



## Washington Health Policy Week in Review

### **Study: Little Link Between Physician Information and Quality of Care**

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September 13, 2010 -- High-quality medical care bears little relationship to publicly available information about physicians, such as their history of malpractice claims or years of experience, according to a study published Monday in the Archives of Internal Medicine.

The study from the Rand Corporation and the University of Pittsburgh Medical School said that government public health officials advise that consumers look at such measures on state medical board websites when choosing a physician, as do popular consumer websites. But it's "unclear" whether those are really good predictors of quality of care, the authors said.

The study comes at a time when quality of care is increasingly being stressed, including in the new health care law, as lawmakers and public health officials seek to bend the health care spending cost curve while not diminishing health care provided to Americans.

The review of more than 10,000 Massachusetts physicians and the care they provided to 1.3 million adults in that state found three characteristics somewhat tied to better performance: providers who are female, those who are board-certified and those who attended U.S. medical schools. But there's not enough evidence that patients would really get better care by switching to a doctor who embodied all three qualities, the study said.

"We found that the types of information widely available to patients for choosing a physician do not predict whether that physician will deliver evidence based care," said Rachel Reid, the lead author, in a statement. "These findings underscore the need for better physician performance data to help consumers choose their doctor."

The study points to a "serious problem" for consumers who are looking at public information that's not relevant and even possibly misleading, said Anne-Marie Audet, vice president for health system quality and efficiency at the nonprofit Commonwealth Fund, which helped pay for the study with the U.S. Department of Labor.

Board certification was the one element that did stand out somewhat in connection with quality care in both acute and preventive circumstances, the study indicated, suggesting some "preliminary evidence" that there may be benefits from maintenance of doctor certification programs or board certification activities as a condition of maintaining licenses.

Reporting of individual physician quality data "may provide the consumer with more valuable guidance when seeking providers of high-quality health care," the study said.