

MPR > News > Does Immunity From Medical Malpractice Lead To Improved Patient Care?

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## Does Immunity from Medical Malpractice Lead to Improved Patient Care?

The incidence of adverse medical events decreased significantly when physicians received sovereign immunity from medical malpractice claims at a Florida hospital, according to a study published in *Health Management, Policy and Innovation*.

For this study, researchers examined safety events involving 900 University of Miami medical school faculty physicians who practice at the 1,600 bed Jackson Memorial Hospital (JMH) which is protected by sovereign immunity as a government entity; these same physicians are also employed at the University of Miami Hospital (UMH), a privately-owned 560 bed facility. In November 2011, the State of Florida extended sovereign immunity (SI) to these 900 physicians practicing at JMH, however at UMH, the physicians continued to practice without SI.

Data on graded harm was collected from 2010 to 2015 via the software provider Quantros. The researchers compared data from 2010-2011, before the physicians were granted SI, to 2012-2013, after the physicians were granted SI. Specifically, the annual safety outcomes were compared, defined as the log of the incidence of serious harm reports/patient bed days, adjusting for volume of care. Also assessed, was the number of claims, total dollar value, and average dollar value of claims.

Due to disparities, such as number of beds and service lines at both facilities, the authors did not compare the rate of safety events at UMH to JMH. Instead, data was only compared for each hospital's own specific trajectory of serious safety events.

Results showed that the average post-SI incidence rate of harmful events at JMH was 13% lower (estimate = -0.1368, RR=0.8721, P=0.0109) compared to the 2 pre-SI years on record. However, over time the trajectory of changes was not significantly different between both hospitals. In addition, a decline in total (\$16.5M vs \$0.7M) and average (\$3.3M vs \$0.233M) dollar value of claims was observed at JMH after the faculty received SI.

"This study suggests that without the threat of malpractice lawsuits, physicians are still committed to delivering the safest, highest quality patient care possible," said Dr. David A. Lubarsky, chief medical and systems integration officer at the University of Miami Health System and the study's lead author.

The researchers did acknowledge that tort reform alone is unlikely to lead to markedly safer practices. "An effective liability system should offer incentives to institutions that adopt safer systems," said Dr. Lubarsky. "These investments should result in fewer adverse events and increased quality than tort reform alone."

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*Safety events involving 900 medical school faculty physicians were examined pre- and post-sovereign immunity*