The 105th General Assembly convenes next month, and Medical Liability Reform will continue to loom large as one of the most pressing needs. Our success in passing meaningful reform depends on our ability to “connect the dots” for the general public between increasing costs, decreasing access to affordable health care, and the specter of jackpot justice.

Although major reforms including caps on non-economic damages have not yet been achieved in Tennessee, the tide may be turning as neighboring Southern states which have passed liability reform track their success at lowering liability coverage costs as a result.

In Texas, where Proposition 12 amended the state constitution to limit non-economic damages to $750,000, progress is reportedly astonishing on several fronts. As insurance premiums have come down, physician recruitment has increased by 38 percent. The number of specialists is growing, and hospitals report saving as much as $10 million on premiums. In Mississippi, the largest insurer of physicians has cut rates three times since liability reforms were adopted in 2004.

Similar progress can be accomplished here in Tennessee if we “connect the dots.” We must elevate the debate from “greedy lawyers” versus “greedy insurers” versus “greedy health care providers” to the real issue which is “access to affordable health care.” Certainly, the American Medical Association’s declaration of Tennessee as one of 44 crisis states in the nation helps draw attention to the problem, but recent polls indicate that the general public may now be more aware of the correlation between accessibility, affordability and reform.

In a recent survey by USA Today, ABC News and the Kaiser Family Foundation, 37 percent attributed soaring health care costs to too many medical malpractice lawsuits. A similar percentage blamed overuse and waste, including unnecessary treatments. With some estimating that as much as 30 percent of health care is unnecessary, concerns about defensive medicine in the absence of medical liability reform may translate into broader public support for meaningful reform in 2007.

Two years ago, in an article I wrote for the Tennessee Medical Association, I equated the liability reform effort up to that point with a spaghetti western, The Good, the Bad, and the Ugly. I was critical that more of you did not participate.

That has changed. You are to be commended for your efforts during the previous legislative session. We saw more white coats on Capitol Hill than ever this year, and it is making a difference. With your continued assistance next year, we’ll “connect the dots” for medical liability reform and assure access to affordable health care for all.