



444 East Algonquin Road • Arlington Heights, IL 60005-4664 847-228-9900 • www.plasticsurgery.org

# **ASPS ISSUE BRIEF**

## **Medical Liability Reform**

Improving the practice of medicine and the quality of patient care

### Background

The current medical liability climate in the United State negatively impacts the ability of our physicians to properly serve their patients. Over 75% of physicians in the United States will be involved in a malpractice claim during the course of their career.<sup>1</sup> This type of environment promotes defensive medicine, which increases the cost of health care and subjects patients to unnecessary screenings, testing and hospital stays.

Some states, including California and Texas, have implemented medical liability reforms that have positively impacted access to health care for patients, reduced runaway insurance premiums, and created a stable, predictable liability system. Texas' reforms limit non-economic damages, which directly benefits both physicians and patients. Whereas Texas experienced a physician shortage with few doctors in rural and underserved areas, these regions of the state experienced an influx of new doctors after reforms. Thirty-six percent of Texas physicians also began accepting high-risk patients due to the protections in place. Nine years after the reforms were enacted, Texas reported its highest number of newly licensed physicians. These reforms not only increased patient access to needed medical services, but also created consumer choice, which was not previously available.

Yet laws differ between states, which offers little stability and few assurances to physicians and patients. Instead, medical liability should be reformed and standardized across all fifty states, which will benefit all taxpayers – patients and physicians alike. According to a 2009 report by the Congressional Budget Office, medical liability reform efforts can reduce total health care spending by about 0.5 percent. These reforms could create \$54 billion in saving over the next ten years by reducing incentives that promote defensive medicine and by protecting physicians from outrageous liability insurance premiums.

#### The Solution

Both physicians and patients are impacted by the current medial liability climate in the United States. Congress must pass meaningful medical liability reforms that protect both patients and physicians. Potential areas for reform include:

- Caps on noneconomic damages
- A reasonable statute of limitation on claims
- Standards for expert witnesses, including qualifications and training within the same discipline as the defendant
- Safe harbor protections for physicians who follow evidence-based guidelines

## Congressional Request

Cosponsor and pass the *Saving Lives, Saving Costs Act* (H.R.2603/ S.1475) to improve the current medical liability climate for both doctors and patients.

To cosponsor H.R.2603, contact <u>francis.brooke@mail.house.gov</u> (Rep. Barr) To cosponsor S.1475, contact <u>jay eberle@barrasso.senate.gov</u> (Sen. Barrasso)

<sup>&</sup>lt;sup>1</sup> Jena, Anupam B., Seth Seabury, Darius Lakdawalla, and Amitabh Chandra. "Malpractice Risk According to Physician Specialty." The New England Journal of Medicine 2011;365:629-36 (2011). Print.

<sup>&</sup>lt;sup>2</sup> "10-Year Anniversary TMA Survey Documents Increased Access to Care." Texas Medical Association 9 Sept. 2013. Online.

<sup>&</sup>lt;sup>3</sup> Proposition 12 Produces Health Benefits. Texas Medical Association, 28 Aug. 2013. Web. <a href="http://www.texmed.org/Template.aspx?id=5238">http://www.texmed.org/Template.aspx?id=5238</a>.