## **'Flesh peddlers'**

## Blame placed for malpractice suits

## By Tim Richard stalf writer

Medical malpractice insurance is sky-rocketing in cost because Michigan physi-cians are being sued so heavily and often, a parade of witnesses told a Senate panel. "Both the size and number of claims are

""Both the size and number of claims are growing at an unconscionable rate," Fredrick Minkow, Bioomfield Hills physi-clan and president of the Oakland County Medical Society, told the Senate Judiciary Committee hearing in Pontine. An obstetriclan pays \$40,000 for \$1 mil-tion of coverage, and cardiac and ortho-pedie specialists pay \$50,000, said Minkow, one of about 16 witnesses heard Tuesday. "Doctors are taking early retirement, and many younger doctors are leaving the state," he said. "Doctors routinely consider every person who comes to an emergency room for the first time" as a potential plaintif in a lawsuit, creating "an iron cur-tain of fear" between patient and physician.

EDWIN DOEIRING, Farmington esteo-path and president of the 220-member Michigan Association of Osteopathic Physi-cians, said 89 percent of general practition-ers have stopped or will stop taking ob-steric cases because of "the thirst for mon-ey through our court system." Kevin Clinton, chief actuary for the state Insurance Bureau, said that in an atmos-phere of lawaulis, where claims and jury awards are rising faster than inflation. "In-surers are unable to reasonably price their product." Clinton was warmly applauded by an au-

product." Clinton was warmly applauded by an au-dience packed with hundreds of physicians during a hearing of the Senate Judiciary Committee in the Oakland County Commis-sioners auditorium in Pontiac.

DOCTORS, INSURERS and lawyers who defend them put the blame for the rising tide of malpractile cases and the mass exit of medical practitioners on "fiesh pedders and malpractice mills." Those were their terms for companies which advertise like interatical agents promoting out-of-state ex-pert witnesses who sell their testimonty to

patients suing doctors. Lawyers — such as Oakland County Bar Association President George Googaian of Bioomfield Hills — were booed and hissed when they maintained that Juries were only doing justice to patients wrongfully harmed by incompetent medical care. Siding with the doctors was Judiclary Committee Chairman Alan Cropey, R Cropey pulley having out James Tuck, president of the Michigan Trial Lawyers association, for "being negligent" in ignor-ing three carifer hearings and falling to of-ter solutions to the problems.

Ter solutions to the problems. CLINTON, A soft-spoken statistician, focused more than any of the other wilness-edge insurance costs high medical malprac-tice insurance costs high medical malpractice claims have these distinctions: • Malpractice settlements are higher on average, with a wider variation in awards. • Malpractice claims frequently aren't reported until two years after an incident. • Malpractice cases are not paid off un-til four of five years after the event. • Malpractice cases are costlicer to liti-gate.

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Because costs are so uncertain, insurers

And because costs are so uncertain, insurers are unable to estimate losses and must build up large reserves, Clinton said. And because so much of the settlement goes to courts, attorneys and expert wit-nesses, he said, "It is not a cost-efficient system".

"THE INDIANA Plan is the salvation of dectors," said Mike Miller, vice president of operations for Medical Protective Co., a Fortex Wayne, Ind., insurer against medical malpractice in 15 states, including Michi-gan. (See boot on this page for Indiana Plan details) Miller agreed with Clinton that insurers can't accurately predict premiums because they don't know what their payout will be. "Until you have the Silverdome collapse, you don't know how to price it. "Is Michigan different from other states?

Absolutely!" said Miller, noting all but a handful of insurers quit Michigan years ago. "Fiesh pedilers and malpractice mills are your No. 1 problem," he went on. "They foutients' lawyersh have gotta go out of state to get 'experts. You've gotta change that 'arena. You've gotta make it unethical for them to do that." Miller also advocated that a "screening panel" of three doctors be set up to weed out "non-merilorious claims" and perhaps discourage them from going to trial.

SPENCE JOHNSON, president of the Michigan Hospital Association, said rising maipractice costs will reduce the availabili-ty of medical care. More lawsuits and larg-er awards are having "devastating results," be said.

"The word is out among practilioners ...don't go to Michigan," Johnson said. David Benferd, executive vice president of Henry Ford Hospital, said 3565 of every patient's bill goes to cover malpractice in-surance, whose costs have risen 200 percent in two years.

Rick Grattan, a lawyer representing the Michigan State Chamber of Commerce, said, "The cost of medical malpractice has gone through the root," It's caused 'not by any decline in the quality of medical care but by patients' expectations of perfect ba-bies... and a litigious society that sues at the drop of a stethoscope."

Robert M. Leitch, president and chair-nan of Michigan Physicians Mutual Liabili-y Co., said malpractice claims have soared from 10 per 100 physicians in 1979 to 25 per ty Co

Tom to be two presentations of the second se

Oakland Prosecutor L. Brooks Patterson said filing fees for medical malpractice cases should be lifted from \$75 to a non-refundable \$1000. Judges should be re-quired to fine persons who file "frivolous" claims \$5,000. 'Let's end the fishing exped-tion," Patterson said.



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## 'Indiana plan' boosted

Hospital and insurance groups in Michigan are railying bohind a set of legislative reforms almed tracting the cost of medical malpractice has-nully and the set of medical malpractice has-nully be and the set of the set of the set made in 1975, the main features are: 1. Place a cop on award in malpractice cases. Most often mentioned figure \$500,000. 2. Réduce the interest are on awards. Currently, the jury's award earns 12 percent interest from the day the case is filed - typically three or four years before it's settled. 3. Allow "tirrectured payments" of large awards.

before it's settled. 3. Allow "structured payments" of large awards, so that insurers wouldn't have to pay out more than \$500,000 in one year. Limit payments to the ilfe-time of the plainliff. 4. Require that "expert" medical witnesses spend for percent of their time in practice or teaching in their specialties. Eliminate use of "experts" who do nothing but testlfs for a living "experts" who do

their specialties. Eliminate use of "experts" who do nothing but testify for a living. 5. End "deep pockets" hicking where the medical decinatar with the most money is expected to pick up the bill. Where there are multiple defendants, don't make one defendant disproportionately liable. 6. Limit time after injury in which a suit may be filed, insurers complain Michigan has no effective statute of limitations, and lawsuits are started 20 years (for example) after brain damage is known to bave occurred.



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