Testimony of
The Connecticut Society of Eye Physicians
and the American Academy of Ophthalmology
Given by Andrew J. Packer, M.D.
Before the Judiciary Committee
On March 7, 2012
OPPOSING

S.B. No. 243 AN ACT CONCERNING CERTIFICATE OF MERIT.

Good Afternoon Senator Coleman, Representative Fox and distinguished members of the Judiciary Committee. My name is Andrew J. Packer and I am a practicing Retina Specialist in Hartford. I am here as a representative of the Connecticut Society of Eye Physicians, representing over 300 CT ophthalmologists, and the American Academy of Ophthalmology, representing over 29,000 ophthalmologists in opposition to SB 243 An Act Concerning Certificates of Merit.

I felt compelled to testify before you today because I feel strongly that if the law were to change allowing a non-similar provider to serve as an "expert" for the examination of whether or not a case had merit, I would be forced to re-examine how I practice medicine and which if any difficult cases I would take on, knowing that my exposure to frivolous lawsuits would increase. There is no question that if the standard is lowered it would greatly affect the way I, and my partners, see and serve patients.

For the record, I have been practicing ophthalmology for 30 years, I have been in Connecticut operating and practicing as a retina surgeon specialist for 23 years and fortunately in all these years, I have never had a judgment or settlement for medical liability against me. I strongly believe that any attempts there may have been were appropriately reviewed by a qualified retina specialist who understood the maloccurrence outcomes that are within the standard of care for many of the complex cases I handle. I also believe that if the law were to change to lessen the standards for a qualified expert, I would not be as motivated or likely to tackle some of these more difficult cases, because of the inherent risk of a higher rate of mal-occurrence and the inevitable undesirable outcomes associated with some of the more difficult trauma and chronic disease cases. No one likes poor outcomes but unfortunately it is part of the ball game when one practices tertiary care medicine.

In closing, I felt it was my professional duty to my patients and my colleagues and my civil responsibility to the citizens of Connecticut to testify and shed some light on some of the unintended consequences this bill will create if passed. I am convinced that it is in no one's best interest to further stress the health care delivery system and prevent those who are the needlest from receiving the care they deserve, which is exactly what can happen if this bill is allowed to go forward.

I thank you for your consideration and will answer any questions this committee may have.