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## **AMBIGUOUS LANGUAGE COULD DRIVE UP RATHER THAN CURTAIL HEALTH CARE COSTS**

By Spencer Berthelsen, MD

The national health care debate is far from over. Days removed from his televised national health care forum, President Obama is calling for an “up or down” vote on the measure within the next few weeks.

In his recent State of the Union address, President Obama asked if anyone had a better approach to holding the line of health care spending. I do. *Stay true to the original goals of reform.*

Adopt Medicare and Medicaid payment policies that reward quality, efficiency, and care coordination across many medical specialties. Incentivize the use of health information technology, especially Electronic Medical Records systems which promote information sharing. Minimize the need for doctors to practice defensive medicine. And lastly, do not harm proven state liability reforms, such as those enacted in Texas, that have delivered thousands of new doctors and a record increase in charity care.

It is the latter point that has been absent from the national health care debate.

House and Senate leaders on both sides of the aisle readily admit that the practice of defensive medicine, the ordering of procedures and tests to avoid a lawsuit, increases consumer health care costs. The latest analysis from the non-partisan Congressional Budget Office estimates that government health care programs could save more than \$54 billion over the next 10 years if Congress enacted nationwide limits on jury awards for pain and suffering and other curbs similar to Texas law. Unfortunately, proposed health care reform legislation doesn't include a shred of meaningful tort reform. Thus, the CBO's projected cost savings will not be realized.

Even more alarming, the current House and Senate bills include ambiguous language that could create new opportunities to sue doctors and hospitals. Amazingly, a bill that aims to reduce total health care costs could do just the opposite. Encouraging new and novel theories to sue doctors, hospitals, and nurses will surely increase defensive medicine and drive up the cost of medical care for the average American.

And there's more bad news: the health care bill could pre-empt the lawsuit reforms we passed in Texas, reforms that have brought thousands of primary care doctors and high-risk specialists to the Houston area alone. If Congress kills our lawsuit reforms, they will discourage promising students from becoming doctors, reduce patient access to doctors, drain budgets for improving care delivery, and ultimately drive up health care costs instead of curtailing them.

Six years ago, Texas lawmakers passed a series of medical lawsuit reforms aimed at keeping doctors in practice and treating high-risk patients. The evidence of those reforms can be seen throughout Houston, not just in new doctor's offices and hospital expansions but in more doctors in the emergency room and a \$41 million expansion in the rendering of charity care from Houston hospitals funded by liability savings.

Since the passage of reforms, Harris County has seen a 17 percent increase in family physicians, internists, and pediatricians, and a near tripling of pediatric specialists. Houston patients now have access to more than 1,700 new physicians including 110 ER doctors and 556 high-risk specialists. Physician growth in neighboring counties is off the chart, as well.

Lawsuit reforms have directly benefited patient care at Kelsey-Seybold Clinic. Our physicians care for more than 400,000 individuals every year. Many of those patients have complex health problems. Because of Texas' more reasonable liability climate, Kelsey-Seybold has been able to recruit bright and talented doctors from across the country to deliver care.

We took 100 percent of our medical lawsuit reforms savings and invested those dollars in a state-of-the-art Electronic Medical Record system to benefit our patients. This system eliminates sources of medical error due to illegibility, monitors for medication allergies and alerts the prescribing physician about drug interactions. It gives physicians across many medical specialties instantaneous access to comprehensive patient information. Our patients can now schedule appointments online and email their healthcare team. Our EMR system is enhancing our ability to deliver coordinated care more efficiently, and at a total lower medical cost.

Let's hope that any national health care legislation builds on these successes, allows more patients to get the quality care they need, and does nothing to harm the reforms that have proven so effective here in Houston.

*Dr. Berthelsen is managing director and chairman of the board of Kelsey-Seybold Clinic.*

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**About Kelsey-Seybold Clinic**

Kelsey-Seybold Clinic is Houston's premier community-based physician group, founded in 1949 by Dr. Mavis Kelsey in Houston's famous Texas Medical Center. More than 350 Kelsey-Seybold physicians practice at 19 locations in the greater Houston area. Medical services offered by Kelsey-Seybold include outpatient medical care in more than 50 medical specialties, outpatient surgery centers, nationally accredited Breast Diagnostic Centers and Cancer Centers, advanced radiology services, onsite and online Kelsey Pharmacy services and secure communication portals for patients to communicate with their health care team. Kelsey-Seybold has proudly served the National Aeronautics and Space Administration since 1966 and today provides medical services onsite at the Johnson Space Center, the White Sands Test Facility in New Mexico, and in Moscow. To follow Kelsey-Seybold on Twitter, visit <http://twitter.com/kelseyseybold>. To follow Kelsey-Seybold on Facebook, visit <http://www.facebook.com/KelseySeyboldClinic>. For more information about Kelsey Seybold Clinic, visit [www.kelsey-seybold.com](http://www.kelsey-seybold.com).

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