To California Consumers, Personal Injury Patients, and Their Families:

This letter is for the person who matters most in this entire debate … **You.**

Not Uber. Not the attorneys. Not the doctors. Not the insurance companies. Not the medical funding companies. Not the politicians. … **You.**

The injured California citizen-consumer-client-patient.

If you have never been seriously injured in an accident, much of the debate surrounding California's SB 623 probably sounds distant and complicated.

Medical liens. FAIR Health. Medical funding. Attorney fees. Referral disclosures. Evidence at trial. Tort reform.

Those terms may mean very little to you.

But what they ultimately affect could mean everything: **If you or someone you love is seriously injured through no fault of your own, will you be able to obtain quality medical care when you need it, even if you cannot afford to pay for that care today?**

That is why you should care about what happens next with SB 623.

Imagine It Is You

You are driving home from work.

Someone runs a red light. Or you are riding in an Uber when another vehicle crashes into you. One moment everything is normal. The next, it isn't.

Your neck hurts. Your back hurts. You have headaches. Maybe you cannot sleep. Maybe you are dizzy. Maybe your memory feels different. Maybe your shoulder or knee was injured.

Maybe you cannot work. Maybe you are frightened. Maybe you can’t play with your kids or spend quality time with anyone for a long time. Maybe the crash caused anxiety every time you get back into a car.

Or perhaps your injuries are much more serious and you need injections, neurological treatment, psychological care, or even surgery.

You didn't plan for any of this.

Nobody does.

And now you need healthcare.

Having Health Insurance Does Not Always Mean Having Access to the Care You Need

This is one of the realities many consumers don't understand until they are injured.

You may have health insurance and still encounter problems.

Your deductible may be enormous. The specialist you need may be out of network. Appointments may take too long. Your plan may limit your choices. A physician may not want to become involved in a personal injury case. A specialist may not want the additional documentation, deposition, or litigation responsibilities that can accompany PI treatment.

And you may simply not have the money to pay thousands, or tens of thousands, of dollars today to pay for medical care for a car crash case that wasn't your fault.

That is where lien-based personal injury healthcare can become extraordinarily important.

A provider may effectively say: **"You need care now. I will treat you now, and I will wait to be paid."**

Think about the value of that.

The provider pays employees today. Pays rent today. Pays malpractice insurance today. Pays for equipment and supplies today.

Provides your care today.

But may wait a year, two years, or even longer to be paid.

And if your claim fails? The provider may face the risk of not being paid at all.

That is healthcare being financed for you when you need it.

Why Should You Care About What a Doctor Gets Paid?

Because if doctors and other providers cannot reasonably operate under that model, they have a very simple option: **Stop accepting rideshare and maybe all PI patients.**

That is the part of this debate I believe consumers need to understand.

Government does not have to prohibit your care for your access to disappear. It merely has to make providing that care sufficiently risky or economically unattractive that qualified providers say: **"No."**

No Uber cases. No rideshare cases. And if similar restrictions eventually spread: **No personal injury cases.**

The doctor's business problem is solved. Your healthcare problem isn't.

Reasonable Medical Bills Matter, But So Does Reasonable Compensation

I am not asking consumers to support whatever a medical provider wants to charge. You shouldn't.

Medical providers should bill reasonably. They should provide only medically necessary care. They should never recommend treatment simply to increase the value of a lawsuit. Surgeons should never recommend or perform an unnecessary surgery. Chiropractors and physical therapists should not continue care simply because a legal case remains open. Physicians should document honestly.

Bad providers should be held accountable. **Absolutely.**

But there is another side to fairness.

A quality provider who delivers medically necessary care, assumes substantial financial risk, waits years for payment, and operates a California medical practice should also be entitled to reasonable compensation.

That is how good providers remain willing to say: **“Yes, I will treat you on lien.”**

SB 623 Tries to Address Real Problems

There are legitimate problems in personal injury.

There can be excessive medical billing. There can be unnecessary treatment. There can be questionable referral relationships. There can be excessive medical-funding profits. There can be attorneys charging excessive fees or costs. There can be insurers failing to fairly value legitimate claims. There can be enormous jury verdicts that defendants believe bear insufficient relationship to the underlying injury.

Those issues deserve attention.

But good reform should distinguish between: **The bad actor** … and … **the good actor.**

It should target the abuse without destroying the legitimate service.

That is why I am advocating what I call the **Surgical Strike.**

What Is the Surgical Strike?

