From: Mike Staffen <drmikestaffen@sympatico.ca>
Sent: Saturday, August 24, 2019 4:54 PM
To: CCO Info
Subject: professional liability Insurance

Dear CCO Board Members

With regards to the professional liability insurance draft amendments. I would recommend that the board determines what the average pay out per occurrence has historically been and determine if the professional liability limits are sufficient to protect the public. If they are sufficient then there would be no necessity to change the limits which would only cost the members more money and be of no benefit to the public, however if it is determined that the current limits are not satisfactory then change to the appropriate amounts.

Thanks
Mike Staffen

II. Draft Amendments to By-law 16: Professional Liability Insurance

The proposed amendment to By-law 16: Professional Liability Insurance increases the limits of the total protection provided from $1,000,000 per occurrence and $3,000,000 per year, to $5,000,000 per occurrence and $5,000,000 per year, which enhances public protection and is consistent with the increased limits available through the current carriers of insurance or membership in the CCPA.

Pike CHIROPRACTIC HEALING CENTRE

Aug 15, 2019

To the attention of C.C.O. executive committee, Ms Jo-Ann Willson, Registrar and General Counsel,

I am grateful to each of you have contributed to the regulatory process with and for our profession and public we are priveleged to serve.

5. Amendments to By-law 16: Professional Liability Insurance: In lieu of my comments here I will quote my insurer Ronnie Roberts.

"Hello Bob,

The CCO proposed amendment is vague. The reason stated for the proposed increase is based upon the requirement of Insurance carriers to issue a $5,000,000 per loss/$5,000,000 aggregate limit? The Intact program provides options to purchase $2,000,000/$4,000,000 Aggregate, $3,000,000/$5,000,000 aggregate & $5,000,000/$5,000,000 aggregate. The word Insurance has been removed and states that Protection only will be in the proposed bylaw. This may be alarming if the CCO is only permitting registrants to provide Protection vs. insurance. This requires clarification. All coverages provided by CCPA and Insurers is written on a Claims Made form vs. Occurrence Basis. Prior Acts is an option with both CCPA and Insurers after the registrant ceases to be an active registrant. The CCO bylaw states that the coverage must provide Occurrence basis while in active practice.
The Bylaw needs clarification"

I apologize for sending my input in so late. I hope others have not waited as i did because of the number of consideration to mull over. Remember that "when you doubt your power; you empower your doubt".

6. So what does this mean for the public of Ontario?"

Respectfully submitted,

Dr. Bob Pike,
CMCC 1980
CCO 1577

Joel Friedman

From: Peter Lemasurier <peter.lemasurier@gmail.com>
Sent: Sunday, August 25, 2019 10:49 PM
To: CCO Info
Subject: Re: Message from the CCO President - August 23, 2019

