

The Oregon Liability Reform Coalition strongly opposes extending Oregon's current fiveyear statute of ultimate repose for medical malpractice cases. Given its extensive implications, any expansion of civil liability must be approached with extreme caution.

Medical malpractice insurance is already exceedingly costly, and premiums continue to escalate for healthcare providers in Oregon. Doubling the period of potential liability from five to ten years would significantly increase expenses and uncertainty for medical professionals.

A critical concern with this proposed legislation is its retroactive application. Specifically, this 2025 Act would apply to claims arising before, on, or after its effective date. This retroactivity effectively introduces an additional five-year "look-back" period for which medical providers have neither prepared nor budgeted. Such uncertainty is particularly problematic for retired healthcare providers whose existing "tail insurance" coverage may be inadequate to handle claims arising from this newly expanded period.

Medical malpractice claims are inherently complex, requiring extensive investigation and often involving nuanced determinations of fault and appropriate compensation. Extending the period in which claims can be filed compounds these difficulties. With the passage of time, memories naturally become less reliable, crucial evidence may be lost or deteriorate. Additionally, as patients age, unrelated health conditions may arise, complicating the task of clearly establishing a direct link between provider actions and medical outcomes. These factors collectively make it increasingly challenging to accurately evaluate the validity and fairness of malpractice claims over extended periods.

Oregon must proceed with caution before imposing further liability on our essential healthcare providers. We respectfully ask the legislature to balance safeguarding patients and protecting healthcare professionals. Extending the statute of ultimate repose risks destabilizing Oregon's healthcare system, potentially compromising access and affordability of care statewide.

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