The concept is simple: **Don't repeal SB 623. Repair the portions that sweep too broadly.**

Keep legitimate protections. Keep transparency. Keep accountability. Keep reasonable tort reform.

But make several targeted corrections that protect patient access.

First: Control What a Jury Sees Without Unnecessarily Controlling Your Medical Relationship

If policymakers believe unusually high medical bills are being shown to juries to produce excessive awards, California can establish reasonable rules about what evidence the jury considers.

That addresses **the courtroom problem.**

But what the jury is allowed to consider and what a provider may reasonably charge while waiting years for payment are not necessarily the same thing.

Separate the two.

Protect the integrity of the trial without unnecessarily disrupting the economics that allowed you to obtain care in the first place.

Second: Make the Person Who Makes a Referral Accountable for It

Transparency is good.

If a law firm refers you to a particular provider, disclose it. If someone is receiving an improper financial benefit, expose it.

But put the primary obligation on the person who actually knows what happened.

If the law firm made the referral, **the law firm should own that disclosure.**

Don't unnecessarily shift legal risk to your doctor for facts the doctor may not know.

Third: Preserve Responsible Medical Funding

Imagine your doctor says you need surgery. It costs $100,000. You don't have the money.

Your insurance cannot get you timely access to the right surgeon.

And the surgeon understandably says: **"I cannot personally finance $100,000 of your healthcare for the next three years."**

What happens?

A responsible medical funding company may be able to provide the financial bridge that allows your surgery to happen.

That company assumes risk and should be entitled to a reasonable profit for doing so.

But reasonable is the key word.

Allow reasonable profits. Attack unreasonable profiteering.

Require transparency. Stop abuses. But don't allow the destruction of a financing mechanism that may be the very reason you or someone you know and care about can receive necessary care.

You Also Need Your Attorney to Put You First

Consumers should demand accountability from the legal profession too.

Your personal injury attorney can perform an extraordinarily valuable service.

A great attorney protects you. Explains the system. Deals with insurance companies. Develops evidence. Advances legitimate costs. Takes financial risk. And fights to obtain a fair recovery.

Great PI attorneys deserve to be fairly compensated.

But you should understand your agreement.

Know the contingency percentage and what is “reasonable” and what is overreaching, and whenever you see an attorney charging 45% to 60%, challenge it, especially if it increases merely because time has passed or merely because they filed a form complaint.

Know what costs are being deducted and ask “why.” Just because the retainer agreement says they can charge for it, you can ask “why?” Get all costs that involve time removed, such as admin fees, file set up fees, and the like. The law firm is on a contingency fee for its time already.

And research the reasonableness of attorney retainer agreements and their provisions online.

Ask how MedPay is being handled. Ask whether your attorney is taking a fee from money intended to pay medical expenses, as if they do, legally you are responsible now for the difference. Demand your attorney not intercept MedPay and any MedPay issued on a providers, direct the attorney to send it right to the medical provider upon whose bill it was issued. Your bill gets reduced, and you get the benefit of every dollar of that auto-policy benefit.

Ask how medical providers will be treated when your case resolves. Those same medical providers who healed you, or relieved pain, or both. Those same medical providers whose treatment, documentation and bills were used by your attorney and you to get that settlement or jury verdict. They earned it, and then had to wait maybe years and incur a lot of extra costs you do not see on top of it.

Ask how much you will ultimately receive. Your attorney should have been reminding you at the time of any settlement that you remain responsible for the medical bills. Those aren’t on contingency. Did they tell you that or are they merely presenting you with a settlement offer the “net to client”? And if that was based upon medical bill reductions, did they even ask for those yet or making you believe they did to get you to approve a settlement so they can no longer have to spend time on your case?

You should not be embarrassed to ask any question of any professional.

It is your case. It is your healthcare. It is your recovery. It is your money.

Your Medical Providers Should Put You First Too

Ask questions there as well.

Why is this treatment medically necessary? What is the objective? How long is treatment expected to last? Why am I being referred to this specialist? What are the alternatives? What does the procedure cost? What happens to the bill if my case doesn't succeed? If funding is involved, what does that mean?

A good provider should welcome reasonable questions.

Your healthcare should be driven by what helps you heal, not by what makes a lawsuit larger.

Personal Injury Should Not Become a Feeding Frenzy Around Your Settlement

There is something fundamentally wrong when everyone begins viewing your recovery as a pie.

The attorney wants a piece. The provider wants a piece. The funding company wants a piece. The insurer wants to pay as little as possible.

Everyone argues over the percentages.

And the injured person who lived through the pain is left asking: **“What about me?”**

That is backwards.

