

## The Affordable Care Act will impose greater liability on Health Care Providers

The Affordable Care Act, informally known as Obamacare, institutes broad changes into the healthcare delivery system. While the main intent is to broaden the availability of health care to most citizens (it does – increasing the eligible population by an additional 40,000,000), it will also have a strong impact on liability of the providers of healthcare services, from Hospitals to doctors, to nurses to caseworkers. It will also greatly affect the institutions and facilities that employ these individuals. With such an increase in the insured population, there will be a significant strain on the medical delivery system, and with that a potential impact on negative outcomes. This, we believe, will have a dramatic impact on the availability, terms, and pricing of Medical Professional Liability.

NIF has long been a prominent player in the Allied Medical Professional Liability field, and is a resource for you and your insureds. Not only do we provide you with access to many Medical Professional Liability markets, but we also will provide updated news and information that would be important to you and your insureds.

You should know that the ACA has this significant impact on providers.

More than a dozen provisions of the Affordable Care Act could be used by plaintiffs for establishing civil tort liability in medical cases, including:

1. Adult health quality measures: The federal government is authorized to develop a core set of health care quality measures to be reported for adult Medicare beneficiaries.
2. Hospital readmissions reduction program: To decrease Medicare hospital costs, excessive 30-day readmissions of certain patients will mean lower payment rates.
3. Hospital-acquired conditions initiative: Facilities will be prohibited from receiving additional Medicare payment for treating certain hospital-acquired conditions.
4. Medicare shared savings program: Hospitals and physicians that coordinate care successfully for patients will share in some of the cost savings to the federal government that result — and might be penalized for failing to restrain costs.
5. Value-based payment modifier: Medicare payments to certain physician group practices will be modified based on how well they meet certain quality measures.

Source: Medical Assn. of Georgia

These provisions can certainly increase the chances and incidents of medical professional claims against all providers, both individual and institutional.

