



To: Members of the Ohio House Judiciary Committee

Fr: Monica Hueckel, Vice President, Advocacy, Ohio State Medical Association
Sean McGlone, Senior Vice President and General Counsel, Ohio Hospital Association

Da: November 5, 2025

Re: HB 447

Chairman Thomas, Vice Chair Swearingen, Ranking Member Synenberg, and Members of the Committee:

On behalf of the Ohio State Medical Association (OSMA) and the Ohio Hospital Association (OHA), we appreciate the opportunity to submit this testimony in opposition to House Bill 447. We remain seriously concerned that the proposed increases to the state's medical liability caps—even as amended—would destabilize Ohio's medical malpractice insurance market and risk undoing two decades of hard-won progress under the early 2000s tort reforms.

As amended, House Bill 447 raises the noneconomic damage limits in medical malpractice cases from \$350,000 per plaintiff and \$500,000 per occurrence to \$580,000 and \$830,000, respectively. It also increases the catastrophic injury cap from \$500,000 per plaintiff and \$1 million per occurrence to \$830,000 and \$1.665 million, and further authorizes the Department of Taxation to increase these caps annually based on the Consumer Price Index. Although we appreciate the decision to retain a cap for catastrophic cases, the bill still represents a substantial and continually escalating expansion of liability exposure for Ohio's physicians and hospitals.

History provides a clear warning. Before the 2003–2005 reforms, Ohio's medical liability environment was in crisis: malpractice insurance premiums surged, insurers exited the market, and physicians—particularly in high-risk specialties like obstetrics and neurosurgery—either left the state or significantly limited critical services. The stability restored by predictable caps on noneconomic damages has enabled insurers to maintain reasonable rates, hospitals to recruit and retain physicians, and patients to access the care they need. Reintroducing volatility through significantly higher and automatically increasing caps threatens to reverse this stability and could lead to renewed access issues and financial strain on the system.

For these reasons, OSMA and OHA respectfully urge the Committee to reconsider the impact of House Bill 447 on Ohio's healthcare delivery system. We ask that the General Assembly preserve the balance, fairness, and predictability that have served patients, providers, and the broader system well over the past twenty years. We share the goal of maintaining access to justice for patients while ensuring that healthcare providers can continue delivering high-quality care in a stable, sustainable liability environment.