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In 2003, the state of Texas passed a radical bill that placed strict limits on medical malpractice damages for pain and suffering. Under the guise of “tort reform,” this law has not only placed sweeping restrictions on the rights of citizens who have been injured by malpractice, but failed to curb the rising costs of health care within the state of Texas. If proponents are successful in exporting similar laws to other states, they could rob patients of their right to fair and just compensation for their injuries.

Texas governor Rick Perry pushed for the medical malpractice law that capped non-economic damages for pain and suffering to \$250,000 per provider, with a total limit of \$750,000. Damages for lost income or medical costs were not capped. While Gov. Perry assured Texans that the [medical malpractice damage caps](#) would bring “affordable health care” to the state, these promises have not borne fruit. Statistics show that health spending indicators for the state have fallen in a number of key areas in the last eight years.

According to an October 2011 report by the consumer advocacy group Public Citizen, health care costs have risen dramatically in Texas since the damage caps law was passed. The state’s Medicare costs have risen by nearly twice the national average; other costs—including health insurance premiums and costs for laboratory or diagnostic tests—have also risen compared to the national average.

At the same time, the rate of uninsured in Texas has continued to climb. An estimated 27.8% of Texans lack any health insurance, the highest figure out of any U.S. state. And while proponents of the damage caps argued that removing the threat of potential litigation and high medical malpractice insurance costs would bring doctors to the state, Texas now has fewer physicians per capita in non-metropolitan areas than before the bill was passed.

Despite arguments that the medical malpractice damage caps would bring better health care to the state of Texas, the real beneficiaries of this law are the insurance companies. Patients, meanwhile, have seen their health care costs rise and the availability of quality health care dwindle, while being stripped of their right to recover fair damages when they find themselves the victim of medical malpractice.

These results should call into question claims by advocates of the Texas law who claimed that damage caps on medical malpractice claims would lower costs and should give pause to citizens whose states may consider similar laws in the future.