## THE GENERAL ASSEMBLY OF PENNSYLVANIA

## HOUSE RESOLUTION No. 223 Session of 2005

INTRODUCED BY DeLUCA, BEBKO-JONES, BISHOP, BLACKWELL, CALTAGIRONE, CLYMER, CRAHALLA, CREIGHTON, CURRY, DeWEESE, DONATUCCI, FABRIZIO, FREEMAN, GEORGE, GOODMAN, JAMES, JOSEPHS, KOTIK, LaGROTTA, McNAUGHTON, MUNDY, PALLONE, PISTELLA, RAMALEY, READSHAW, SANTONI, STABACK, SURRA, TANGRETTI, E. Z. TAYLOR, VEON, WALKO AND YOUNGBLOOD, APRIL 6, 2005

## REFERRED TO COMMITTEE ON PROFESSIONAL LICENSURE, APRIL 6, 2005

## A RESOLUTION

Directing the Legislative Budget and Finance Committee to
 investigate the disciplinary practices of the State Board of
 Medicine and the State Board of Osteopathic Medicine with
 respect to medical malpractice and related consumer
 complaints.

6 WHEREAS, Pennsylvania is one of only a few states to enact

7 medical malpractice reform that includes patient safety

8 provisions; and

9 WHEREAS, The Mcare Act requires medical facilities to provide 10 detailed reporting of serious events and incidents and notify 11 licensing boards when a licensee fails to report an event and 12 requires physicians to report to their respective licensing 13 board the medical malpractice cases filed against them and the 14 disciplinary actions imposed by other states; and 15 WHEREAS, Anesthesiologists' experience shows patient safety efforts reduce lawsuits and insurance premiums; and 16 17 WHEREAS, In 1985 the American Society of Anesthesiologists

studied malpractice files from 35 different insurers and issued
 standards and procedures to avoid injuries; and

3 WHEREAS, Savings resulted from implementation of these 4 standards and procedures: anesthesiology malpractice claims 5 dropped from 7.9% of all medical malpractice claims in 1972 to 3.8% of all medical malpractice claims from 1985 to 2001; from 6 the 1970s to the 1990s, anesthesiology claims involving 7 permanent disability or death dropped from 64% to 41%; and 8 claims resulting in payments to plaintiffs dropped from 64% to 9 10 45%; and

11 WHEREAS, By extrapolating from Institute of Medicine 12 findings, it can be determined that approximately 1,920 to 4,277 13 hospital deaths in this Commonwealth each year are due to 14 preventable medical errors; and

15 WHEREAS, The costs resulting from preventable medical errors 16 to Commonwealth residents, families and communities are 17 estimated at \$742 million to \$1.3 billion each year, while the 18 cost of medical malpractice insurance to Commonwealth health 19 care providers is approximately \$683 million a year; and 20 WHEREAS, The impact of medical malpractice in this 21 Commonwealth should be measured by the cost to patients and 22 consumers, not the premiums paid by health care providers; and 23 WHEREAS, According to the National Practitioner Data Bank 24 (NPDB), 5.3% of all doctors, each of whom is responsible for at 25 least two medical malpractice payouts, are responsible for 56% 26 of medical malpractice payouts nationally; and 27 WHEREAS, Only 11.1% of the nation's doctors who are 28 responsible for three or more medical malpractice payouts were

29 disciplined by their state boards, only 14.4% of the nation's
30 doctors who are responsible for four or more malpractice payouts
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1 were disciplined by their state boards and only 17.2% of the 2 nation's doctors who are responsible for five or more 3 malpractice payouts were disciplined by their state boards; and 4 WHEREAS, In this Commonwealth 13 physicians have been 5 responsible for between 4 and 15 malpractice payouts, totaling 6 more than \$5 million per doctor, but these physicians have not 7 been disciplined; therefore be it

8 RESOLVED, That the Legislative Budget and Finance Committee 9 investigate the disciplinary practices of the State Board of 10 Medicine and the State Board of Osteopathic Medicine with 11 respect to medical malpractice and related consumer complaints; 12 and be it further

13 RESOLVED, That the investigation include, but not be limited 14 to, comparisons between the types and rates of disciplinary 15 action taken by the respective boards prior and subsequent to 16 enactment of the Mcare Act and comparisons of the boards' 17 disciplinary rates and procedures with those of other states; 18 and be it further

19 RESOLVED, That the Legislative Budget and Finance Committee 20 report its findings and recommendations to the General Assembly 21 no later than six months following the adoption of this 22 resolution.