

Tort Reform and Physician Moral Hazard

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Research Question

• States have been enacting tort reforms that reduce the liability of physicians who conduct malpractice

- Whether **physicians** exhibit **moral hazard** after tort reform?
 - Moral hazard: Physicians become more careless due to reduced financial liability
 - Use a regression-based actuarial model to predict incurred losses



Motivations

- Individual-level data are hard to obtain
- Insurance data are an aggregate of the individual-level data and may serve as a representative
- Medical malpractice insurers are the primary payer of medical malpractice claims
 - They have the *data* and *ability* to predict the behavioral changes of physicians and patients
 - Explore research question through the lens of medical malpractice insurers



Background of Tort Reform

- States have been *enacting* and *repealing* tort reforms
 - Most occurred before 2005, but there were still some after 2005
 - Study 5 types of tort reforms
 - Caps on noneconomic damages
 - Caps on punitive damages
 - Reforms to punitive damage evidence rules
 - Reforms to the collateral source rules
 - Reforms to the joint and several liability rules



Hypothesis

- Physicians exhibit moral hazard after tort reform
 - Physicians bear fewer costs of malpractice risk
 - Take fewer precautions and/or become more careless due to reduced liability
 - This can cause more malpractice claims and adversely affect patients' benefits
 - Patients must bear more costs of medical malpractice risk
 - Have to take more precautions, e.g., spend more time searching for a reliable physician or communicate more carefully with their doctor to decide an appropriate treatment
 - Once file a claim, the expected payment is reduced



Three-Factor Model



- Positive Net LR Revisions
- Decompose the effects of three factors (undone)



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Positive Net LR Revision



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Data

- Firm-level data
 - NAIC Property-Casualty Annual Statements, 1993-2015
- State-level data
 - Tort reform data
 - Database of State Tort Law Reforms (2012, DSTLR 5th)
 - + 2017 American Tort Reform Association (ATRA) Tort Reform Record
 - State control variables: various sources
- Screening
 - Drop DPW <= 0, trim outliers at the 1% and 99% levels</p>



Incurred Losses Prediction Method

- What are the loss reserves in absence of tort reform?
 - Predict future reserves using <u>past information</u> and <u>actuarial model</u>

- Idea of FIRR method (Grace and Leverty, 2017)
 - Full Information Reserve Revision (FIRR) = Reported Reserves (t) Predicted Reserves (t)
 - Predicted Reserves (t) are made using data of year t-1 and a forwardlooking, regression-based model
 - <u>Around treatment year</u>: FIRR is reserve revision after tort reform

Grace, Martin F. and Leverty, J. Tyler. (2017). External Monitor Quality and Managerial Discretion. Working paper, University of Wisconsin-Madison, WA.

FIRR Method

• Regression (on year t-1 data)

$$Log(IncurredLosses)_{mn} = \alpha + \sum_{m=2}^{10} \lambda_m Row_m + \sum_{n=2}^{10} \delta_n Col_n + \varepsilon_{mn}$$

• Prediction (using year t data)

*IncurredLosses*_t = $e^{\alpha + \lambda_m + \delta_{12-n}}$

• Full Information Reserve Revision (FIRR)

$$FIRR_{t} = ReportedIncurredLosses_{t} - IncurredLosses_{t}$$
$$= \sum_{m=2}^{10} (ReportedIncurredLosses_{mt} - IncurredLosses_{mt})$$

Example of FIRR

 $Log(IncurredLosses)_{mn} = \alpha + \sum_{n=1}^{10} \lambda_m Row_m + \sum_{n=1}^{10} \delta_n Col_n + \varepsilon_{mn}$ m=2n=2

Medical Professional Mutual Insurance Company (NAIC Code = 10206)

Panel A: Reporting Year 1994

		coll	col2	coB	col4	coB	col6	col7	co18	col9	col10
		Development Year									
	Accident Year	1	2	3	4	5	6	7	8	9	10
row1	1985	222135	197291	178868	155055	148120	135776	124453	116916	104418	101709
row2	1986	212791	213042	168307	156990	134873	115985	105829	95486	91773	$\alpha + \lambda_2 + \delta_{10}$
row3	1987	271404	172330	177027	146324	120119	111173	94104	89484	$\alpha + \lambda_3 + \delta_9$	
row4	1988	183638	168941	154539	130901	122902	109151	101216	$\alpha + \lambda_4 + \delta_8$		
row5	1989	196963	180051	153666	141629	121042	112140	$\alpha + \lambda_5 + \delta_7$			
row6	1990	196639	169779	153772	135711	120996	$\alpha + \lambda_6 + \delta_6$				
row7	1991	173433	167964	160731	142990	$\alpha + \lambda_7 + \delta_5$					
row8	1992	190764	186226	147255	$\alpha + \lambda_8 + \delta_4$						
row9	1993	194654	153910	$\alpha + \lambda_9 + \delta_3$							
row10	1994	163462	$\alpha + \lambda_{10} + \delta_2$								