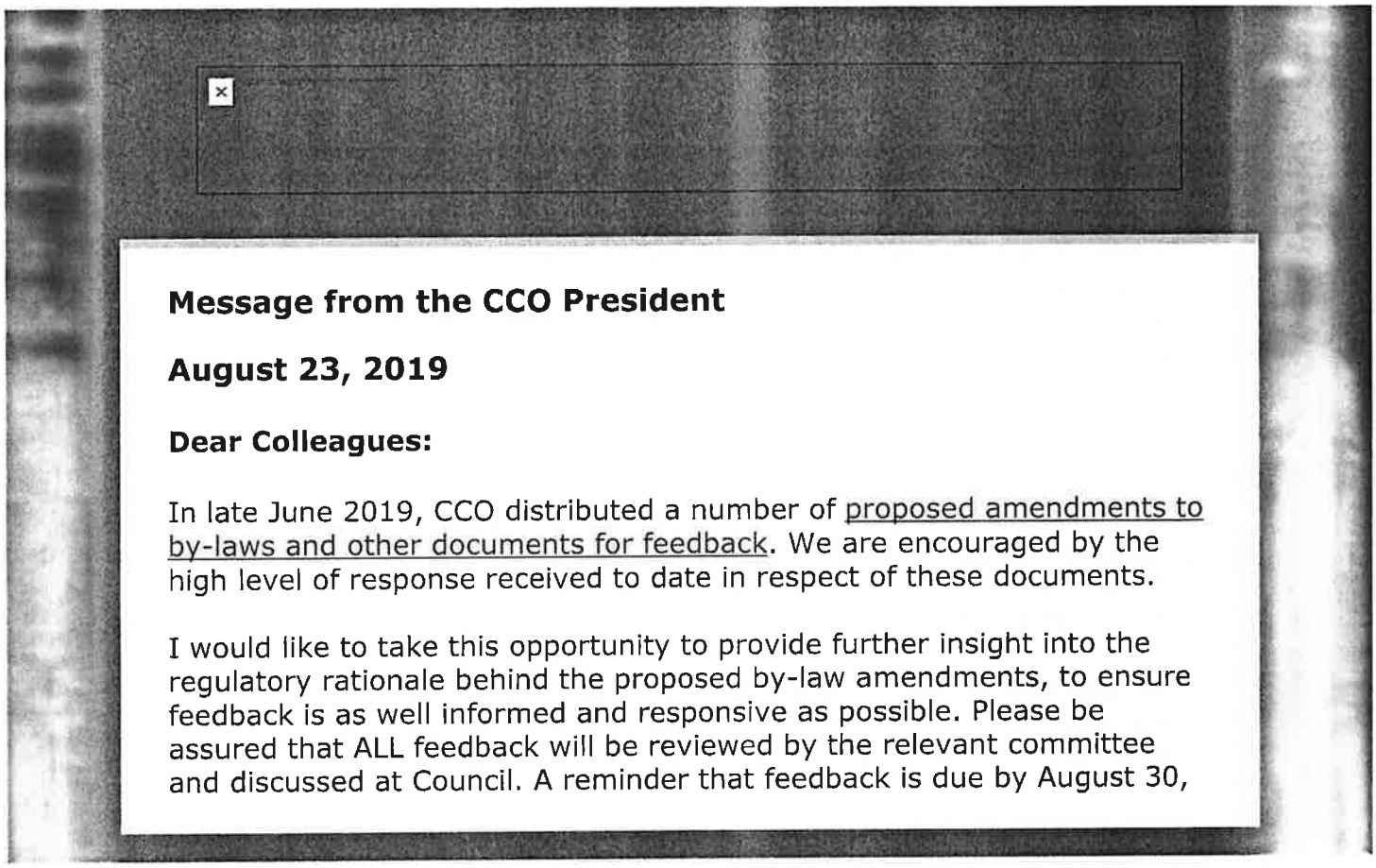
656

Re proposal to increase malpractice insurance coverages.

Dear Dr. Mizel and council members:
Further to the proposed limit increase to $5,000,000 malpractice insurance/ protective fund; I strongly feel this would only further incentivize solicitors and prospective patients to bring more salacious and unwarranted claims against our members. The increased insurance fees will ad undue financial burden to our practitioners ,many of whom are struggling as it stands. It is important to protect the public interest, but at what cost ? This inflated proposed amount of monies is unecessary and unwarranted in order to rehabilitate an individual. The interest bearing from 3 million dollars is more than adequete to fund a lifetime of care in the extreme at this juncture.

Sincerely; Dr. Peter Lemasurier ,D.C.

On Aug 23, 2019 4:59 PM, "College of Chiropractors of Ontario" <cco.info@cco.on.ca> wrote:



Message from the CCO President

August 23, 2019

Dear Colleagues:

In late June 2019, CCO distributed a number of proposed amendments to by-laws and other documents for feedback. We are encouraged by the high level of response received to date in respect of these documents.

I would like to take this opportunity to provide further insight into the regulatory rationale behind the proposed by-law amendments, to ensure feedback is as well informed and responsive as possible. Please be assured that ALL feedback will be reviewed by the relevant committee and discussed at Council. A reminder that feedback is due by August 30,

2019. The agenda for the September 13, 14, 2019 Council meeting will include a review of any committee recommendations.

I. Re: Draft Amendments to By-law 6: Election of Council Members

Background

Under the *Chiropractic Act, 1991*, CCO has 9 elected Council members, and 6 or 7 public members. The 9 elected members are from different parts of the province, although three of those positions are in District 4, Toronto. The eligibility criteria to serve on CCO Council are set out in By-law 6.

Currently, employees, officers or directors of certain chiropractic organizations are *not* eligible for CCO Council until 12 months have passed before the date of the election (a "cooling off period"). The currently listed organizations are: OCA, CCA, CCPA, AFC, CCEB, CSCE, and the CCEC of the FCC (acronyms defined in By-law 1: Definitions and Interpretations). Currently, there is no "cooling off period" for administrators, officers and directors of CMCC and UQTR before being eligible for CCO Council and there are no restrictions on eligibility for other CMCC employees. Council has discussed the issue of eligibility for Council and the real or perceived conflicts of interest at various times over the past couple of years. CCO has received various feedback about eligibility to serve on CCO Council in response to other by-law circulations.

The proposed amendments would broaden the criteria for ineligibility to include employees of chiropractic educational institutions (including CMCC and UQTR), and former employees within the cooling off period, in the same manner as the other chiropractic organizations enumerated in the By-law. In recognition of the importance of having feedback from CMCC as the only accredited chiropractic educational institution in English Canada, a new advisory position would be created, whereby CCO could select from nominees provided by CMCC. This position would ensure that Council benefits from CMCC's expertise and perspective during its deliberations. It would be up to Council to determine how best to utilize the expertise of an academic appointment/advisor for matters before Council. However, we note that this position should *not* have been described as an "ex officio" position in our consultation documents and proposed by-law language (as CCO cannot add to Council composition without amending the *Chiropractic Act, 1991*), but rather as a non-voting, advisory position.

