



**Testimony of the
Medical Professional Liability Association
before the
House of Delegates Courts of Justice Committee
March 4, 2026**

On behalf of the Medical Professional Liability Association (MPL Association), thank you for the opportunity to submit testimony on the proposal to substantially increase damage caps for medical liability claims in Virginia. The Association wishes to express our strong opposition to these proposed changes.

The MPL Association is the trade association representing the interests of insurance companies, risk retention groups, captives, trusts, and other entities with a commitment to the quality delivery of healthcare, patient safety, and fair tort reform – who in turn represent, educate, and protect hundreds of hospitals and thousands of physicians, allied healthcare professionals, and nurses in the commonwealth of Virginia.

The proposal to raise Virginia’s cap on damages in medical liability claims is unprecedented, and as such should be delayed pending a comprehensive analysis and complete understanding of its ramifications and impact.

Other states that have raised damage caps in recent years have done so only after extensive negotiations involving a large number of stakeholders. Those states also prudently elected to raise their caps incrementally, limiting the economic shock to both their healthcare and insurance systems. The legislature’s rushed effort to more than double Virginia’s current cap with minimal stakeholder input prevents a viable financial transition for all stakeholders involved and creates consequences that will be detrimental to patients, healthcare professionals, and the insurance safety net when an adverse medical outcome occurs.

A recent study of states that have repealed damage caps (*The Repeal of Noneconomic Damage Caps and Medical Malpractice Insurance Premiums*, Health Econ. 2025 December ; 34(12): 2223–2237) found that medical liability insurance premiums rose substantially, with higher-risk specialties such as surgeons and OB-GYNs incurring the most significant increases, following repeal.

While legislators have wisely chosen not to fully repeal the commonwealth’s cap, the magnitude of change proposed over such a short period of time is very likely to have a similar economic impact, making it extremely difficult for health professionals and facilities to withstand significantly increased costs and maintain current operations while

reimbursement rates from federal programs and private health insurers remain relatively low.

Even with its current cap in place, the value of claims paid in Virginia rose more than three times faster than the U.S. national average during the last 20 years. An analysis of paid medical liability claims based on data submitted to the National Practitioner Data Bank reveals that during this period Virginia saw a higher rate of increase in the cost of paid medical liability claims than all of its neighboring states with the exception of Kentucky, with many of those states actually seeing the cost of paid claims decrease in that time period. Raising the damage cap suddenly and considerably will only worsen this disparity.

There is a distinct possibility that this legislative action could spur a healthcare crisis in Virginia. Healthcare professionals are influenced by medical liability environments when determining where they practice medicine. Dramatically escalating the current damage cap does not improve the medical liability situation – and in fact likely worsens it. At a time when physician shortages are prevalent nationwide, it isn't beneficial for Virginians to make other locales more appealing to healthcare professionals than the Commonwealth. In addition, nearly one-third of the Commonwealth's hospitals serve rural communities. They will be unable to absorb the higher costs of coverage reflective of an increased cap – resulting in either closures, limited bed availability, or decreased physician availability, thus putting the health of Virginia residents at risk.

Supporters of the damage cap increase have not provided any evidence that increasing the cap on damages will benefit Virginians. In fact, it does the opposite: It does not bring more health professionals into the state, it does not make healthcare more affordable, and it does not improve patient safety. The only group to benefit from this approach are the personal injury lawyers who enrich themselves by taking significant portions of awards and settlements that are intended to aid injured patients.

In light of this, we urge the committee, in the strongest possible terms, to reject the proposal before it and insist on further study and analysis of any plan to raise damage caps.

We appreciate this opportunity to present this testimony and for your consideration of the MPL Association's views. Should you have any questions or need further information, please do not hesitate to contact me at 240.813.6139 or via email at mstinson@MPLassociation.org.

Thank you.



Michael C. Stinson

Vice President, Public Policy and Legal Affairs