

**Oregon Health Policy Board
Medical Liability Task Force Charter**

Approved by OHPB on January 12, 2010

I. Authority

The Oregon Health Policy Board, under House Bill 2009, Section 8(1) may establish advisory and technical committees as the Board considers necessary to aid and advise in performance of its functions. The Board establishes the Medical Liability Task Force to examine current state medical liability laws and policies, their impact on the cost and delivery of healthcare, and to develop a range of medical liability reform proposals for consideration by the Oregon Health Policy Board and the Oregon Legislature. The Committee will be guided by the Triple Aim of improving population health, improving the individual's experience of care and reducing per capita costs. The Committee will also be guided by the Oregon Health Fund Board's final report, "Aim High: Building a Healthy Oregon," (November 2008), particularly in reference to Building Block 4: Stimulate System Innovation and Improvement:

Improve population health by:

- Improving access to care in order to limit the impact of disease on the population as a whole.

Improve the individual's experience of care by:

- Improving access to care by assuring healthcare providers do not cease to provide specific services in response to liability concerns.

Reduce per capita costs by:

- Reducing the costs associated with defensive medicine.

This Task Force is temporary and will be disbanded upon the acceptance of its recommendations as may be amended by the Oregon Health Policy Board and final action by the 2011 Oregon Legislature unless the Board assigns additional duties.

II. Committee Makeup

The Medical Liability Task Force is composed will be composed of select members with expertise, experience and knowledge of medical liability reform issues including physicians, attorneys and other stakeholders, as well as a representative of the Patient Safety Commission.

III. Deliverables

The Medical Liability Task Force will investigate the current medical liability system and suggest opportunities for reform in Oregon including, but not limited to, caps on non-economic damage

awards, disclosure-and-offer programs, shifting the adjudication of medical malpractice claims to administrative panels or specialized judicial courts, and the creation of “safe harbors” where physicians are insulated from liability if they adhere to evidence-based practices or practice according to findings from credible comparative-effectiveness research (CER).

The work of the Task Force will result in recommendations for a range of innovations and state action in the medical liability system. Recommendations should prioritize patient safety and the reduction of medical errors, encourage better communication between physicians and patients, reduce the occurrence of frivolous lawsuits, and reduce liability premiums, while also ensuring that patients are compensated in an equitable and timely way for medical injuries.

Recommendations for a range of innovations for state action will be completed and presented to the OHPB by October 1, 2010. Recommendations for associated Legislative language, where appropriate, will be completed by January 1, 2011.

IV. Committee Dependencies

The Medical Liability Task Force will seek information from:

- a. Health Services Commission [evidence-based guidelines]
- b. Health Resources Commission [comparative effectiveness]
- c. Health Care Workforce Committee
- d. Oregon Medical Association
- e. Oregon Trial Attorneys Association

The Medical Liability Task Force will provide draft recommendations for input to:

- a. OHA senior staff
- b. Oregon Health Policy Board

V. Staff Resources and Board Liaison

Senior OHA Staff: Lynn Marie Crider, Jeanene Smith

Board liaison: Chuck Hofmann

VI. Committee Membership

Insert membership table