The rationale behind the proposed amendment is to preserve Council's access to the expertise brought by representatives of educational institutions, while avoiding any real or perceived conflict of interest occasioned by employees of educational institutions serving as voting members of Council.

Joel Friedman **658**

From: Joel Friedman
Sent: Friday, August 16, 2019 4:12 PM
To: 'chairman@allianceforchiropractic.com'
Cc: 'drmizel@stcatharineschiropractic.com'; Jo-Ann Willson
Subject: RE: Need Clarification

Good Afternoon,

Thank you for your email. All feedback will be reviewed and considered by the Executive Committee in making any recommendations to Council.

- The proposed amendments do not intend to disallow members from being protected from insurance companies such as AXA-Intact or Lloyds of London (AON Canada). These providers would continue to be acceptable liability insurance providers for members. The term protection would include both membership in a protective association and insurance coverage from an underwritten company. The Executive Committee will review this feedback for consideration of any further amendments.

- The proposed change to increase coverage is being circulated for feedback. The rationale for this proposed increase is that this figure appears to be consistent with the standard coverage for the majority of chiropractors in Ontario. The Executive Committee will review this feedback for consideration of any further amendments.

Regards,

Joel D. Friedman, BSc, LL.B
Director, Policy and Research
Note: Address Change
College of Chiropractors of Ontario
77 Bloor Street West, Suite 600
Toronto, ON M5S 1M2
Tel: (416) 922-6355 ext. 104
Toll Free: 1-877-577-4772
Fax: (416) 925-9610
E-mail: jfriedman@cco.on.ca
Web Site: www.cco.on.ca

Begin forwarded message:

From: Craig Hazel <chairman@allianceforchiropractic.com>
Date: August 13, 2019 at 8:50:19 PM EDT
To: "Dr. Mizel" <drmizel@stcatharineschiropractic.com>, Jo-Ann Willson <jpwillson@cco.on.ca>
Subject: Need Clarification

To the Executive Committee,

I am writing to you to ask for clarification on the proposed amendment changes to Bylaw 16: Professional Liability.

The proposed changes read as:

Each member holding a general or temporary certificate of registration must provide ~~evidence satisfactory to the registrar of carrying~~carry and provide evidence satisfactory to the registrar of carrying professional liability ~~insurance~~protection in the applicable minimum amount per occurrence and minimum aggregate amount per year, including coverage for claims after the member ceases to hold a certificate relating to occurrences while holding a certificate, or membership in a protective association that provides equivalent protection. A member who is or will be when registered, an employee of a member, a health facility or other body that has equivalent professional liability insurance coverage or membership in a protective association that provides equivalent protection is deemed to comply with this section.

659

We have concerns regarding the clarity of the wordings in the proposal. The word Insurance has been removed and replaced with Protection only. Does this still offer Ontario registrants (CCO Members) to use an underwritten company such as AXA-Intact or Lloyds of London (AON Canada). The proposes changes would seem that this amendment would force all Ontario Registrants to be a member of the CCPA which would require OCA and CCA membership. Immediate clarification must be provided by the CCO.

Our second concern is the Rationale for Proposed Change stayed on the CCO website, "An increase in professional liability protection requirements is consistent with what is required of members by malpractice insurance providers".

This seems vague. We must understand why the proposed change for $5,000,000/$5,000,000 when there are several options available to members.

Thank you.
Dr. Craig Hazel

Feedback Received on Draft Proposed Amendments to By-law 16: Professional Liability Insurance