The objective should be: **How do we ensure access to quality care and how do we help the patient medically recover as much as possible, obtain a fair legal recovery, and reasonably compensate the people and businesses that legitimately helped make those outcomes possible?**

You should be the center of the ecosystem. Not the money.

There Is a Bigger Reason You Need to Pay Attention Now

SB 623 currently applies within a limited rideshare context.

So you may think: **“I don't use Uber very often. Why should I care?”**

Because today's rideshare rules could become tomorrow's broader PI rules.

Once one category of defendant receives particular protections, others may understandably ask: **Why not us?**

Other transportation companies. Delivery companies. Commercial fleets. Municipalities. Insurers. Other corporate defendants.

And eventually California may confront a simple question: **Why should two people with identical injuries be treated differently simply because one was injured in a rideshare vehicle and the other wasn't?**

I fear the answer could eventually be: **Apply the more restrictive system to everyone.**

If that happens, this stops being about Uber. It becomes about you every time you or someone you care about get into a car.

Don't Wait Until You Or Some You Care For Are the Injured Person

Most people don't study personal injury law until they become part of it.

That is understandable.

But public policy is often created while the people who will eventually be affected are paying attention to something else.

Businesses have lobbyists. Attorneys have lobbyists. Insurers have lobbyists. Healthcare associations have lobbyists.

Patients usually don't.

Your voice is different.

A legislator can dismiss an argument about provider reimbursement as a business dispute.

It is harder to dismiss a constituent who says: **“If I or someone I care about is injured, I want access to a qualified doctor the moment its needed. I don't want California creating a system where good doctors stop treating people like me, my family and those I care about.”**

That is the message policymakers need to hear.

What I Am Asking California Consumers to Do

Learn enough about SB 623 to understand what is at stake.

Ask your elected representatives whether they support protecting patient access while addressing legitimate PI abuses.

Tell them you support reasonable tort reform. Tell them you support reasonable medical bills. Tell them you support reasonable attorney fees. Tell them you support reasonable medical-funding profits. Tell them you support transparency.

Tell them you support punishing bad actors.

But also tell them: **Don't solve those problems by making it harder for injured Californians to obtain quality medically necessary care when they need it.**

And ask them to support a Surgical Repair of SB 623 before any effort is made to expand its framework to all personal injury.

Consumers Should Demand Better From All of Us

This isn't just about asking Sacramento for something.

Demand better from the entire PI ecosystem.

From doctors: Treat me because I need it, not because my case can pay for it.

From attorneys: Fight for me, not merely your fee.

From funding companies: Help me obtain care, but don't exploit my situation.

From insurers: Investigate legitimate claims, but when the evidence supports them, pay out fairly and timely.

From transportation companies: Fight fraud and abuse, but don't make legitimate injured consumers collateral damage.

From legislators and the Governor: Fix bad conduct without destroying access to quality care.

And from all of us who work within personal injury: Remember who this system exists to serve.

That Person Is You

I have spent years working with medical providers and physicians in personal injury. I believe deeply in the role quality independent providers play in this system.

But the ultimate objective isn't protecting doctors. It isn't protecting lawyers. It isn't protecting funding companies.

It is protecting a system that allows an injured human being to get appropriate care and fair compensation.

Sometimes reform is necessary to protect that system.

SB 623 addressed legitimate concerns.

Now I believe portions of it need refinement. Not destruction.

Surgery.

Keep what works. Fix what went too far. Stop the abuses. Protect the good actors.

And before California ever considers expanding this framework beyond rideshare, make sure we understand what it will do to the people who matter most.

The citizens-consumers-clients-patients of California. Californians.

You. Your spouse. Your children. Your parents. Your friends.

Any one of us can become a personal injury patient in a fraction of a second.

And if that day ever comes, you should be able to find a quality healthcare provider willing to say: **“Yes. I will help you.”**

That is worth protecting.

Reform the Abuse. Preserve the Value. Protect the Citizen-Patient.

And pursue the outcomes every stakeholder should want:

Better Patient Outcomes.
Better Provider Outcomes.
Better Case Outcomes.
Better Claim Outcomes.

Respectfully,

Michael Coates, Esq.
President, Personal Injury Made Easy

PS: You do not need to become an expert in personal injury law to have a voice in this debate. **Ask one simple question of anyone advocating for reform: "After your proposal becomes law, will an injured Californian have more, or fewer, quality healthcare providers willing to treat them when they need care?"** If the answer is fewer, we should ask whether there is a better way.