Personal Injury Made Easy
Making Business Easier™

To Uber, Rideshare Companies, Transportation Companies, and the Broader Transportation Industry:

Let me begin somewhere you may not expect.

I understand why you wanted tort reform.

Nuclear verdicts are real concerns. Unreasonable medical billing is a legitimate concern. Unnecessary medical treatment is wrong. Artificially inflating damages is wrong. Questionable referral arrangements deserve scrutiny. Excessive medical funding profits deserve scrutiny. Fraud by anyone should be attacked in all its forms.

And no transportation company should be forced to accept a personal injury ecosystem where bad actors can manipulate medical care or medical charges simply to manufacture a larger lawsuit.

On those principles, **we should agree.**

But good tort reform should not merely reduce liability.

It should reduce abuse.

And those are not always the same thing.

Because when reform intended to punish bad actors makes it economically unreasonable for **good medical providers** to treat legitimately injured people, we have not fixed the system. We have merely moved the damage somewhere else.

That is my concern with SB 623.

And it is why I am asking Uber and the transportation industry to support a **Surgical Repair** of the law you helped create.

Not repeal it. Not surrender your legitimate protections.

Make them better.

You Won. Now You Have an Opportunity to Lead.

Uber accomplished something significant.

You demonstrated that the existing PI system contained vulnerabilities serious enough to create political momentum for major reform.

Your ballot initiative put enormous pressure on California's Legal Lobby. The possibility of limiting contingency fees changed the negotiating dynamic.

A compromise followed. The ballot fight disappeared. SB 623 became law.

You obtained significant protections. The Legal Lobby protected what mattered most to it.

But in that compromise, many of the burdens landed somewhere else:

On medical providers and physicians.

That may have been politically convenient. But was it the best public policy?

That is the question I am asking you to consider now.

Because you have a choice. You can take the position: **“We got ours.”**

Or you can help create a better personal injury ecosystem that addresses the misconduct you legitimately opposed without unnecessarily harming ethical medical providers and patient access to care.

The second path would be genuine leadership.

Your Passengers Become Our Patients

Before a rideshare claim becomes a lawsuit, something else happens first.

Someone gets hurt.

A passenger. A driver. A pedestrian. Another motorist.

That person may need a chiropractor. Physical therapy. Pain management. Neurological care. Psychological care. Imaging. Orthopedic evaluation. Spine care. Or surgery.

And when conventional healthcare coverage does not provide timely access, an independent provider may agree to treat that person on lien.

The provider effectively says: **“I will provide your healthcare today and wait until your claim resolves to be paid.”**

That provider may then wait a year. Two years. Often longer.

While waiting, the practice continues paying staff, rent, malpractice coverage, equipment, supplies, technology, compliance expenses and California's extraordinary operating costs.

And ultimately?

The case may fail. Liability may be disputed. Policy limits may be inadequate. The attorney may demand reductions. The provider may recover only a portion of the bill, or nothing.

That is financial risk.

And financial risk has economic value.

It does not justify unreasonable billing. But it does mean lien-based healthcare is not economically identical to an insured medical transaction reimbursed promptly at a contracted rate.

That distinction matters.

You Should Want Good Providers Treating Your Injured Passengers

Consider the alternative.

SB 623 makes rideshare PI care more burdensome.

Providers assess the risk. And quality doctors begin saying: **“I don't accept Uber cases.”**

Perhaps that reduces medical bills. But does it improve healthcare? Does it improve claim quality? Does it reduce disputes? Does it help distinguish legitimate injuries from exaggerated ones? Or does it increasingly leave rideshare patients with fewer qualified providers willing to treat them?

And you end up with less ethical, less quality care applied to your PI situations.

Uber should not want that.

Neither should Lyft. Neither should any transportation company.

A transportation company should want legitimately injured people evaluated promptly by ethical, qualified providers who:

Treat what is medically necessary. Don't overtreat. Bill reasonably. Document accurately. Refer appropriately. Discharge appropriately. And tell the medical truth.

Those providers actually make legitimate claims **easier to evaluate.**

They should be encouraged. Not driven away.

There Is a Better Way to Fight Nuclear Verdicts

If your concern is that enormous medical specials are being presented to juries and then used as anchors for extraordinary economic and noneconomic damage awards, address the problem **where it occurs.**

At trial.

Reasonable evidentiary limitations can restrict what medical-charge evidence is presented to the jury.

FAIR Health or another appropriate benchmark can serve that evidentiary purpose.

You keep your protection.