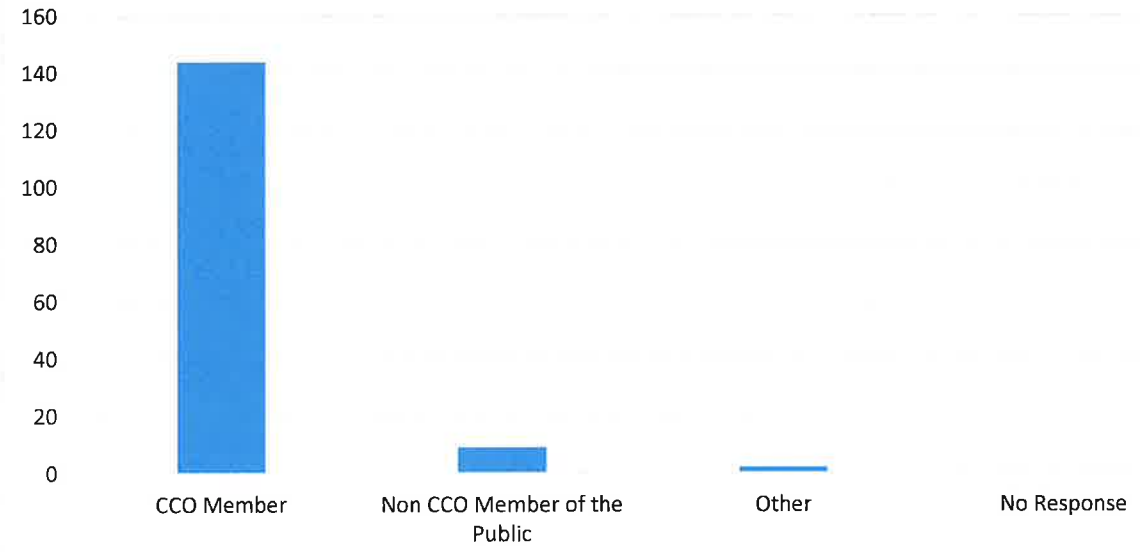
As of August 30, 2019, 4 pm

This following feedback on draft proposed amendments to By-law 16: Professional Liability Insurance has been received through the online survey portal as of August 30, 2019, 4 pm.

Member Email/Anonymous	Number of Responses
Total Responses	156
Responses through Email	87
Responses through Website (anonymous)	69

What type of stakeholder are you?

Type of Stakeholder	Number of Responses
CCO Member	144
Non CCO Member of the Public	9
Other	2
No Response	0

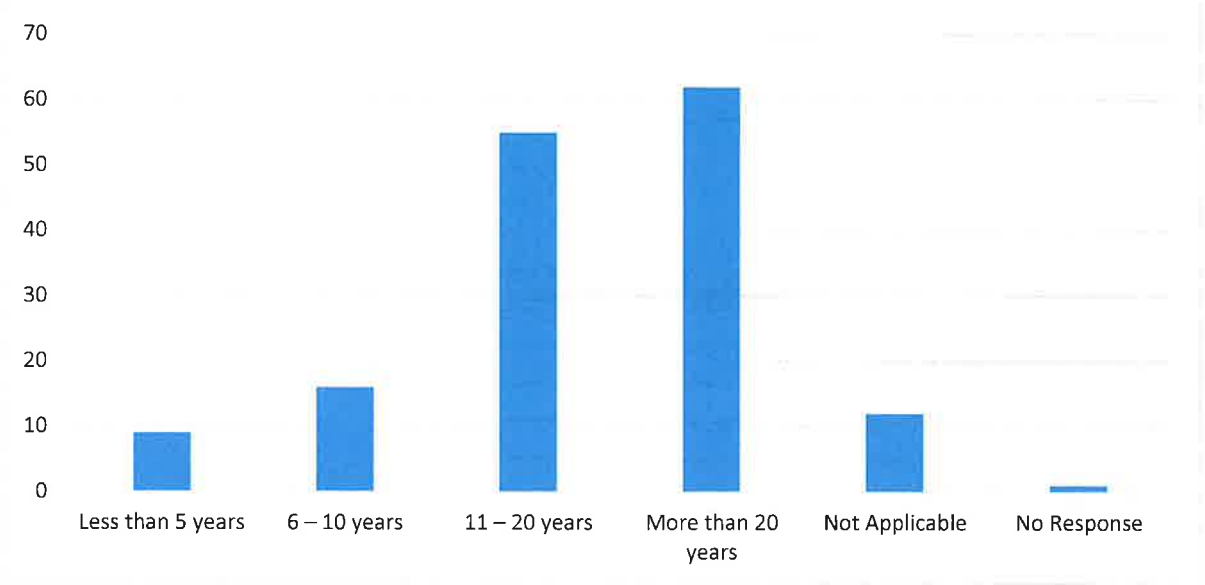


Other:

Chiropractor
Chiropractic Patient

If you are a member of CCO, how long have you been in practice?

