



2018 HOUSE OF DELEGATES RESOLUTION REPORT

Adopted

Resolution 1 - Grace Period on Required Pre Certs in the First Quarter of the Year to Optimize Medication Adherence and Patient Care

RESOLVED, the Medical Society of New Jersey ("MSNJ") petition the New Jersey Department of Banking and Insurance to mandate insurance companies to allow a grace period of at least 60 days from the initial date of insurance enrollment for pre cert requirements to be fulfilled before causing non-adherence of medications and interrupt patient care.

Referred to Board of Trustees

Resolution 2 - Assistance from the New Jersey Department of Banking on Medication Pre Certs to Protect Patient Care

RESOLVED, the Medical Society of New Jersey ("MSNJ") petition the New Jersey Department of Banking and Insurance ("DOBI") to develop a hotline for physicians and patients to access assistance when patient care is in jeopardy because prescriptions are being delayed due to the requirement of pre certification.

~~RESOLVED, MSNJ petition DOBI to develop guidelines for limitation of time physicians spend doing pre certs on their patients' behalf and therefore be it~~

~~RESOLVED, MSNJ petition DOBI to allow pharmacy benefit manager only to limit pharmaceutical denials to 2 from the prior year's pharmacy benefits manager.~~

Resolves 2 and 3 were NOT adopted at the House of Delegates

Not Adopted

Resolution 3 - Limitation on Reports by Hospitals to the NPDB Unrelated to Patient Care

RESOLVED, that our AMA send a letter to HHS and Senate and House oversight committees to demand HRSA/NPDB refuse reports on physician applicants to hospitals/health entities where a physician provider was not delivering healthcare services and did not cause a harm. (Directive to Action)

RESOLVED, that our AMA formally request the Secretary of HHS that HRSA audit the NPDB for reports on physician applicants not providing healthcare services, without prior reports or disciplinary sanctions, and remove these reports and the name of any physician from the NPDB. (Directive to Action).

Referred to the Board

Resolution 4A - Physician Due Process & NPDB Reform

RESOLVED, that our AMA seek information from HRSA on the length of time for NPDB appeals to be completed;

RESOLVED, that our AMA aggressively educate medical staffs, medical societies and all other reporting entities about evaluating and correcting their reporting processes to prevent unfair, abusive and unnecessary NPDB reports; and be it further

RESOLVED, that our AMA aggressively educate medical societies and medical staff on the importance of medical staff bylaws that ensure members of peer review committees are not biased because of hospital employment or competitive status;

RESOLVED, that our AMA form a working group to collaborate with the Office of the Secretary of Health and Human Services (HHS) and staff of the Health Resources & Services Administration (HRSA) to establish procedures to vet each entity's reports to ensure that they meet *prima facie* legal requirements and provide useful credentialing information before accepting them for distribution by the NPDB; and therefore be it further

RESOLVED, that the NPDB reject and return any report that that does not meet *prima facie* legal reporting requirements. (Directive to Take Action)

Not Adopted

Resolution 5 - Ethics of Physician Behavior & Speech

RESOLVED, that our AMA formally request that the Health Resources and Services Administration (HRSA) designate a physician member to review all claims of "disruptive physician" and subject the hospital and its administrator to review by the AMA Ethics Committee or an independent Ethics Committee; and be it further

RESOLVED, that our AMA formally request that HRSA audit the NPDB for such reports where physicians were reported as Disruptive and if found without merit subject the reporting entity or administrator to admonishment or sanctions for Ethics violations, (Directive to Take Action) and be it further

RESOLVED, that HRSA remove the name of any physician from the NPDB who was reported by a health entity as the result of expression of opinion (free speech) where the physician was not involved in the care or treatment of a patient yet labeled disruptive; (Directive to Take Action).

Referred to the Board of Trustees

Resolution 6 - Hospital Administrators to be Licensed and Subject to Regulations

RESOLVED, that MSNJ petition the New Jersey Department of Health to form a State Board for Hospital Administrators and further be it

RESOLVED, that this State Board require Hospital Administrators, to include VP's, CFO's, CEO's and physician administrators to be licensed, and be subject to examinations, continuing education, criminal background checks, fraud laws, ethics and, regulations and be it further

RESOLVED, that this State Board will receive any complaints and have the power to rescind such licenses when patient safety is threatened.

Adopted

Resolution 7 - A "Green Amendment"¹ to the New Jersey State Constitution as proposed by members of the New Jersey State Legislature

RESOLVED, that based on environmental concerns and concern for the public health of the citizens of New Jersey, the MSNJ supports a properly worded amendment to the New Jersey State Constitution in order to help maintain a clean and unpolluted environment that supports the public health of the citizens of New Jersey, now and for future generations.

BE IT FURTHER RESOLVED THAT, the MSNJ will notify the New Jersey State Legislature, the Governor's office, appropriate State agencies and the press of its desire to support such a constitutional amendment.

Adopted

Resolution 8 - Training Physicians in the Art of Public Forum

RESOLVED, that the AMA will establish a program for training physicians in the art and science of conducting public forums in order to ensure that the Public is well informed on the Health Care System of our country.

Adopted

Resolution 9 - Revised Mission Statement of the AMA

RESOLVED, that our AMA will consider its current mission statement to read: The AMA promotes professionalism, the art and science of medicine, physician wellness and the betterment of public health.

Adopted

Resolution 10 - Practicing Physician Declining Membership Analysis

RESOLVED, that the Medical Society of New Jersey ("MSNJ") petition the American Medical Association ("AMA") to release to its membership annually in its Annual Report any and all aggregate data for that year it has pertaining to reasons physicians are either leaving or not joining the AMA ("Data"), including but not limited to, survey data, focus group data, and exit interview data, giving specific attention to those physicians in the "Young," "Mature," and "Senior" membership categories, and be it further

RESOLVED, that MSNJ report back to its membership the AMA's response to this request.