

**2025 HB 1349**  
**House Judiciary Committee**  
**Representative Klemin, Chairman**  
**February 3, 2025**

Chairman Klemin and members of the House Judiciary Committee, I am Joel Larson, General Counsel of the Altru Health System in Grand Forks, ND. I am here to testify in opposition to House Bill 1349. I ask that you give this bill a **Do Not Pass** recommendation.

We ask for a **Do Not Pass** for a number of reasons. The bill is anti-healthcare and anti-workforce and would generally lead to an absurd result that is unlike what is expected in North Dakota. This testimony will address these topics, but first I'll off some information on what non-economic damages are if not already covered by prior testimony, along with brief testimony against a portion of the proposed deleted text.

Non-economic damages are generally things that don't come with a price tag, such as: pain, suffering, inconvenience, emotional distress, fear, loss of society and companionship, loss of consortium, and humiliation. While these feelings are real and people are appropriate to ask for a reasonable amount of compensation, to increase limits in the way HB 1349 is attempting would not be reasonable. Many states, including all states around North Dakota (except Minnesota), have reasonable non-economic caps. The caps range from \$250,000 to a little less than \$1 million. No state currently has a non-economic cap higher than \$1 million, let alone \$3 million.

Additionally, in the deleted portion of NDCC 32-42-02 subd. 1 in HB 1349, it strikes the following underlined language...may not exceed "five hundred thousand dollars, regardless of the number of healthcare providers and other defendants against whom the action or claim is brought or the number of actions or claims brought with respect to the injury". Historically, if an injury occurred a plaintiff can recover their respective economic damages (loss of income, loss of earning ability, ongoing care, etc) as well as a total of \$500,000 for the claim, even if the plaintiff sued the hospital, doctor A, doctor B, resident C, and whomever else was named in the suit. Applying this same scenario to HB 1349, the plaintiff would then attempt to recover the "cap", whether \$1 million or \$3 million, against hospital, doctor A, doctor B, resident C, and whomever else, attempting to recover 5-6 times the cap. This is an absurd outcome and would be very unfavorable to North Dakota's hospitals, and would benefit so few individuals it should not even be considered.

Anti-Healthcare: Raising medical malpractice limits **will** raise insurance premiums. Instead of money being used to improve programing for patients or to increase access to care, the money would go to insurance premiums and/or to a small number of plaintiffs and their lawyers (many of whom are not residents of North Dakota). This does not improve care, access to care, or healthcare outcomes, it just makes it more expensive.

Anti-Workforce: As General Counsel to Altru, I have the pleasure of spending 15-30 minutes with every new physician that joins us. A large number of the physicians that join Altru from out-of-state have said they have come to North Dakota in part because they hear from colleagues that it is a good place to practice medicine without fear of unwarranted lawsuits. Having a reasonable cap on non-economic damages is good for North Dakota's healthcare workforce. It reduces the number of non-meritorious cases, thus reducing the stress to providers. To increase the caps as proposed in HB 1349 would hurt North Dakota's healthcare recruitment, and would therefore hurt North Dakotans.

For these reasons, on behalf of Altru Health System, I ask that you give HB 1349 a **Do Not Pass** recommendation.

I would be happy to respond to any questions you may have. Thank you.

Respectfully Submitted,

Joel Larson  
General Counsel, Altru Health System