Less than 5 years	9
6 – 10 years	16
11 – 20 years	55
More than 20 years	62
Not Applicable	12
No Response	1

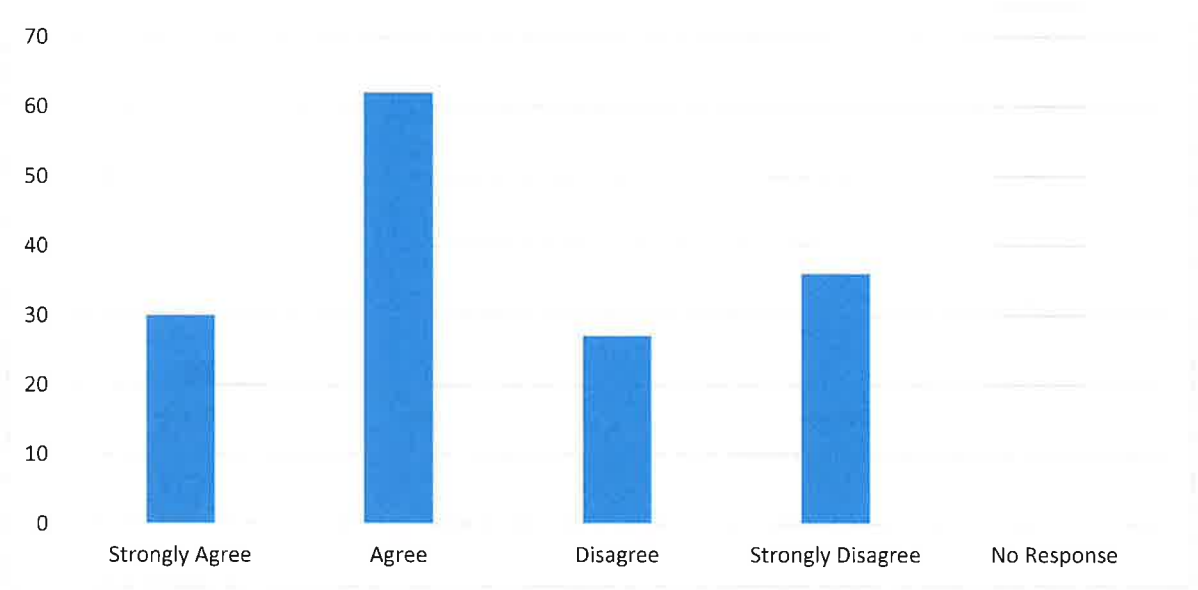


If you are a member of CCO, what is the location of your primary practice or residence?

Ontario	141
Outside of Ontario, in Canada	0
Outside of Canada	0
Not Applicable	8

I agree/disagree with draft proposed amendments to By-law 16: Professional Liability Insurance:

Response	Number of Responses
Strongly Agree	30
Agree	62
Disagree	27
Strongly Disagree	36
No Response	0



The following amendments to the draft proposed amendments to By-law 16: Professional Liability Insurance would better protect the public interest:

Dear CCO Council, We've both been chiropractic patients for many years and strongly disagree with this new by-law. I don't believe that this is in the interest of the public as it claims to be. CMCC produces incredible chiropractors and is one of the leaders in research for your profession. It's important to have different view points on council especially when it comes to research and progressing your profession. I emplore you to get rid of this amendment and allow academics to be part of council. I would like to know that my Doctor of Chiropractic is compared to the level amongst other health care professionals such as medical doctors, nurses, dentists etc. in which allow academia to be part of council. Thank you. Mr. and Mrs. Buchanan
I don't think you should have to carry evidence of your insurance on you at all times.
Why do we need to raise our liability if we have one of the safest forms of healthcare?
I have been a long time chiropractic patient of Dr Wilson and have great respect for the profession. I have been a chiropractic patient since I was 18 years old (39 years ago!) after a car accident and am a strong advocate. I do not understand why faculty members would not be allowed to run for council. It concerns me that this puts the future of chiropractic in jeopardy. There should be a variety of voices and especially those who are keeping current by being members of the faculty. Chiropractic is already seen by many as not a valid health prevention strategy, we can not afford to make this situation worse and risk potentially then loosing health coverage. I am strongly against this amendment. Michelle Knoll Oakville Ontario Chiropractic Patient
I am strongly opposed to the By-law 6 amendment. CMCC faculty members should absolutely be allowed to serve in elected positions with full voting rights as it is what best serves our public.
I feel the coverage we are already required to have is sufficient and already too expensive in my opinion. A more reasonable amendment would be to stop requiring an OCA/CCA membership to acquire CCPA coverage, as this just feels wrong to me. Other similar professions, such as physiotherapists, have far lower costs to practice than us.
How are you protecting the public by removing SCIENCE based chiropractors from the CCO? You would limit their voice and chiropractic would be WIPED from a regulated health profession from Canada. Find empirical evidence of the subluxation and present it to the CCO.
CCPA covers this amount
Having never had to use my malpractice insurance , it seems like a HUGE jump in coverage which probably carries a large cost, as increases in coverage are not free. Perhaps requiring a range of coverage based on averages used by various number years service practitioners might be considered? For example, if practitioner had been in practice "X" years without incident then a sliding scale of required insurance would be the standard with 5 million being a max for higher risk and the minimum perhaps being the current standard. Seems like a large increase when paying whole shot unlike other professionals who get subsidy working in public health spaces.
The public's interest is best served with the most knowledgable and patient-centered chiropractors being able to hold board positions that will allow them to make sure the patients and the public are at the forefront. Taking this possibility away from CMCC is a total disregard for patient safety and public interest. An evidence based and patient centered curriculum is what is being taught via CMCC and those are what is so very important to the public. There must be a precedent made that Ontario and Chiropractors can be trusted by the public and