But why must that evidentiary protection also dictate the underlying financial relationship between the injured patient and the provider who financed the care?

Those are different issues.

The first question is: **What should the jury hear?**

The second is: **What is reasonable compensation for a provider who delivered medically necessary care and assumed years of payment risk?**

You can win the first without unnecessarily controlling the second.

That is the essence of the Surgical Strike.

Preserve your courtroom protection. Remove the unnecessary collateral damage outside the courtroom.

Referral Transparency? Yes. But Put the Burden Where It Belongs.

If you want transparency regarding attorney-provider referrals, I support you.

If a law firm directs clients to a particular provider, disclose it. If improper financial relationships exist, expose them. If kickbacks exist, stop them.

But if the attorney made the referral, why require the physician to shoulder the principal declaration burden regarding information the attorney knows?

Put responsibility upon **the person with actual knowledge.**

If the law firm made the referral, the law firm declares it.

If the provider originated something improper, hold the provider accountable.

If a funding company engaged in improper conduct, hold it accountable.

Put each burden on the party responsible for the conduct.

That is fair reform.

Medical Funding Is Not Automatically Your Enemy

This area deserves particular attention.

Medical funding can increase the numbers appearing in a personal injury case.

I understand why defendants scrutinize it. You should. But don't confuse scrutiny with elimination.

Imagine your passenger needs medically necessary spine surgery. The patient cannot afford it. Insurance will not provide timely access to the appropriate surgeon.

And the surgeon says: **“I will perform the surgery, but I cannot personally finance $100,000 of medical care for three years.”**

A medical funding company may provide the capital that allows the patient to obtain the procedure. That company assumes risk. Time. Uncertainty. Potential nonpayment.

That deserves a reasonable return.

Should a funding company be able to charge an unreasonable amount simply because the money may ultimately come from litigation? **No.**

Attack that. Require transparency. Expose unreasonable profiteering.

But preserve responsible funding that gives injured people access to medically necessary care.

And once again: If your concern is the funded amount being presented to the jury and inflating the verdict, **restrict its evidentiary use.**

You can protect the trial without eliminating the financing that made the patient's treatment possible.

Now Let's Talk About the Legal Lobby

Uber learned something important from this fight.

Attorney fees matter enormously to the Legal Lobby.

Your ballot initiative exposed that pressure point. And the resulting negotiations demonstrated just how aggressively the plaintiffs' bar will mobilize when the economics of its profession are threatened.

That lesson should not simply be used as leverage for the next political battle.

It should be used to create **better reform.**

Instead of forcing the Legal Lobby to choose between protecting itself and protecting medicine, bring it into a system where **everyone accepts accountability.**

Attorneys should charge reasonable fees. They should eliminate questionable phantom costs. They should handle MedPay appropriately. They should be transparent about referrals. They should stop treating provider reductions as an automatic settlement strategy.

Providers should bill reasonably. Providers should treat only when medically necessary.

Funding companies should earn reasonable, not extraordinary, profits.

Insurers should fairly and promptly resolve legitimate, well-supported claims.

Transportation companies should fairly pay legitimate claims while aggressively challenging fraud and abuse.

Everyone gives something. And everyone gains something.

That is more sustainable than an endless cycle of ballot initiatives and legislative warfare.

Be Careful What You Replicate

SB 623 may become a model.

Other transportation companies will look at what Uber obtained.

Other industries will too. Commercial fleets. Delivery companies. Municipalities. Insurers. Large corporate defendants.

Why wouldn't they want similar protections?

Eventually, California may confront a simple legal and policy question: **Why should two people with identical injuries and identical medical care face different rules merely because one accident involved a rideshare company?**

And then comes the pressure to expand SB 623 to **all personal injury.**

That may look like a victory for tort reform.

But if the framework contains provisions that unnecessarily reduce access to quality independent medical care, you will have helped create a much larger healthcare problem.

Fix those provisions before anyone copies them.

That protects everyone, including you.

Don't Make Good Medicine the Enemy of Tort Reform

There is a dangerous tendency in PI debates to treat the medical bill itself as evidence of wrongdoing.

It isn't.

An unreasonable bill deserves scrutiny. An unnecessary procedure deserves scrutiny. A fraudulent bill deserves prosecution.

But a high bill for legitimate specialized care is not automatically abuse.

A provider waiting years for payment is not automatically profiteering. A surgeon earning a profit is not unethical. A funding company earning a reasonable return for assuming risk is not predatory merely because it makes money.

