House Passes Federal Medical Malpractice Bill

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By Dylan Fisher [4]

On Wednesday, the House passed a bill that would limit plaintiff damages to $250,000 in most medical practice lawsuits. It moves to the Senate.

Source: Physicians Practice

Welcome to Practice Rounds, our weekly column exploring what's being covered in the larger world of healthcare.

Malpractice Reform Passes House

On Wednesday, the Protecting Access to Care Act passed through the House by a vote of 218-210. The bill was passed chiefly along party lines and establishes provisions governing healthcare lawsuits where coverage for the care was provided or subsidized by the federal government. The bill would impose a $250,000 cap on non-economic damages that could be brought in most medical malpractice lawsuits. Exceptions to this cap include, emotional distress, suffering, and mental anguish.

The bill would allow certain evidence regarding collateral source benefits to potentially be introduced in lawsuits involving injury or wrongful death. Providers of collateral source benefits may not recover any amount from the claimant in such a lawsuit. These provisions do not apply if Medicare is a secondary payer or there is third party liability for Medicaid services.

The bill moves to the Senate, where it faces an uphill climb. It needs 60 votes to pass, which means Republican supporters would need to bring in eight Democrats/Independents into the fold. For more on the tort reform bill, check out our video on it.

Boomers Switching Docs

Thirty-five percent of baby-boomer patients have switched physicians in the last two years, according to results of a recent SolutionReach survey. The survey also found that 20 percent of boomer patients are somewhat likely to switch docs within the next few years.

The survey was administered online to a total of 2,073 consumers from a national e-panel, representing three generations: millennials (21-34 years old), gen X (35-51), and baby boomers (52-70).

The survey cited lack of convenience and low satisfaction as the main reasons why boomers are changing doctors. According to the survey, providers may lose patients and associated revenue, if they can't meet modern-day expectations of patients, such as text messaging and online communication. Practice logistics including wait times, staff interactions, communication, and difficulties in making appointments are prompting patients to change providers.

Wearables Not a Factor in Patient Care

According to a recent Medical Group Management Association (MGMA) Stat poll, only six percent of practices use data from patients' wearables, while 81 percent don't use the data, and 14 percent are unsure.

According to the report, most of the respondents who were currently using data from patients' wearables stated they were using the information during patient visits to engage patients in their health status and set activity goals. Only a few indicated they received data directly from a device and used the information to monitor the patients' health.

The poll, which garnered 1168 total responses, found that nine percent of practices not currently using data from wearables indicated they would do so in the next year and another 11 percent stated it would be two or more years before they anticipated using the data. The majority (51 percent) of this group said they were not sure and 29 percent said their practices had no plans to use the technology.

Quote of the week:
EHRs Not Designed with Real People in Mind, Expert Opines

"When you look at some of the problems with [EHRs], it's easy to get romantic about the old days [and think], 'Wouldn't it be wonderful if we went back to paper?' No it wouldn't. There were hundreds and hundreds of errors related to the doctor's handwriting, or forgetting the patient was allergic to..."
medicine, or information that came out of an X-Ray that wasn't transmitted to the primary-care physician." - Dr. Robert Wachter on the difficulties and future of EHRs.

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