taking away the chance for the most knowledgable people to lead the way is ridiculous. CMCC faculty and members should with NO DOUBT be allowed to run for positions on the CCO.
As long as these changes do not lead to an even larger increase in malpractice insurance fees. For non-established chiropractors, the fees are quite heavy as is.
The term protection would include both membership in a protective association and insurance coverage from an underwritten company. *Requiring someone to belong to an association is a Charter violation. You may want to look at that. https://www.justice.gc.ca/eng/csj-sjc/rfc-dlc/ccrf-ccdl/check/art2d.html
This is a professional Liability by-law NOT a protective association by-law. In my opinion, the two are being conflated. This is unacceptable to me. If insurance protection is required what would justify requiring triple the coverage? I have seen nothing to indicate the need. I believe this amendment needs to be rescinded and given more thoughtful consideration. I am thankful that this feedback is being considered but will be thoroughly disappointed if the percentages of agreement and disagreement is not shared with the final decision. My final request is, in the sake of transparency, please publish the percentage/amount of agreement (strong or otherwise) among those who provided feedback that rated their when this is passed or not passed.
Five million dollars is extremely high for the risk that is involved. This is higher than most other professions. Protective rates are are going to skyrocket which will have a negative effect to new and existing doctor's overhead. Although it states protection can come from sources other than the association, this smells like there is certainly some bias in favour of the ccpa. Furthermore, no patient is ever going to be awarded anything close to $5 million. Just as in medicine, the supreme courts has limits set. What board member came up with the notion anyway??? Here is an interesting article. https://www.loc.gov/law/help/medical-malpractice-liability/canada.php
I see the rational behind this is "An increase in professional liability protection requirements is consistent with what is required of members by malpractice insurance providers.", however this is not the case with my provider. A 5x increase for single occurrence from 1-5 million is a huge jump. I doubt 5 million is needed for a single occurrence. I would suggest a recommendation of 2-3million for single and 5 million for aggregate would be more than sufficient.
The rational stated- "an increase in professional liability protection requirements is consistent with what is required of members by malpractice insurance providers" is incorrect. This is not the case by my provider. This can be recommended, but I don't think it should be mandatory. For the public interest, I think it should be increased from 1M to 3M for a single occurrence, with 5M aggregate.

I agree with the proposed amendments. As stated it will help to "Avoid real or perceived conflicts of interest and creates consistency with other chiropractic organizations by having a one year cooling off period after serving as an employee, officer or director of any professional chiropractic organization." I feel that CMCC should definitely be added as an "association" or "organization" to this conflict of interest list.
I disagree as I believe this goes too far. I believe a minimum amount of $3,000,000 per occurrence, and a minimum aggregate amount of $5,000,000 per year would be sufficient.
I think the amount of 5 million proposed is too much. However, I admit I do not have all the information to make a true informed decision on this. I wonder if CCPA has been consulted on this. Are there cases where chiropractors are being sued for this amount or for more than they are currently carrying for malpractice?
Strike out new bylaw 6.36. This is a conflict of interest. 6.9f and 6.29g are in place to prevent any real or perceived conflict of interest. 6.36 is contrary to 6.9f and 6.29g, and making it a separate bylaw compromises the integrity of Bylaw 6.
The current standard is acceptable. Changing it would further make it impossible for people to get the corrective care they need,such as myself. I'm a single mother with 3 children who suffer from chronic back pain and woke up everyday before I started care hardly being able to move. If the changes took place alot of people would not continue to see a chiropractor. Payment options and lowered payment is what makes it possible for me and a majority of patients to see the dr.
I neither agree nor disagree with this amendment. I feel I would need more information as to why this is being addressed. My question is whether or not this has ever even been an issue in practice. Is there evidence that the current policy is not effective in protecting the public? If there are cases where the current policy has not been sufficient to protect the public then I would agree with making the change. If this has not been an actual problem, and the standard has been sufficient to date, then why are we addressing the topic? My concern would be that if the requirement by the college is raised that insurance providers will raise the limits further leading to insurance premiums climbing over the years to come.
I would highly recommend leaving things as they are, many people will continue to enjoy the convenience of paying once a year then just showing up for appointments, (myself included) As for new patients, As long as they are carefully explained all the details of the options available to them they will be easily capable of making a well informed choice on how they wish to work out a payment plan. With the once a year payment option it can be beneficial for the care giver as well as the Patient. The caregiver gets to do one billing which in the end costs them less in office time and materials (and congestion to say the least) and the patient may be offered a discount due to the commitment of a many appointments at once. Cheers!
I think it should be an option to increase liability insurance as if a member is practicing within the by laws and scope as set out by council and doing everything they can to practice with excellence and seeking to provide the best care possible then risk to the public is minimal. Increasing liability insurance requirements only reinforces the false belief that Chiropractic care is unsafe and opens the doors for more lawsuits. Chiropractic care is very safe when applied carefully and with proper examination to minimize risk to a patient.
If changing the requirements for malpractice coverage is warranted based on the statistics then I would agree with the proposed changes.

