



EDITOR'S LETTER

by Howard Blumstein, MD FAAEM

"Malpractice." It is a word that strikes fear into the hearts of most physicians. The specter of losing one's personal savings. The annoyance of time lost in meetings, depositions and trial. The frustration of being accused of incompetence. The threat of being listed in databases as a bad physician. The blow to one's self-image. These are just some of the negative aspects that rush through our minds when we receive that notification of legal action against us. Been there, done that.

As Program Director for four consecutive Scientific Assemblies, I was always struck by the popularity, attendance, and close attention commanded by sessions that addressed various aspects of medical malpractice. This year's Scientific Assembly, from which I just returned, featured a record number of sessions and speakers on malpractice. Even the Keynote Address, by Dr. Bruce Hart, focused on this issue.

In keeping with that trend, this current issue of *Common Sense*, several months in the making, addresses the malpractice crisis from many different angles.

The President's Message addresses the crisis precipitated for nearly 200 physicians regarding loss of malpractice coverage after the bankruptcy of PhyAmerica. This contract management group, owned by Steve Scott (former President of Coastal), initially sought bankruptcy protection in November of 2002. It was ultimately sold to Steve Dresnick a year later. But, it turns out PhyAmerica was underinsured. Dr. Kazzi's message discusses the events that have transpired since then, focusing on AAEM's efforts to help organize these physicians into a cohesive group that can protect themselves from the failures of PhyAmerica's leadership to provide adequate insurance.

Horror stories from physicians threatened with loss of coverage serve as a wake-up call to all of us. There but for the grace of God go we all.

The world of medical malpractice coverage is cold and insensitive. The need for such coverage represents a financial burden that may be an insurmountable hurdle for physicians trying to form an

independent group. Attempts to cut corners by purchasing inadequate insurance coverage or refusing to provide "tail" coverage to departing physicians seem unfair business practices that put the financial interests of large groups ahead of the professional interests of our colleagues and fellow Academy members. How much would such a "tail" cost? Tens of thousands of dollars (see *Medical Economics*, July 2004: <http://www.memag.com/memag/articleDetail.jsp?id=108611>)

I am a full-time faculty member in an academic emergency medicine training program. Each year, several senior residents asked me to review the contracts they have been offered. This year, not a single contract included an obligation by the employer to provide "tail" coverage upon the departure of the resident. Essentially, this means that should one of my residents decide to leave his first job for whatever reason, (even if fired) he will incur a financial penalty of tens of thousands of dollars. Cold. Very cold.

As a member of the Board of Directors, I have had the opportunity to meet or make contact with many people with unique insights into how the malpractice crisis affects emergency physicians. I have invited them to submit articles for this special issue. Larry Weiss, MD JD, a board member who is also an attorney, offers several mechanisms to reduce malpractice costs aside from the "caps" currently favored by both the White House and the AMA. David Hambright discusses the essential features that all emergency physicians must look for when reviewing their coverage. Tobey Williams is a former president of the resident section who sat on the AAEM board. I asked him to describe his efforts in putting together coverage for board certified emergency docs.

What can you and AAEM do to help crawl out from under the storm clouds generated by a legal system run amuck? The malpractice committee has begun looking for ways to fight back. Please e-mail me with suggestions. Read the articles in this issue of *Common Sense* and educate yourself about the malpractice crisis. Dr. Weiss listed several other suggestions in a discussion he presented at the Scientific Assembly: Join your state medical society, communicate with your legislators, and check out Common Good (<http://cgood.org/>), an organization committed to "Restoring Common Sense to American Law." If we can generate a critical mass of physicians working on reforming the system, I believe we will succeed. 🇺🇸



AAEM Honors Dr. Robert Simon



AAEM was pleased to attend the January 21, 2005, retirement party of Bob Simon, MD FAAEM, who held the position of Chair of Emergency Medicine at Cook County Hospital for two decades. Dr. Simon was presented with a plaque by Tom Scaletta, MD FAAEM, AAEM's Vice President and a former Cook County faculty member. The inscription reads, "to a courageous and foresighted emergency medicine leader and educator who has upheld AAEM's principles in regards to fair and satisfying practice environments." AAEM is proud to claim Dr. Simon as a dedicated member and we wish him well in the next chapter of his life.