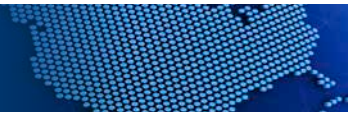
On March 20, 2020, the Governor issued the Directive Implementing Executive Order 2-2020 that allowed health care practitioners to perform health care services using all modes of telehealth. Additionally, it allowed out of state licensees to register to provide care in Montana during the emergency if they have an active, unrestricted license and are in good standing in another state. Telemedicine visits can be conducted over reasonable modes of communication, including video or audio only. A number of statutes and regulations are relaxed for physicians, psychologists, speech pathologists, and audiologists.

On April 21, 2020 the Governor issued a Directive Easing Licensing Requirements for health care providers during the emergency. Under the directive: Health care providers who held a license within the last five years and in good standing may receive a temporary permit to practice without paying a fee or comply with CME which will be valid until the emergency is rescinded. Those possessing a license beyond five years may apply for an emergency volunteer permit with the Montana State Registry of Professionals and Public Health Volunteers. Lapsed, inactive, or expired licensees may reactivate or renew as they would regularly or apply for a temporary permit. This directive expires when the State of Emergency is lifted.

In addition, pursuant to the Volunteer Interstate License Recognition Act, a licensee in another state in good standing may register with the appropriate licensing agency to practice during the state of emergency.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



NEBRASKA

What immunity is provided?

Nebraska does not provide liability immunity to health care providers responding to the COVID-19 health crisis.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

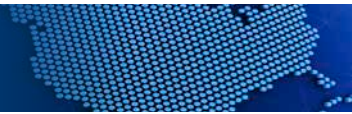
On March 27, 2020, Governor Pete Ricketts announced Executive Order No. 20-10, which effectively waives specific statutes and regulations arising from the Uniform Credentialing Act, the Emergency Medical Services Practice Act, the Medicine and Surgery Practice Act, the Nurse Practice Act, the Pharmacy Practice Act, and the Respiratory Care Practice Act which are impairing the ability to access needed health care practitioners in Nebraska. The Governor's order authorizes the credentialing of retired or inactive health professionals who wish to serve Nebraskans during the coronavirus 2019 (COVID-19) emergency. It also defers the requirements for health care providers to pay initial licensing fees or to complete continuing education. Additionally, the Governor is temporarily waiving the restrictions on licensed out-of-state medical professionals working in Nebraska. Furthermore, the Executive Order temporarily suspends the limitations on the number of physician assistants that a physician may supervise.

On March 31, 2020, Governor Pete Ricketts announced a new Executive Order to give health care facilities greater flexibility to respond to coronavirus 2019 (COVID-19). The purpose of the order is to enable health care facilities to expand capacity as the need arises.

On June 17, 2020 - Executive Order No. 20-27, Credentialing of the COVID-19 Workforce: Governor Pete Ricketts issued an executive order allowing the Department of Health and Human Services to waive certain state statutes and applicable regulations to ensure that health care professionals directly responding to the COVID-19 state of emergency so that these health care workers can obtain and retain the necessary credentials (state licenses, credentials, certifications, or registrations). Statutory provisions requiring that persons seeking credentialing successfully complete an examination prior to obtaining credentials are temporarily suspended solely in order to permit persons to obtain a provisional credential, which shall remain active pending examination results or until December 31, 2020, whichever is sooner, provided the person has completed all other requirements for licensure, including, but not limited to, completion of the required education or training program, and registers for the examination, but is unable to take the examination in the near future due to the lack of approved online testing or the limited availability of in-person testing slots.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



NEVADA

What immunity is provided?

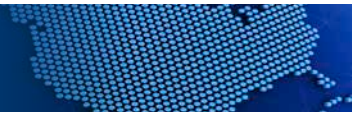
Supplemental Declaration of Emergency Directive 011, dated April 1, 2020 states that: All providers of medical services related to COVID-19 are performing services for emergency management subject to the order or control of and at the request of State Government and shall be afforded the immunities and protections set forth in NRS 414.110, subject to the same exclusions therein. Nevada Revised Statute 414.110 provides qualified immunity except in instances of willful misconduct, gross negligence, or bad faith.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Professional licensing boards regulating providers of medical services shall temporarily waive certain licensing requirements to allow the practice of currently unlicensed skilled medical professionals during the pendency of the COVID-19 crisis ... including without limitation, medical doctors, physician assistants ... The waiver and exemption of professional licensing requirements shall apply to qualified providers of medical services during this declared emergency who currently hold a valid license in good standing in another state, providers of medical services whose licenses currently stand suspended for licensing fee delinquencies, providers of medical services whose licenses currently stand suspended for failure to meet continuing medical education requirements, and providers of medical services who have retired from their practice in any state with their license in good standing. These waivers and exemptions shall not apply to persons whose licenses have been revoked or voluntarily surrendered as a result of disciplinary proceedings.

Have statutes of limitations been extended?

Statute of limitations in civil matters tolled beginning on March 12, 2020 until 30 days after the conclusion of the State of Emergency, which remains active pursuant to Executive Order on November 24, 2020.



NEW HAMPSHIRE

What immunity is provided?

There are no new statutes or other applicable authority regarding immunity to medical providers. However, New Hampshire has addressed the issue via Attorney General Opinion No. 2020-01. Pursuant to that opinion letter any “emergency management worker[s]” and “any private corporations” engaged in “emergency management”¹ activities during the pandemic should receive immunity under N.H. RSA 21-P:41. Under this statute, and according to the Attorney General, the “emergency management” activities of private corporations are akin to governmental functions and are thus “cloaked with sovereign immunity.”