The proposed amendments would better protect the public interest.
I have no issue with this. This is the amount of insurance I have anyhow and I believe it is important we protect ourselves appropriately.
By allowing real scientific and academics to not only vote but sit on boards to allow the chiropractic profession to continue to move forward. Allowing pseudoscience to continue on the board is irresponsible
I have an issue with the reasoning behind why an increase in Professional Liability Insurance is required. The CCO states the reasoning to be: "An increase in professional liability protection requirements is consistent with what is required of members by malpractice insurance providers." I spoke directly to my insurance provider. They stated that they are NOT the ones requiring members increase their professional liability protection. The requirement is coming from the CCO. I disagree with the draft proposal to By-law 16 based on the fact that the reasoning behind the change does not read to be true. How does this better protect the public interest? At this time, I cannot comment on that as I feel the reasoning the CCO has given behind the change is not forthright.
Is there a need to increase the liability to $5 million from $1 million? What percentage of claims were the result of liability payment of over $1 million. This increase in coverage will only increase the premiums to members
None
I believe that the Amendment is excessive and unnecessary. I am of the understanding that this proposed amendment was not discussed with the insurance carriers that cover the majority of Chiropractors in this province. I feel that it should be an option of a standing member of. Chiropractic in this province to choose the option outlined in this amendment. It should not be enforced as I believe that it opens up the profession for the greater opportunity of lawsuits. I am also uncertain as to how this better protects the public's best interest in this matter.
I believe that members with a position at CMCC or UQTR should be able to run for council for the CCO.
To propose that academic leaders from our two chiropractic educational institutions be excluded from running for CCO positions is shameful. This is anti-intellectual behaviour which must be prevented from becoming policy within the organization charged with protecting the public. To exclude those who are creating the knowledge used in evidence-based practice is inconsistent with the patient-centred model of care demanded by all sectors of health care.
Absolutely agree.
Why is this increase being made? Has there been a huge increase in big payouts that the membership has not been made aware of?
Why are we letting the providers tell us what we need in coverage, just so they make more?
Current coverage at $3,000,000/$5,000,000 is likely more than sufficient, however I would not be strongly opposed to an increase in coverage if deemed necessary.
The professional liability insurance referred to in By-law 16.1 must have: (a) a minimum amount of $2,000,000 per occurrence, and (b) a minimum aggregate amount of $4,000,000 per year.
It is unfortunate that the numbers rise but it will be better for those who are unfortunately in need if injured

5M per occurrence is unnecessary in Ontario as the court system does not allow this maximum in decisions. Please ask insurance companies and other professional regulatory boards of this fact.
It would seem appropriate for professionals to carry appropriate for licensed health care professionals to carry coverage that is appropriate to cover any potential injury or loss.
This is a new piece of information to me - I'm not sure if I agree, or am neutral about this - I'd follow the requirement for higher $$ coverage. As for showing proper proof of coverage - this is a larger peace of mind FOR the public, through the CCO, that members are covered, and invested.
Simply changing the minimal amount of Liability required by a member within the profession does nothing to protect the public. Historically having a minimum of 3 million liability would cover any past cases. Simply raising the minimum only serves to create greed and unsubstantiated cases to be filed.
The proposed change in professional liability protection insurance referred to in By-law 16.1 of a minimum amount of $5,000,000 per occurrence, and a minimum aggregate amount of $5,000,000 per year is reasonable.
I am indifferent on this matter.
This is not something that should be regulated. In fact, I would guess that is against the law to mandate something like this.
No brainer the public needs to be adequately protected.
this one is a no brainer The public needs to be adequately protected .
I was unaware that the current minimums were suspected of being deficient. I am in favour of making sure our professional liability is sufficient to protect our patients, but did not know that current minimums were not already meeting these needs. What evidence is there that current minimums could be inadequate? There is no option for choosing "no opinion" in the choices of #5 above, or I would have chosen that.
I do believe there should only be one seat for a CMCC Prof or staff to represent the school at the CCO meetings.
I feel that 5 million per event is high and will probably cause our rates to rise excessively
I am currently renewing my professional liability policy through Walter Roberts Insurance Broker. What I am offered is 3,000,000/5,000,000 coverage for the next year. I am not convinced that increasing the coverage to 5,000,000 will actually serve the public so I disagree with this amendement.
Based on the descriptions provided I am unclear as to why the coverage amount needs to increase to 5 000 000.
a minimum amount of $3,000,000 per occurrence, and (b) a minimum aggregate amount of $3,000,000 per year.
How does carrying more liability insurance protect the public. This seems like a money grab, are there that many claims against chiropractors that 1 million liability is not covering costs? How are members and the public going to be affected by this?

