Tort reform has had just the impact we desired

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In 2003, Texas was facing a real crisis, one that we met with a specific solution.

The crisis involved a dramatic drop in the number of doctors practicing medicine in our state, as we fell all the way to 44th in a national ranking of physicians per capita. Even more concerning, the greatest loss occurred among doctors practicing in high-risk specialties. Patients in dire need were discovering the only local doctors who could help them had either left the state or ceased treating their types of ailments.

The crisis' prime culprit was skyrocketing malpractice insurance rates that reflected Texas' status at the time as a lawsuit haven. To remedy this, we took the bold step of instituting tort reforms to limit lawsuit abuse and bring malpractice insurance rates down to a manageable level. And it was an overwhelming success.

We said that if reforms became law, doctors would start working in emergency rooms again, and they have. We said doctors would again choose to treat the sickest and most injured patients, and they have. We said more high-risk specialists would be available to treat the public, and they are. We said we would be able to recruit much-needed specialists to Texas, particularly to rural areas, and we have.

This was all great news for Texans who needed medical care, as well as the men and women providing it. The reform wasn't good news for trial lawyers. Personal injury trial lawyers, who spent millions unsuccessfully fighting voter passage of the medical liability reform amendment in 2003, have been using smoke and mirrors, statistical sleight of hand, and falsehoods to undermine it since. A recent report from a University of Texas law professor with close ties to the trial lawyer lobby was just another in a long line of false attacks against the successful work of Texas lawmakers and voters to reduce frivolous medical lawsuits and protect access to the courts for people who are truly injured. This report is particularly troubling because it effectively disregards the very real physician crisis we were facing and the pain and hassles it caused Texas patients who needed cardiologists, obstetricians or emergency-room care. Between 2001 and 2003, the high point of our physician crisis, 99 Texas counties lost at least one high-risk practitioner. That number, by the way, was fairly divided between rural counties (52 losses) and urban counties (47).

Even doctors who hadn't left the state or the business had made changes to protect themselves from frivolous lawsuits, and as a consequence, Texans lost even more access to valuable care. During the two years prior to our reforms, 5,001 high-risk specialists limited their practice to less hazardous cases, meaning only 5,674 of 10,675 licensed high-risk specialists were actually providing a full range of services to patients. In short, Texans were finding fewer doctors to treat them when they needed expert care the most.

Passing tort reform reversed that trend. According to Texas Department of Insurance data, malpractice insurance rates have plunged more than 30 percent since passage, with some of the top insurers slashing rates more than 40 percent. As a result, Texas Medical Board data show the state has added 11,941 physicians since May 2003, a 31.3 percent surge, well above our population growth rate of 17 percent over that span. High-risk specialists are a big part of that trend, with their numbers growing more than twice as fast as the state's population, and the number of pediatric sub-specialists growing at a rate 10 times faster.

Where Texas once ranked 44th in physicians per capita, today we rank 20th, despite our rapidly expanding population.

That means today, more doctors are in Texas emergency rooms, operating rooms and clinics, saving lives in counties large and small.

This report wasn't the first to try to obscure the facts on tort reform, and likely won't be the last. But the bottom line is, tort reform in Texas did precisely what it was designed to do. And that meant better health care for all of us.