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

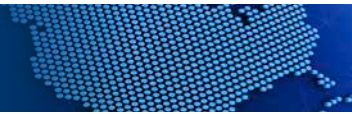
- Governor’s Emergency Order #8 under Executive Order 2020-04 permits that “[a]ll medical providers [...] be allowed to perform health care services through the use of all modes of telehealth, including video and audio, audio-only, or other electronic media, to treat the residents of the state of NH for all medically necessary services.”
- Exhibit H to Governor’s Emergency Order #29: “The prohibition in RSA 329:1-d, III of prescribing schedule II through IV controlled drugs by means of telemedicine is hereby suspended for the duration of the State of Emergency. During such time, prescriptions for schedule II through schedule IV controlled drugs may be made in accordance with Emergency Order #8.”

The above orders remain in effect until the end of the state of emergency, which was extended to December 11, 2020 pursuant to Governor’s Executive Order 2020-23.

Have statutes of limitations been extended?

On March 28, 2020, the Supreme Court of New Hampshire extended all deadlines “set forth in court rules, court orders, statutes, ordinances, administrative rules, administrative orders or otherwise set to expire” until May 4, 2020. The court also extended all statutes of limitations and statutes of repose until May 4, 2020. The court thereafter did not extend this order and the extensions pursuant to the state of emergency have now expired.

¹ This is defined as “the preparation for and the carrying out of all emergency functions, including but not limited to emergency response and training functions, to prevent, minimize, and repair injury or damage resulting from the occurrence or threat of widespread severe damage, injury, or loss of life or property resulting from any natural or human cause, including but not limited to [...] epidemic[s].” N.H. RSA 21-P:35.



NEW JERSEY

What immunity is provided?

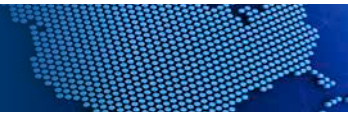
On April 14, 2020, Governor Phil Murphy passed S-2333/A-3910, providing individual practitioners and health care facilities with immunity “for civil damages for injury or death alleged to have been sustained as a result of an act or omission ... in support of the State’s response to the outbreak of the coronavirus disease.” Notably, the immunity pertains to health care services rendered in-person, as well as those provided via telemedicine and telehealth. In order to expand resources available to treat the pandemic, S-2333/A-3910 also allows physicians to diagnose or treat patients “outside the normal scope of the health care professional’s license or practice.” The law is retroactive to March 9, 2020, and contains exceptions for gross negligence, recklessness, willful misconduct, fraud, or criminal activity.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

On July 1, Gov. Murphy signed NJ S. 2467, which ensures that out-of-state health care practitioners may continue to provide telemedicine to New Jersey residents until 90 days following the public health emergency.

Have statutes of limitations been extended?

Tolling provisions concluded on May 10, 2020.



NEW YORK

What immunity is provided?

On August 3, 2020 Governor Andrew Cuomo signed into law Senate Bill 8835, eliminating several civil liability immunity protections previously afforded to healthcare providers and facilities under Executive Order 202.10 and the Emergency or Disaster Treatment Protection Act (EDTPA). The protections under Executive Order 202.10 and the EDTPA applied retroactively to March 7, 2020; providing civil liability immunity to physicians, physician assistants, specialist assistants, nurse practitioners, and licensed registered professional nurses, against claims of injury or death alleged to have resulted directly from an act and/or omission by the health care provider during the course of providing medical services in furtherance of the State's response to the COVID-19 outbreak, so long as injury or death was not caused by gross negligence, recklessness, intentional misconduct, or intentional infliction of harm.

Under Senate Bill 8835, enacted on August 3, 2020, healthcare providers and facilities are provided immunity only where their acts and/or omissions directly relate to the diagnosis or treatment of COVID-19, as well as, the assessment or care of suspected or confirmed COVID-19 patients. Immunity does not attach in cases of gross negligence, recklessness, intentional misconduct, or intentional infliction of harm.

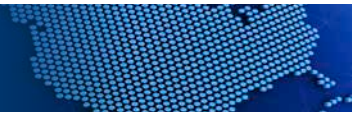
Significantly, the new law eliminates immunity previously afforded to healthcare providers and facilities (under Executive Order 202.10 and EDTPA) for healthcare services provided to non COVID-19 patients that were being cared for during the public health emergency, as well as, services related to the prevention of COVID-19 and arrangement of medical services in response to the public health emergency.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Executive Orders also expand and/or modify the New York Education Law and Public Health Law to allow health care providers including physicians, physician assistants, registered nurses, licensed practical nurses, and nurse practitioners, who are licensed and in good standing but not registered in the State, to practice in New York State without civil or criminal penalties. In addition, physician assistants and nurse practitioners are permitted to provide medical services in accordance with their education and experience levels without a written practice agreement or collaborative relationship with a physician. By Executive Order dated May 5, 2020, Governor Cuomo extended these provisions through June 4, 2020.

Have statutes of limitations been extended?

On October 4, 2020 Governor Cuomo issued an Executive Order extending statutes of limitations for civil matters through November 3, 2020. The Order provides that statutes of limitations on civil matters will not be further extended.



NORTH CAROLINA

What immunity is provided?

On May 4, 2020 Governor Roy Cooper signed Senate Bill 704 into law. The bill, titled An Act to Provide Aid to North Carolinians in Response to the Coronavirus Disease 2019 (COVID-19) Crisis, provides civil immunity for health care providers for any acts or omissions alleged to have caused harm arising out of treatment for COVID-19. The Act provides immunity for providing health care services during the emergency declaration when providing or arranging for medical treatment of COVID-19. Immunity does not apply to acts or omissions that constitute gross negligence, reckless misconduct, or intentional infliction of harm. The legislation provides that acts, omissions, or other decisions resulting from a resource or staffing shortage are not considered gross negligence. Immunity is also provided for volunteer organizations providing health care services during the emergency declaration.

