



[Cato Says Med Mal Caps Are Bad](#)

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The conservative-libertarian Cato Institute released a [white paper this week that concludes that caps on medical malpractice damages are bad for patients](#) because they remove incentives for medical liability insurers and physicians to reduce risk associated with the practice of medicine. You read that right. The Cato Institute believes med mal caps are bad.

Despite all evidence to the contrary, some (read: Rick Perry, TLR, TPPF, etc.) continue to argue that stripping patients of their rights was a good idea. That was easy to do when the only ones arguing with them were patient advocates. Wonder what they will say to a group that counts David Koch (yes, that David Koch) among other corporate titans as members of its board of directors.

The Cato paper is written by [Shirley Svorny](#), an economics professor at Cal State-Northridge and an adjunct scholar at Cato. Her bio reports that she has participated in health policy summits hosted by the Texas Public Policy Foundation.

Dr. Svorny writes:

“[P]olicies that reduce liability or shield physicians from oversight by carriers may harm consumers. In particular, caps on damages would reduce physicians’ and carriers’ incentives to keep track of and reduce practice risk.” [...]

“I conclude that important consumer protections could be lost were caps on economic and noneconomic damages to reduce insurance industry incentives to evaluate and minimize risk associated with the practice of medicine.”

The Cato paper comes on the heels of a [report by Public Citizen](#) that similarly concluded that Texas patients have suffered under the legal restrictions imposed on them in 2003. Among Public Citizen’s findings are that both overall health care spending and individual health care premiums have risen faster than the national average, the rate of uninsured

has continued to rise, and under-served rural communities have seen a decline in physician supply.

With scholars from every end of the ideological spectrum (and countless patients in between) pointing out that limiting the rights of patients is dangerous and wrongheaded, maybe Rick Perry and the legislative leadership will wake up and get serious about patient safety by restoring meaningful accountability and implementing proven patient safety measures.