



BUSINESS & LABOR
EXHIBIT NO. 8 Michael S. Brown, MD, FCAP
Pamela P. Clegg, MD, FCAP
DATE 3-22-11 Angela F. Durden, MD, FCAP
Kirie R. Emerick, MD, FCAP
BILL NO. HB 405 Christopher J. Nero, MD, FCAP
Duane A. Schultz, MD, FCAP

March 21, 2011

Senate Business, Labor & Economic Affairs Committee
Montana Legislature

Re: Support for HB 405

Honorable Members of the Senate Business, Labor & Economic Affairs Committee:

I am a practicing pathologist in Billings, and ask for your support of HB 405, which will help reduce the cost of providing medical care by allowing physicians to practice evidence-based medicine, rather than "one in a million" medicine.

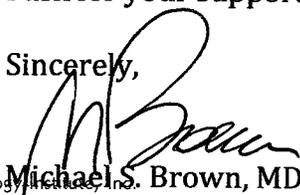
Physicians all over our country practice defensive medicine by ordering additional tests or procedures "just in case", rather than using standard medical evidence to guide their decisions. It is no different in Montana. As a pathologist, I make diagnoses using the microscope to look at tissue biopsies. On a weekly basis, I order several additional tests that are not medically necessary, but are used rather to exclude the most remote possibilities, all in the name of covering myself in the event I may be sued for misdiagnosis. I practice what is considered a low to medium risk specialty. My colleagues in higher risk specialties practice defensive medicine on a daily basis.

As a medical director for clinical laboratories, I see the tremendous overutilization that occurs as numerous lab tests are ordered for patients on a daily basis because physicians are wary of being held to a standard that unreasonably expects them to foresee highly unlikely outcomes. Further, I have a disincentive to recommend less testing to my colleagues. In a medium sized hospital in Montana, this overutilization leads to hundreds of thousands of dollars in unnecessary costs every year. Because Workers Compensation patients and Medicaid patients are viewed as a higher medicolegal risk by many physicians, a larger degree of overutilization occurs with this population, and the state of Montana assumes the cost. This is bad medicine.

The legislature and the public are interested in reducing costs in healthcare. The best way to allocate scarce medical resources is through prudent exercise of medical judgment by a well-trained medical provider. This is the only medically sound way to effectively treat patients and reduce costs. HB405 will allow us to do that.

I ask for your support of passage of HB 405.

Sincerely,



Michael S. Brown, MD

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