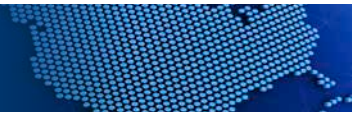
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

North Carolina’s Governor issued Executive Orders providing that practitioners not licensed by the State can provide telehealth treatment. To do so, a practitioner can obtain a limited permit using an application on the medical board’s website. One of the Executive Orders provides, “For the pendency of the State of Emergency: (i) a health provider licensed, registered, or certified in good standing in another United States jurisdiction (or reinstated pursuant to emergency action) may apply for an emergency license with the appropriate North Carolina licensing board and, if deemed eligible to be licensed, may deliver services in Executive Order No. 130 Executive Order No. 116 Emergency Disaster License Application 13 North Carolina, including through any remote telecommunications technologies (telehealth), provided those services are within the provider’s authorized scope of practice in such other jurisdictions; and (ii) any restrictions under North Carolina state law restricting the use of telehealth... have their enforcement waived.

On November 13, 2020, the Governor signed EO 177, extending until February 18, 2021 the provisions or earlier Executive Orders, including EO 130 (signed on April 8, 2020), EO 152 (signed on July 24, 2020), and EO 165 (signed on September 21, 2020), pertaining to Health Services Licensure. In addition, pursuant to N.C. Gen. Stat. § 166A-19.10(b)(3), the Governor has delegated to the Secretary of the Department of Health and Human Services the authority under N.C. Gen. Stat. § 166A-19.30(c) and N.C. Gen. Stat. § 166A-19.31(b)(1),(2), and (5), to prohibit and restrict activities and operations of long term care facilities, including skilled nursing facilities, combination homes, adult care homes, mental health group homes, and intermediate care facilities for individuals with intellectual disabilities, which may be reasonably necessary to maintain order and protect lives and property during this state of emergency.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



NORTH DAKOTA

What immunity is provided?

North Dakota does not provide liability immunity health care providers responding to the COVID-19 health crisis.

NDMA co-signed letter with other states to congress to support liability protections for physicians (bipartisan bill HR 7059 Coronavirus Provider Protection Act), but not acted on.

Governor Doug Burgum’s executive order of 3/20/2020 does not mention immunity.

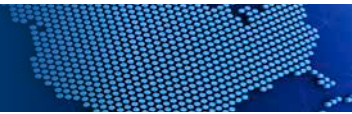
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Under the 3/20/2020 executive order, statutory and regulatory requirements were temporarily suspended for telemedicine (secured connection, audio only, insurance covers virtual check-ins, insurance companies cannot impose technology requirements on telehealth, ND Insurance Commissioner may issue guidance as well.

Under 4/3/2020 executive order, licensing requirements suspended temporarily during crisis for respiratory therapists.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



OHIO

What immunity is provided?

On September 14, 2020, Governor Mike DeWine signed a bill granting civil immunity from certain COVID-19-related civil actions for health care providers and other entities. Ohio House Bill 606 amends section 2305.11 and enacts section 2305.12 of the Revised Code to revise the law governing immunity from civil liability for health care providers during disasters, to provide qualified civil immunity to service providers providing services during and after a government-declared disaster or emergency due to COVID-19, and to declare an emergency. Under the Bill, protection from suit is provided where the claim asserts that an injury, death, or loss to person or property was caused by either the exposure to or the transmission or contraction of MERS-CoV, SARS-CoV, or SARS-CoV-2 or any mutation hereof (which includes COVID-19). Suit may only be brought if it is established that the exposure, transmission, or contraction was by reckless conduct, intentional misconduct, or willful or wanton misconduct on the part of the person against whom the action is brought. The law goes into effect on December 13, 2020, and applies retroactively to causes of action arising from March 9, 2020, through September 30, 2021.

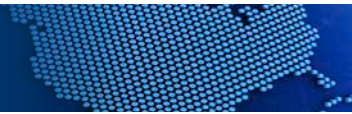
Effective, December 16, 2020, [H.B. 606](#) provides liability immunity to numerous entities, including healthcare providers and facilities, from lawsuits arising from exposure, transmission, or contraction of COVID-19. The law makes an exception for lawsuits stemming from reckless, intentional, or willful misconduct, and covers care provided between March 9, 2020 and September 30, 2021.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Ohio law authorizes nursing practice in emergencies without an Ohio nursing license and the Board is expediting the issuance of temporary permits and all license types.

Have statutes of limitations been extended?

The Ohio Supreme Court order has tolled time requirements established by statutes of limitations, time limitations, and deadlines in the Ohio revised Code and the Ohio Administrative Code between March 9, 2020 and July 30, 2020.



OKLAHOMA

What immunity is provided?

A health care facility or provider is immune from civil liability for any loss to a person with a suspected or confirmed diagnosis of COVID-19 caused by an act or omission during the COVID-19 public health emergency. This immunity does not apply to gross negligence or willful or wanton misconduct, nor does it apply to health care services provided to a person who did not have a suspected or confirmed diagnosis of COVID-19. This immunity is in effect until October 31, 2020, or until the Governor affirmatively concludes the public health emergency, whichever is later. Oklahoma COVID-19 Public Health Emergency Limited Liability Act, SB 300.

Senate Bill 1946 was passed and signed into law on May 21, 2020, providing any person conducting business has immunity against a claim for injury from exposure or even potential exposure to the coronavirus “if the act or omission alleged to violate a duty of care of the person or agent was in compliance or consistent with federal or state regulations, a Presidential or Gubernatorial Executive Order, or guidance applicable at the time of the alleged exposure.” Senate Bill 1946: Tort Immunity for Exposure, or Potential Exposure, by “Any Person Conducting Business” that Follows Guidance Issued By At Least Two Health Authorities.

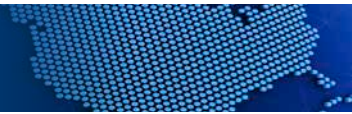
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Executive Orders issued on March 24, 2020, and April 30, 2020, provide that:

- Any medical professional who holds a license, certificate, or other permit issued by any State shall be deemed, subject to Medical Board approval, licensed to practice in Oklahoma so long as the Order relating to the COVID-19 health emergency is in effect.
- Advanced practice registered nurses, registered nurses, licensed practical nurses and advanced unlicensed assistants who have lapsed or inactive licenses or certifications may have their license or certification reinstated if they submit a reinstatement application and fee prescribed by the Board and meet the qualifications for licensure or certification established by the Board, provided such license shall only be valid as long as this Order is in effect.
- This effectively expands the provision of telemedicine services and permits licensed physicians to supervise any number of Physician Assistants, Certified Registered Nurse Anesthetists and Nurse Practitioners. Supervision may be performed in-person or remotely.