Profit is not the enemy. Abuse is.

That distinction should matter to Uber and every business reading this.

You expect to earn a return on capital. So does an insurer. So does a law firm. So does a funding company. So does a physician.

The question should always be: **Is the value reasonable for the service, risk and circumstances?**

Not: **Did someone make money?**

The Transportation Industry Should Want an Ethical PI Ecosystem

Imagine a different system.

A crash occurs. The injured person receives prompt evaluation. Providers deliver only medically necessary care. Medical charges are reasonable and defensible. Documentation clearly explains the injury, causation, functional limitations, treatment, recovery and prognosis.

Attorney referrals are transparent. Funding arrangements are transparent.

Attorneys charge reasonable fees. Funding companies receive reasonable returns.

Insurers and transportation companies receive reliable medical information earlier. Legitimate claims are identified faster. Those claims are paid more quickly. Weak, exaggerated and fraudulent claims are identified and fought.

Fewer cases need years of litigation. Fewer cases reach juries.

And when a case does go to trial, the jury receives reasonable evidence rather than artificially inflated numbers.

Wouldn't that be better for Uber too?

That is what ethical ecosystem reform could accomplish.

Use Your Economic Power to Reward Good Behavior

Uber and the insurance industry possess something medicine often does not: **Scale.**

Use it constructively.

If providers demonstrate ethical behavior, reasonable billing, medically necessary treatment and excellent documentation, those claims should be easier to resolve.

Reward quality. Reward transparency. Reward ethical conduct.

Pay legitimate claims fairly and faster. Make ethical behavior economically advantageous.

Then aggressively fight the opposite.

Fraud. Unnecessary treatment. Manufactured damages. Improper referral arrangements. Unreasonable charges. Predatory funding.

Separate the good actors from the bad.

That creates incentives for the entire ecosystem to improve.

And Don't Let the Legal Lobby Shift Its Burdens Onto Medicine

If your original concern included attorney economics, don't allow the solution to become: **Protect attorney economics and regulate medical economics instead.**

That is not balanced tort reform.

If attorney fees are unreasonable, address attorney fees.

If attorney-generated referrals need disclosure, require attorneys to disclose them.

If medical charges are being misused at trial, regulate the evidence.

If providers overtreat, sanction overtreatment.

If funding companies abuse patients, regulate the abuse.

Every industry should carry its own burden.

Medicine should not become the dumping ground for compromises reached between more politically powerful participants.

My Ask of Uber and the Transportation Industry

You fought for reform. Now help refine it.

Support the Surgical Strike.

Keep reasonable evidentiary protections against artificially inflated verdicts. Keep transparency. Keep accountability. Keep tools for challenging unreasonable bills and unnecessary treatment.

But support targeted changes that:

Separate courtroom evidentiary limitations from the underlying medical receivable.

Place referral disclosure responsibility primarily upon the party actually making the referral.

Preserve legitimate medical funding while targeting unreasonable profiteering.

Protect access to quality independent medical providers.

And join medicine, law, insurance, funding and government in developing ethical standards that reward good actors while aggressively targeting bad ones.

You do not have to surrender your victory. You can improve it.

The Best Tort Reform Doesn't Merely Reduce What You Pay

It reduces why you had to fight in the first place.

Fewer unnecessary procedures. Fewer inflated bills. Fewer questionable referrals. Fewer exaggerated claims.

Better medical documentation. Earlier claim evaluation.

More reasonable attorney economics. More reasonable funding economics.

Faster resolution of legitimate claims. More aggressive action against illegitimate ones.

That is genuine reform.

And it is much more durable than simply shifting financial burdens onto the next stakeholder.

Uber has already demonstrated that it can change California personal injury. Now demonstrate something more important: **That you can help make it better.**

Not just for Uber. Not just for transportation companies. But for the citizen who trusted your platform, got into the vehicle, and unexpectedly became a patient.

Your customer.

Because tort reform should protect businesses from abuse. But it should also protect legitimate injured people from becoming collateral damage in the process.

We can accomplish both.

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

And pursue the outcomes every stakeholder should want:

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

Respectfully,

Michael Coates
Michael Coates, Esq.
President, Personal Injury Made Easy

PS: Uber, you proved that the PI system can be changed. The question now is what kind of change you want your legacy to be. **You can help create reform that merely shifts costs and burdens, or reform that identifies bad conduct, rewards ethical behavior, protects legitimate businesses, and preserves quality healthcare for the people who use your service.** I hope you choose the latter.