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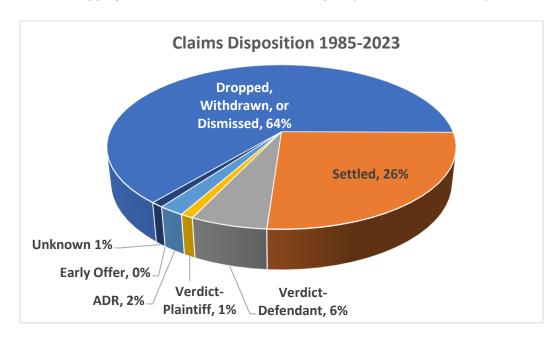
Glut of Meritless Claims Slow MPL Resolutions

Medical professional liability insurers seek prompt resolution of legitimate claims. This is why, of the nearly 351,000 claims reported to the Association's Data Sharing Project between 1985 and 2023, 26 percent were resolved by a settlement. Insurers will not contest an easily provable claim, as doing so would simply waste time and money. Instead, when negligence is clear, prompt negotiations ensure the injured patient is compensated in an expeditious manner.

Other claims are more complex and not so easily resolved, requiring a jury to render a decision as to whether or not the healthcare professional was negligent. After being presented with all the facts, juries determine that negligence occurred in only 16 percent of all cases they are asked to decide. This amounts to only *one percent* of all medical professional liability claims filed. In the remaining cases that go before a jury (approximately six percent of all filed claims), the jury determines that the healthcare professional's acts were not negligent, and that, while an unfortunate outcome may have occurred, it was not the healthcare professional's fault.

So, what about the remaining two-thirds of all medical professional liability claims that are filed? Of those, *96 percent* are demonstrated to be without merit, and are therefore dropped, withdrawn or dismissed with no payment being required. When combined with the defense verdicts noted above, this means 70 percent of all filed claims are eventually determined to be meritless. These claims consume tens of thousands of dollars each, funds that could otherwise be used to compensate victims of actual negligent acts.

Meritless claims are a huge drag on the medical liability system, wasting valuable financial resources and clogging our courts. Tort reforms are urgently needed to fix the system.



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