Have statutes of limitations been extended?

Statutes of limitations were extended from March 27, 2020, through May 15, 2020.



OREGON

What immunity is provided?

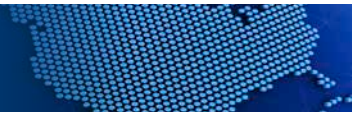
Oregon does not provide liability immunity to health care providers responding to the COVID-19 health emergency. There is a narrow exception that applies to health care volunteers pursuant to Oregon legislation enacted in 2019. Oregon Statute 676.340 provides civil liability immunity, with the exception of cases of gross negligence, to health care volunteers that provide: (1) health care services without compensation; and (2) there is a prior signed agreement between the patient and the provider that the services are being rendered without compensation and that the provider may be held liable for death or injury only to the extent provided by this statute.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

During the declared COVID-19 state of emergency, the Oregon Medical Board will allow physicians and physician assistants licensed in another state to provide medical care in Oregon under special provisions, if they are licensed in another state and are in good standing. Out-of-state health care professionals who wish to provide care in Oregon during this time must complete an authorization application. Emeritus licensees are no longer restricted to volunteer practice only and may receive payment for their medical care. Locum Tenens licensees are no longer limited to 240 days of practice every two years, and may now provide care in Oregon indefinitely.

Have statutes of limitations been extended?

Pursuant to House Bill 4204 and subsequent extensions by Governor Kate Brown, statutes of limitations governing most (but not all types) of civil claims have been tolled between March 8, 2020 and December 31, 2020.



PENNSYLVANIA

What immunity is provided?

On May 6, 2020, Governor Tom Wolf issued an Executive Order providing civil liability immunity to health care providers for good faith actions taken in response to the COVID-19 health emergency, with the exception of cases of willful misconduct or gross negligence. Liability immunity does not extend to care and treatment that is provided to non-COVID-19 patients. This Executive Order does not apply to nursing homes.

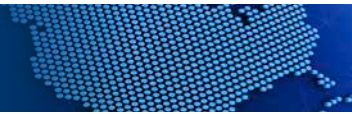
- Extends immunity to those medical professionals in Pennsylvania that provide services in any health care facility as defined by the Health Care Facilities Act, as well as any nursing facility, personal care home, assisted living facility or any alternate care site, community-based testing site or non-congregate care facility used for the purpose of conducting emergency services activities or the provision of disaster services activities related to the Commonwealth's COVID- 19 disaster emergency response.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Governor Wolf granted the Department of State's request for a suspension to allow expedited temporary licensure to practitioners in other states to provide services to Pennsylvanians for the duration of the coronavirus emergency. The Governor suspended several "administrative requirements" in order for the Department to grant temporary licenses on an expedited basis to out-of-state practitioners who are in good standing and licensed by their home state.

Have statutes of limitations been extended?

Statute of limitations in civil matters were tolled between March 24, 2020, and May 11, 2020. Jury trials remain indefinitely suspended.



RHODE ISLAND

What immunity is provided?

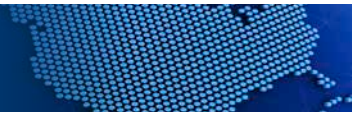
On March 18, 2020, Governor Gina M. Raimondo issued Executive Order 20-21, which provides immunity for certain health care workers and health care facilities. Specifically, it classifies the following individuals as “disaster response workers” entitled to immunity under R.I. Gen. Laws § 30-15-15(a) and to provide services beyond or without a license as permitted by R.I. Gen. Laws § 30-15-15(b): “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.”

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

While the Rhode Island Department of Health is accepting out-of-state emergency licensure applications (valid for 90 days, renewable once), it is only for Emergency Medical Technicians, Dietitians/Nutritionists, PNs, RNs, APRNs, nursing assistants and nursing students. Medical licenses due to expire July 1, 2020, are granted a 90-day extension for renewal with no penalties or late fees.

Have statutes of limitations been extended?

Statutes of limitations are not tolled and continue to run due to the availability of e-filing.



SOUTH CAROLINA

What immunity is provided?

Pursuant to Executive Order 2020-08, any “emergency support function volunteer” health care provider appointed by DHEC is not liable for civil damages from medical care or treatment to combat COVID-19, which meet applicable standards of care and do not constitute gross negligence, recklessness, or wanton or willful misconduct.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

The South Carolina Board of Medical Examiners is temporarily waiving South Carolina licensing requirements, in 90-day periods, for physicians, physician assistants, and respiratory care practitioners licensed and in good standing in another state and whose services are determined to be necessary by the South Carolina Department of Health and Environmental Control (DHEC).

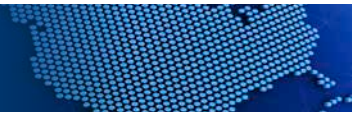
The South Carolina Board of Nursing has temporarily waived South Carolina licensing requirements for advance practice registered nurses, licensed practical nurses, and registered nurses licensed and in good standing in another state and whose services are determined to be necessary by DHEC.

Nurse Practitioners licensed in South Carolina, or for whom licensure requirements have been waived, may treat existing patients in South Carolina via telemedicine.

The South Carolina Board of Examiners in Psychology has announced that they are suspending enforcement of South Carolina licensing provisions for psychologists who are licensed out-of-state and have established a client relationship with an individual now residing in South Carolina in order to allow the continuance of the therapeutic relationship by means of telecommunication.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



SOUTH DAKOTA

What immunity is provided?

South Dakota does not provide liability immunity to health care providers responding to the COVID-19 crisis.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

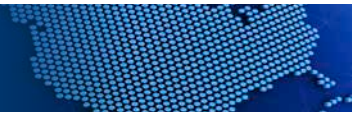
Reciprocity is permitted for a physician who holds a valid medical license from another state as long as the applicant completed a residency program in the United States or Canada, passed licensed exams, is in good standing in his/her state and has completed criminal background check investigation.

