

AOA's voice supporting fair treatment of physicians in quality review process

This month, members of Congress heard the voice of the American Osteopathic Association (AOA) and the 44,000 osteopathic physicians it represents.

I took a stand for the osteopathic medical community and told members of the House Commerce Subcommittee on Oversight and Investigations that the AOA will continue to oppose the National Practitioner Data Bank (NPDB) and any attempt to make the information in that data bank public in its current form. The AOA may not have changed policy today, but our statements may change how people look at policy tomorrow.

On behalf of the AOA, I expressed the community's strong concern that information included within the NPDB regarding malpractice settlements and adverse actions can be misleading. Negligent practitioners should be identified through true peer review, not through a system riddled with flaws.

The NPDB was formed originally to improve healthcare quality by encouraging hospitals, state licensing boards, and other healthcare entities to identify and discipline unprofessional behavior. Used to conduct investigations into the qualifications of practitioners it seeks to license, hire, or grant privileges, this clearinghouse tracks: (1) medical malpractice settlements, judgments, and adverse actions taken against the licenses; and (2) practitioners ineligible to participate in Medicare or certain other state healthcare plans (or both).

The NPDB has serious flaws, making it inadequate for the purpose it is meant to fulfill. Americans have a right to the best medical care, and physicians have a right to fair treatment by government agencies, review boards, hospitals, and their peers. It is important for our policymakers to consider carefully these issues as they craft the rules from which we work.

That is why I worked with the AOA to tell Congress the use of such misleading information by hospitals and insurers damages physicians' careers and weakens the healthcare system. While the data bank's intent is to track negligent practitioners, the information currently housed there is often not appropriate for that purpose.

We all know that the NPDB has serious problems. For example, all medical malpractice payments must be reported, even those associated with insurers settling cases, not because of a guilty practitioner, but to avoid the even greater expenses of taking the suit to court. The use of such misleading information by hospitals and insurers is damaging

physicians' careers. However, the AOA is not opposed to having a federal data bank that is open to the public if the information accurately reflects the negligence of the practitioner. These practitioners can be identified through true peer review, to wit: when a professional organization, licensing board, or true peer review organization (comprising physicians of same specialty) has ruled that a practitioner has been negligent in his/her performance of patient care, the public has a right to know. But I emphasize that before any information is made public, it must pass the true test of peer review.

I am pleased to have talked about these issues before Congress and honored to be working toward fairness of healthcare quality review of physicians and the *DO difference*.

Edward A. Loniewski, DO
AOA Past President