Neither will benefit; as in the public will never see a change or know of one and practice members will have again more costs.
I feel that the original amounts of liability coverage are adequate. I believe that 5M of coverage only serves to attract the attention of the litigation community and makes it more palatable to pursue any level of suet action whether warranted or not. You will see a rise in litigation if you pass this by-law. My levels of coverage are not with the CCPA and are, I feel, adequate at 3M and 5M.
Increasing liability DOES NOT protect the public, and only hurts the newly graduated or struggling chiropractor trying to keep their overhead down. How does 5mill liability protect the public? The only scenario I see is: 1. Make DC's pay more for their insurance to weed out those who can't afford to pay the higher premiums. 2. Give the public more reason to sue and for higher awards. I for one have been in practice for over 20 years with no legal action against me. I work part time and keep my overhead to a minimum. I plan on staying in practice for maybe another 5-10 years.
I don't understand how requiring members to have higher malpractice coverage is in the public interest. In my opinion, should there be legal action it only encourages those suing to seek a higher reward.
Seems to be a rather substantive hike, leading to more likeliness in having frivolous claims brought to court which will make for expenses and court time being wasted for the general public.
na
Not sure why the need for increase in liability insurance. Would like to see the rationale besides just wanting to increase it.
5,000,000 is too much given the inherent risk of chiropractic care. Why does the amount have to be so high? This means our premiums will go up. For what? No one has died as a result of chiropractic care. Is the care we are providing more riskier now or is this increase seems to be more because of complaints from other members or people like Ryan Armstrong that could lead to lawsuits. liability insurance should be kept at 2,000,000/4,000,000. This is unfair!
I fail to see the need for this.
A 400% increase in the amount of insurance per occurrence seems unwarranted and unreasonable. I have spoken to my insurance broker. They were not informed of the proposed change. Should they not be considered a stakeholder? A 400% increase will lead to a very significant increase in insurance premiums. This cost will ultimately be passed onto the patient. This is not in the public interest. I propose that a 100% increase per occurrence and a 33% increase aggregate is reasonable. When would this amendment take effect? A proposed date of change needs to be in the draft so that Chiropractors and insurance companies can have time to deal with this change. The following would better protect the public interest: The professional liability protection insurance referred to in By-law 16.1 must have: (a) a minimum amount of $2,000,000 per occurrence, and (b) a minimum aggregate amount of $4,000,000 per year.
I feel that the amount should reflect 2M per year and 4M aggregate.

I'm not clear on what you're proposing, when you state "carry" in addition to provide evidence of protection, what do you mean? Is that a technical insurance term, and if so, how is it different from what we currently have through ccpa?
Is this appropriate given the actuarials of both the current protective association and other malpractice insurance providers. What are the claims history and evidence that would support this as a new minimum standard?
I would be interested to know if council has done the math on the extra cost to members. This is a 500% jump in the occurrence coverage. If it carries a 500% premium jump I would be opposed. If the increase in premiums is small then it is a good solution.
I think $5,000,000 is excessive. I agree that every member should have professional liability insurance. Why was $5,000,000 decided upon?
A higher required liability will certainly draw the eyes of litigators, searching for the deepest possible pockets. This change puts a bigger bulls-eye on the profession in general and will generate many "Hail Mary" lawsuits. The minimum amount should be something to be determined by an individual practitioner based on the individual's personal financial situation and understanding of legal liability matters. In some cases, $1 and $3 million could be more than adequate. I request that the reasoning behind this proposed change be distributed and that possibly further consideration be applied.
If we are expected to have such an increase in Liability Insurance, there would need to be a reason to do so. Therefore, I ask for proof of reasoning behind such change. Of Course Malpractice providers are going to suggest such an increase...but why? And when I ask Why, I mean specifically why? How many cases per year justify this need and second what was the nature of the case(s)? Until then, I ask what is the point of changing it?
If there were an option in question 4 to answer "undecided" or "unsure", that's what I would have answered. I can understand that from a protection point of view, I would feel more comfortable having more coverage for myself, but am unclear about the message this sends to the public. Is this just a sign of the current climate of health care, that lawsuits are increasing or just that it is expected that when a lawsuit is appropriate, more money is appropriate?