Governor Kristi Noem issued an executive order on March 23, 2020, suspending certain regulatory provisions regarding telehealth, medications, medical assistance programs, and medical license regulations for out-of-state licensed medical professionals in light of COVID-19. On April 15, 2020, Governor Noem signed another executive order which facilitated telemedicine healthcare services.

On May 26, 2020, Governor Noem issued another executive order suspending the requirement for health care providers to submit proof of completing examination requirements to prevent delaying licensure during COVID-19 until December 30, 2020.

Have statutes of limitations been extended?

Statute of limitations have not been modified or extended.



TENNESSEE

What immunity is provided?

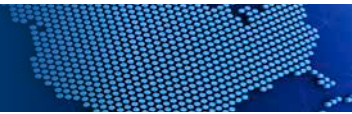
Effective August 18, 2020, legislation titled “Tennessee COVID-19 Recovery Act” provides liability protection for businesses, including health care providers, for COVID-19-related claims. Section 1 of the Tennessee COVID-19 Recovery Act prohibits claims against any person for loss, damage, injury or death arising from COVID-19 unless the claimant proves by clear and convincing evidence that the person proximately caused the loss, damage, injury or death by an act or omission constituting gross negligence or willful misconduct. The protections are applicable to claims pursued against a broad category of “persons” associated with health care providers, business entities and schools, as well as to claims pursued against governmental entities or employees.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Executive Order No. 59 extended prior orders signed by Governor Bill (Executive Order No. 36, as amended by Executive Order Nos. 50 and 55) related to licensing in the state to assist with the response to COVID-19 and remained in effect until September 30, 2020. It permitted out-of-state providers to practice in Tennessee, suspended continuing education requirements and other various administrative requirements, permitted pharmacists to process prescriptions remotely and expanded telemedicine by allowing all health care providers to practice telehealth. Health care licenses, certificates and registrations are extended.

Have statutes of limitations been extended?

The Supreme Court of Tennessee tolled statutes of limitations and court deadlines from March 13, 2020, through June 5, 2020.



TEXAS

What immunity is provided?

Tex. Code Ann. 74.151: a person who in good faith administers emergency care is not liable for civil damages for an act performed during the emergency, unless the act is willfully or wantonly negligent.

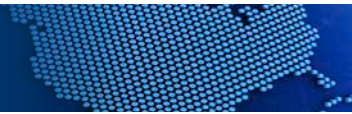
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

The Texas Medical Board has automatically extended license and permit expiration dates for physicians, physician assistants, respiratory care practitioners, surgical assistants and others; continuing education requirements related to the renewal extension also have been waived.

The Board also is allowing out-of-state physicians and other types of health care professionals to obtain a limited emergency license or hospital-to-hospital credentials.

Have statutes of limitations been extended?

Pursuant to the Supreme Court of Texas' Seventeenth Emergency Order dated May 26, 2020, statutes of limitations in civil matters that were set to expire between March 13, 2020, and July 1, 2020.



UTAH

What immunity is provided?

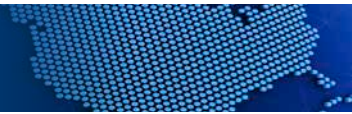
Utah provides civil liability immunity to health care providers for acts or omissions while rendering care in support of measures necessary to protect the public health, including activities taken to combat epidemic and communicable diseases; with the exception of acts or omissions due to gross negligence or wanton and willful misconduct. Liability immunity also is afforded to health care providers responding to a national, state, or local emergency, a public health emergency, or a declaration by the President of the United States or other federal official requesting public health-related activities; with the exception of acts or omissions due to gross negligence or wanton and willful misconduct. Senate Bill 3002 Enacted 4/22/20 as UCA §§ 58-13- 2.7 & 58-85-106.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

A physician who is licensed and lawfully practicing medicine in another state or territory without restrictions or conditions may practice in Utah for the duration of the declared emergency by obtaining a DOPL (Division of Occupational and Professional Licensing) Time-Limited Emergency License.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



VERMONT

What immunity is provided?

Vermont provides civil liability immunity to Vermont State agencies and employees, local emergency planning committees, and individuals, partnerships, associations or corporations involved in emergency management activities for good faith acts taken in response to a State emergency; with the exception of cases of willful misconduct or gross negligence.

“Health Care Facilities” means State-licensed nursing homes and Middlesex Therapeutic Community Residence, all State-licensed assisted living residences, Level III residential care homes, intermediate care facilities for individuals with intellectual disability (ICF/ID), all State therapeutic community residences, Level IV residential care homes, all hospitals and all alternate or temporary hospital sites and other isolation, quarantine or housing sites designated by the Commissioner of PSD/VEM for the treatment of, or alternate shelter for those who have been exposed to or infected with COVID-19.

“Health Care Providers” means all health care providers as defined by 18 V.S.A. § 9432(9), including volunteers, who are providing health care services in response to the COVID-19 outbreak and are authorized to do so.

“Health Care Volunteers” means all volunteers or medical or nursing students who do not have licensure who are providing services, assistance or support at a Health Care Facility in response to the COVID-19 outbreak and are authorized to do so.

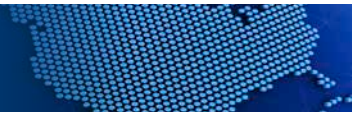
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

In response to the increasing demand for health care providers responding to the COVID-19 health emergency, on March 30, 2020, Vermont enacted legislation authorizing the issuance of temporary licenses to out-of-state physicians, physician assistants and podiatrists whose license is in good standing and not subject to disciplinary proceedings. The temporary license authorizes the health care provider to practice in Vermont until the end of the state of emergency or 90 days, whichever occurs first, provided the licensee remains in good standing.

