
Electronic Health Records May Lower Malpractice Settlements

This study was based at the Department of Ambulatory Care and Prevention of Harvard Medical School and Harvard Pilgrim Health Care.

Health care policymakers have touted the benefits of EHRs, which include preserving and documenting patient health care data, reducing medication errors, improving efficiency of care, and allowing surveillance and monitoring of care for research and quality improvement.

"There is broad consensus that electronic health records are an essential foundation for the delivery of high quality care. As electronic health record adoption proceeds as a national health policy objective, some have wondered whether EHRs can help to prevent medical malpractice claims," says Assistant Professor Steven Simon, senior author on the paper.

The study examined survey responses from 1140 practicing physicians in Massachusetts during 2005 concerning their demographic characteristics and the length and extent of their EHR use. The physicians' malpractice history was accessed using publicly available data from the Commonwealth of Massachusetts' Board of Registration in Medicine. The study team compared the presence or absence of malpractice claims among physicians with and without EHRs, including only claims that had been settled and paid.

Overall, 6.1% of physicians with EHRs and 10.8% of physicians without them had paid malpractice settlements in the preceding ten years. After controlling for potential confounding variables, there remained a trend favoring EHR use, although the result was not statistically significant. In a secondary analysis among EHR adopters, the authors found that 5.7% of more active users of their systems had paid malpractice settlements, compared with 12.1% of less active users. Small numbers of physicians in both groups led the authors to interpret the results with caution.

The investigators speculate that EHRs may decrease paid malpractice claims for a number of reasons. EHRs offer easy access to patients' history, which may result in fewer diagnostic errors, improved follow up of abnormal test results, and better adherence to clinical guidelines. In addition, the clear documentation of care allowed by EHRs can bolster legal defenses if a malpractice claim is filed.

If this link between EHR use and lower malpractice payments is confirmed in further studies, malpractice insurers may offer lower premiums for practices that use EHRs, and there would be further incentive for physicians to invest in an EHR system for their offices. The federal government could also decide to offer subsidies for EHR adoption because they have been shown to reduce health care costs through a decrease in medical malpractice payments.

According to Simon, "The results of this study indicate that preventing medical malpractice claims may be another compelling reason for physicians, practices, and policy makers to forge ahead with efforts toward universal adoption and optimal usage of electronic health records."

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