Panel B: Reporting Year 1995

	Development Year									
Accident Year	1	2	3	4	5	6	7	8	9	10
1986	212791	213042	168307	156990	134873	115985	105829	95486	91773	84937
1987	271404	172330	177027	146324	120119	111173	94104	89484	76401	
1988	183638	168941	154539	130901	122902	109151	101216	90953		34728
1989	196963	180051	153666	141629	121042	112140	99575		49354	50209
1990	196639	169779	153772	135711	120996	102761		48553	27047	
1991	173433	167964	160731	142990	124264		68616	42400		
1992	190764	186226	147255	136364		83389	30959			
1993	194654	153910	150357		96151	19372				
1994	163462	162036		116930	28113					
1995	169988		135902	19434						
		153638	14455							
		8398								

Panel C: Summary

incurred losses reported =	1027648 (1995 data)
incurred losses predicted =	787260 (1994 data)
FIRR =	240388 1995 FIRR

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Allocate FIRR to State Level

- Pure sample
 - Medical malpractice insurers operating in only one state
 - 283 firms and 1,224 firm-year-state observations
 - 18% incurred losses and 17% direct premiums of full sample
 - Biased toward small mutual insurers and RRGs
- Full sample
 - All insurers, 497 firms and 50,580 firm-year-state observations
 - Allocate *FIRR* to state level using the proportion of premiums for each state
 - + $FIRRst = FIRR * \% DPW_s$



• Two-way fixed effects DiD regression

$$FIRR(st)_{ist} = \sum_{j=1}^{5} \beta_j Reform_{j,st} + \alpha_t + \delta_s + \gamma_i + \lambda \mathbf{X}_{it} + \mathbf{\eta} \mathbf{Z}_{st} + \varepsilon_{ist}$$

- FIRR(st) is FIRR for the single-state sample or FIRRst for the full sample, both scaled by the average total admitted assets
- *Reform* is a dummy for each of five types of tort forms
- Physician moral hazard prevails if $\beta_j > 0$
 - Firm-level control variables X: managerial incentives for reserve management, firm size, group dummy, org form
 - State-level control variables Z: GSP per capita, personal healthcare expenditures, # of EEs of insurance carriers/hospitals, # of lawyers, average ratio of Republican in lower & upper house



Result of DiD Model

	Sir	ngle-State San	nple	Full Sample			
Dependent Var =	FIRR_occ	FIRR_clm	FIRR_total	FIRRst_occ	FIRRst_clm	FIRRst_total	
Tort Reform Variables	<i></i>						
Caps on Noneconomic Damages	-0.007	0.002	-0.012	-0.000	-0.002***	-0.002***	
	(0.013)	(0.014)	(0.017)	(0.000)	(0.000)	(0.000)	
Caps on Punitive Damages	0.005	-0.011	-0.022	0.000	0.001***	0.001**	
	(0.011)	(0.029)	(0.017)	(0.000)	(0.000)	(0.000)	
Punitive Damage Evidence	-0.020	0.074**	0.046*	-0.000	-0.001	-0.001	
	(0.028)	(0.032)	(0.023)	(0.000)	(0.001)	(0.001)	
Collateral Source Rules	-0.067	0.043	-0.024	-0.001	-0.000	-0.001	
	(0.054)	(0.033)	(0.032)	(0.001)	(0.001)	(0.002)	
Joint and Several Liability	0.005	0.019	0.016	0.000	0.003***	0.002**	
	(0.009)	(0.015)	(0.017)	(0.000)	(0.001)	(0.001)	
Observations	809	1,068	1,224	38,287	45,317	50,544	
Overall R-squared	0.649	0.574	0.576	0.434	0.282	0.322	
Fixed Effects	Firm, State,	Firm, State,	Firm, State,	Firm, State,	Firm, State,	Firm, State,	
	Year	Year	Year	Year	Year	Year	

Note: The table reports robust standard errors clustered by states in parentheses.

- ► Magnitude: 4.6% = \$32.8 million, 0.1% = \$2.8 million
- Why these reforms?
 - Punitive damages may unpredictably lead to a catastrophic jury verdict against the physicians.
 - + Joint and several liability rules may also cause a significant liability

Decomposition of LR Revision (future work)

• Partial derivatives

$$\begin{split} \Delta X &= \Delta F_D * F_{P0} * S_0 &+ \Delta F_P * F_{D0} * S_0 &+ \Delta S * F_{D0} * F_{P0} \\ &= (F_{D1} - F_{D0}) * F_{P0} * S_0 + (F_{P1} - F_{P0}) * F_{D0} * S_0 + (S_1 - S_0) * F_{D0} * F_{P0} \end{split}$$

- NPDB data
 - Medical malpractice payment records, 1993 to 2014
 - Patient (yearly average count) $\rightarrow F_{P1}, F_{P0}$
 - Severity (yearly average payment) $\rightarrow S_1, S_0$
 - Adverse action records, 1997 to 2018
 - Physician (yearly average count) $\rightarrow F_{D1}$, F_{D0}



Conclusion & Contribution

- This paper investigates the prevalence of physician moral hazard after tort reform using medical malpractice insurers' reserve data.
- I find that physician moral hazard significantly exists after reforms to punitive damages and to joint and several liability rules.
- Contribution:
 - Provide the first empirical evidence of physician moral hazard due to tort reform
 - Add new evidence regarding the downside of tort reform





All comments are appreciated!

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THANK YOU VERY MUCH!