- The Vermont Medical Board may waive supervision and scope of practice requirements for physician assistants, including waiving collaborative relationships between physician and physician assistants, as well as advance practice registered nurses.
- Retired health care professionals of no more than three years with Vermont licenses, certifications or registrations in good standing may provide health care services to patients in Vermont using telehealth or as part of a staff of a licensed facility.
- Retired health care professionals who retired more than three but less than ten years ago with their Vermont license, certificate or registration in good standing may return to the health care workforce on a temporary basis. The Board may issue temporary licenses and may impose limitations on the scope of practice as deemed appropriate.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended.



VIRGINIA

What immunity is provided?

Executive Order 60 states that absent gross negligence or willful misconduct, any health care provider 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. This Order shall remain in effect until Executive Order 51 is rescinded.

The General Assembly of Virginia enacted § 8.01-225.03, which provides civil liability immunity for licensed hospices, home care organizations, certain behavioral health providers, assisted living facilities, and adult day care centers for care provided to or withheld from COVID-19 patients. Immunity does not extend to gross negligence or willful misconduct. It applies to causes of action arising between March 12, 2020 and the termination of the state of emergency declared by the governor.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

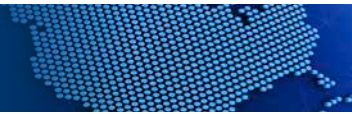
Executive Order 57, dated June 10, 2020, and remaining in effect until Order 51 is rescinded, states: (1) health care practitioners and psychologists licensed by another state, and in good standing with such state, are deemed to have a valid Virginia license; (2) Nurse practitioners and physician assistants licensed in Virginia, except those licensed in the category of Certified Registered Nurse Anesthetists, with two or more years of clinical experience may continue to practice in the practice category in which they are certified and licensed.

The Board also has an expedited licensure by endorsement process for medicine and osteopathy applicants who are board certified and have practiced in another state for 5 years.

During the period of the declaration of emergency, the Board of Medicine will waive the regulations relating to fees and continuing education for reinstatement or reactivation of licensure for doctors of medicine, osteopathic medicine, physician assistants, and respiratory therapists who held an active and unencumbered license within the past 4 years. The waiver does not waive statutory requirements or limitations.

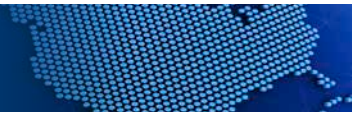
During the COVID-19 emergency, professionals licensed in other states and DC are authorized to provide telemedicine services to Virginia residents with whom they have an established practitioner-patient relationship. Establishing a new relationship with a Virginia resident, however, requires a Virginia license.

The Office of Civil Rights in the US Department of Health and Human Services and the Virginia Board of Medicine relaxed its enforcement of HIPAA regulations governing telehealth during the COVID-19 National Emergency. Penalties will not be imposed for noncompliance with the regulatory requirements under HIPAA against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 emergency.



***Have statutes of limitations
been extended?***

The Supreme Court of Virginia has extended the declaration of judicial emergency through January 3, 2021. The statutes of limitation and other case-related deadlines in the general district courts and circuit courts were tolled through July 19, 2020.



WASHINGTON

What immunity is provided?

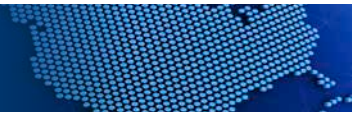
The Uniform Emergency Volunteer Health Practitioners Act (UEVHPA) grants civil liability immunity to out-of-state licensed health professionals for gratuitous care provided in a declared emergency, except for cases of wanton misconduct or gross negligence. To be covered under the UEVHPA, out-of-state physicians must register as an emergency volunteer health care provider in advance or during an emergency.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Out-of-state practitioners may become volunteers via RCW § 70.15 by registering and completing the Emergency Volunteer Health Practitioners Application. Out-of-state MDs and DOs that would like an expedited Washington license and to volunteer, may use the interstate medical license Compact and become registered under RCW § 70.15.

Have statutes of limitations been extended?

Statutes of limitations have not been modified or extended for civil matters.



WEST VIRGINIA

What immunity is provided?

On April 13, 2020, certain medical, health care and hospital associations asked Governor Justice for an executive order providing protections to health care workers in West Virginia for good faith actions taken to respond to the COVID-19 pandemic. No such executive order has been entered.

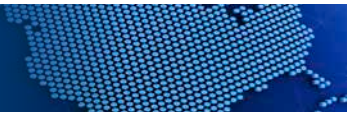
Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Physicians and physicians’ assistants licensed in another state, or who are inactive or retired from West Virginia practice, may provide medical care in West Virginia under special provisions during the State of Emergency, subject to limits and conditions. Registrants may practice medicine in West Virginia consistent with their scope of practice and the standard of care, and may practice in person or via telemedicine technologies to West Virginia patients. Registered PAs must practice in collaboration with physicians pursuant to a Practice Agreement or Practice Notification.

Out-of-state physicians and physician assistants: (1) must hold a valid license to practice in another state and (2) must not be the subject of a pending or active complaint.

Have statutes of limitations been extended?

The West Virginia Supreme Court issued an order declaring, “statutes of limitations and statutes of repose that would otherwise expire during the period between March 23, 2020, and April 10, 2020, are hereby extended to April 11, 2020.” This was later extended to May 15, 2020, and the judicial emergency period was formally ended on May 12, 2020.



WISCONSIN

What immunity is provided?

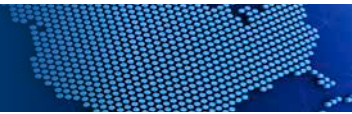
Health care providers in Wisconsin have limited immunity from civil liability for death, injury or other damages caused by their services during the coronavirus emergency. The measure does not provide immunity for “reckless or wanton” conduct or intentional misconduct.

Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?

Health care facilities, providers and emergency medical services are allowed flexibility in addressing staffing needs. An Executive Order pushed back renewal deadlines, adjusted the required training hours nurse aides need to practice and temporarily suspended requirements for resident care staff. Health care provider licenses that would have expired during the declared public health emergency remain active until 30 days after the emergency is over and individuals who are licensed in other states were given additional time to apply for a Wisconsin license.

Have statutes of limitations been extended?

There are no specific orders concerning the tolling of statutes of limitations.



WYOMING

<p><i>What immunity is provided?</i></p>	<p>Wyoming has enacted immunity to any person or business entity (including, but not limited to health care providers) that acts in good faith in responding to the COVID-19 health pandemic and follows the instructions of state, city, town or county health officials. The law excludes gross negligence or willful or wanton misconduct. The bill expires on June 30, 2021.</p>
<p><i>Have there been modifications of licensing requirements for health care providers and facilities, including requirements related to telemedicine?</i></p>	<p>The Wyoming Board of Medicine is temporarily expediting temporary licenses and extending expiration dates for licenses in need of renewal this year from June 30, 2020, to September 20, 2020. The board is also allowing doctors with expired licenses to return to practice for the duration of the public health state of emergency. Additionally, physicians and physician assistants not licensed in Wyoming may qualify to provide care, both in-person and via telehealth, to patients located in Wyoming during a public health emergency. The exemption from licensure, if approved, will be valid until the earlier of 45 days after the end of the Public Health Emergency or termination by the State Health Officer.</p>
<p><i>Have statutes of limitations been extended?</i></p>	<p>Statutes of limitations have not been modified or extended.</p>

A staggering proportion of physicians, including those in so-called “low-risk” specialties, will be subjected to medical malpractice allegations during their careers. Faced with a lawsuit, even the best physician’s judgment, integrity and ability to practice are on the line.

Hospitals and skilled nursing facilities and their medical and paramedical employees are also habitual targets of malpractice litigation. As a result, the modern practice of medicine is of necessity dependent on consistent and capable legal assistance.

For 40 years, Wilson Elser has repeatedly been chosen to defend medical practitioners and facilities in multimillion-dollar lawsuits. Our practice attorneys, many of whom have the benefit of prior careers in medicine, are familiar with the substance and nuance of every medical field, including but not limited to obstetrics, orthopedics, oncology, anesthesia, internal medicine, pediatrics, psychiatry and surgery. Their depth of knowledge coupled with the firm’s heritage and continued strength in insurance defense has attracted a large and growing clientele, including nationally renowned physicians and premier teaching hospitals. We also represent dentists, nurses, paramedics, podiatrists, radiologists, pathologists, counselors, social workers and other members of the allied health professions as well as managed care organizations and privately run emergency rooms.

Nursing home litigation, fueled by the relative absence of caps and the awarding of outsized punitive damages, has increased dramatically over the past few years. Intimately familiar with related state and federal regulations, our attorneys defend nursing home malpractice claims through all phases of

litigation. We also implement carefully crafted strategies that are designed to limit or avoid punitive damages available to plaintiffs under statute.

Whether the matter is simple and local or complex and multijurisdictional, clients value our considered approach to medical malpractice and health care defense and the extensive resources we apply against this practice. Among them are our skilled paralegals, several of whom are registered nurses, dedicated to reviewing medical records and researching medical materials. As a leader in technological case management, we use the most sophisticated equipment available to research, synthesize and store medical and legal information.

To mount more effective defenses for our clients, we additionally consult medical experts from several of the nation’s most respected institutions, including surgeons and professors from leading teaching hospitals and authorities from the National Institutes of Health. We are poised to assist health care professionals and facilities from the outset of a potential problem with knowledgeable and vigorous litigation support. If required, we draw on our vast experience defending clients at disciplinary hearings before professional boards.

Of course, the best way to counter medical malpractice lawsuits is to prevent their occurrence. Experience helps us recognize when medical

practice and facility operations can be modified to reduce the risk of professional liability claims. We routinely present seminars on topics such as proper charting and effective communication among health care practitioners and with their patients. We also conduct mock trials as part of our risk management services.

BUSINESS/TRANSACTIONAL SERVICES

In addition to our litigation, representation and risk management services, Wilson Elser assists medical facilities and practitioners with myriad business transactions and disputes. Among many transactional matters, our attorneys:

- Defend major health care insurers in payment and reimbursement disputes
- Review contracts with vendors, employees and other providers
- Assist in the formation of joint ventures and other business relationships
- Draft offering memoranda and related documents
- Prepare medical, facility and group governing board documents and bylaws
- Handle a wide variety of regulatory and operational issues in connection with HIPAA, EMTALA, the Stark Law provisions, Medicare conditions of participation and state licensing boards.

ALBANY, NY

200 Great Oaks Boulevard
Albany, NY 12203
518.449.8893

ATLANTA, GA

3348 Peachtree Road NE
Atlanta, GA 30326
470.419.6650

BALTIMORE, MD

500 East Pratt Street
Baltimore, MD 21202
410.539.1800

BEAUMONT, TX

Century Tower
550 Fannin Street
Beaumont, TX 77701
409.600.8100

BIRMINGHAM, AL

1500 Urban Center Drive
Birmingham, AL 35242
205.709.8990

BOSTON, MA

260 Franklin Street
Boston, MA 02110
617.422.5300

CHICAGO, IL

55 West Monroe Street
Chicago, IL 60603
312.704.0550

DALLAS, TX

Bank of America Plaza
901 Main Street
Dallas, TX 75202
214.698.8000

DENVER, CO

1225 17th Street
Denver, CO 80202
303.572.5300

DETROIT, MI

500 Griswold Street
Detroit, MI, 48226
313.327.3100

EDWARDSVILLE, IL

101 West Vandalia Street
Edwardsville, IL 62025
618.307.0200

FLORHAM PARK, NJ

200 Campus Drive
Florham Park, NJ 07932
973.624.0800

GARDEN CITY, NY

666 Old Country Road
Garden City, NY 11530
516.228.8900

HARTFORD, CT

100 Pearl Street
Hartford, CT 06103
860.969.8660

HOUSTON, TX

909 Fannin Street
Houston, TX 77010
713.353.2000

JACKSON, MS

1400 Meadowbrook Road
Jackson, MS 39211
601.499.8077

LAS VEGAS, NV

6689 Las Vegas Blvd. South
Las Vegas, NV 89119
702.727.1400

LONDON, ENGLAND

65 Fenchurch Street
London, EC3M 4BE
United Kingdom
+44.20.7553.8383

LOS ANGELES, CA

555 South Flower Street
Los Angeles, CA 90071
213.443.5100

LOUISVILLE, KY

100 Mallard Creek Road
Louisville, KY 40207
502.238.8500

MCLEAN, VA

8444 Westpark Drive
McLean, VA 22102
703.245.9300

MERRILLVILLE, IN

233 East 84th Drive
Merrillville, IN 46410
219.525.0560

MIAMI, FL

100 Southeast Second Street
Miami, FL 33131
305.374.4400

MILWAUKEE, WI

740 North Plankinton Avenue
Milwaukee, WI 53203
414.276.8816

NASHVILLE, TN

3102 West End Avenue
Nashville, TN 37203
615.324.7840

NEW ORLEANS, LA

650 Poydras Street
New Orleans, LA 70130
504.702.1710

NEW YORK, NY

150 East 42nd Street
New York, NY 10017
212.490.3000

ORLANDO, FL

111 North Orange Avenue
Orlando, FL 32801
407.203.7599

PHILADELPHIA, PA

Two Commerce Square
2001 Market Street
Philadelphia, PA 19103
215.627.6900

PHOENIX, AZ

2720 East Camelback Road
Phoenix, AZ 85016
480.562.3660

SAN DIEGO, CA

401 West A Street
San Diego, CA 92101
619.321.6200

SAN FRANCISCO, CA

525 Market Street
San Francisco, CA 94105
415.433.0990

SARASOTA, FL

2063 Main Street
Sarasota, FL 34237
941.210.5980

SEATTLE, WA

1700 7th Avenue
Seattle, WA 98101
206.709.5900

STAMFORD, CT

1010 Washington Boulevard
Stamford, CT 06901
203.388.9100

ST. LOUIS, MO

7751 Carondelet Avenue
Clayton, MO 63105
618.307.0200

WASHINGTON, DC

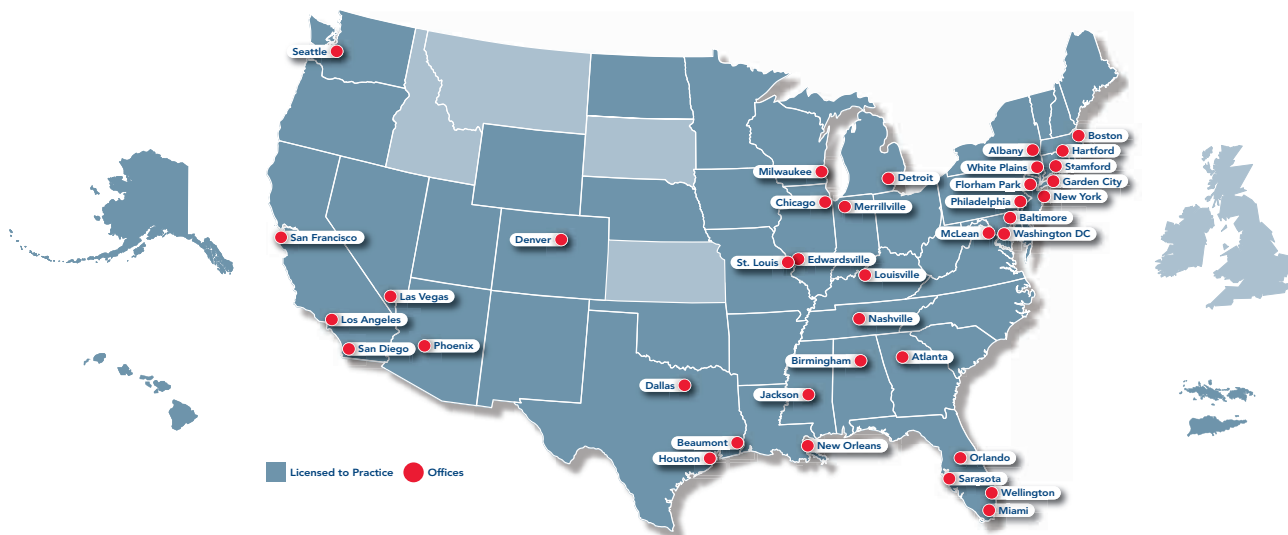
1500 K Street, NW
Washington, DC 20005
202.626.7660

WELLINGTON, FL

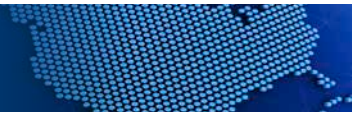
8461 Lake Worth Road
Lake Worth, Florida 33467
561.478.9930

WHITE PLAINS, NY

1133 Westchester Avenue
White Plains, NY 10604
914.323.7000



Coverage accurate at time of publication. Information is subject to change.



Julia Carbonetti

Associate – Washington, DC

julia.carbonetti@wilsonelser.com

Tyler Y. Cumbo

Associate – Washington, DC

tyler.cumbo@wilsonelser.com

Lauren M. Gibbons

Associate – Washington, DC

lauren.gibbons@wilsonelser.com

Pamela Langro

Associate – New York, NY

pamela.langro@wilsonelser.com

Gloria Mejia-Repp

Associate – New York, NY

gloria.mejia-repp@wilsonelser.com

Kathleen A. Mullins

Associate – New York, NY

kathleen.mullins@wilsonelser.com

Dalton E. Patterson

Associate – Washington, DC

dalton.patterson@wilsonelser.com

Timothy Scott

Associate – Washington, DC

timothy.scott@wilsonelser.com

OFFICES

Albany, NY
Atlanta, GA
Baltimore, MD
Beaumont, TX
Birmingham, AL
Boston, MA
Chicago, IL
Dallas, TX
Denver, CO
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