

**2005 ANNUAL MEETING
MEDICAL SOCIETY OF NEW JERSEY**

Report: Reference Committee C

Presented by: Satwant Gill Keswani, MD, Chair

1 **COUNCIL ON COMMUNICATIONS**

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3 **Recommendation:**

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5 The Reference Committee recommends that the report be filed.

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7 **COUNCIL ON LEGISLATION**

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9 **Recommendation:**

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11 The Reference Committee recommends that the report be filed.

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13 **COUNCIL ON PUBLIC HEALTH**

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15 **Recommendation:**

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17 The Reference Committee recommends that the report be filed.

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19 **RESOLUTION 5 – LEGISLATION TO ALLOW COUNTERSUITS**

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21 **Recommendation:**

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23 The Reference Committee recommends that Resolution 5 be referred to the
24 Medical Liability Task Force for recommendation to the Board of Trustees.

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26 **RESOLUTION 6 – PUBLICATION ON MSNJ WEB SITE OF MEDICAL-**
27 **MALPRACTICE CASE PLAINTIFF INFORMATION**

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29 **Recommendation:**

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31 The Reference Committee recommends that Resolution 6 be referred to the
32 Board of Trustees for determination of the resolution's feasibility and to
33 take action based on the results of that determination.

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35 **RESOLUTION 7 – INSURER RECOUPMENT**

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Recommendation:

The Reference Committee recommends that Resolution 7 be adopted as amended to read as follows.

Resolved, that the Medical Society of New Jersey inform its members by e-mail and fax of the egregious practice of insurers’ withholding funds for reimbursement for one patient to offset a discrepancy in payment for another patient and request that members of the Society report each and every instance of this practice immediately to an appropriate committee of the Medical Society of New Jersey; and be it further

Resolved, that the Medical Society of New Jersey seek legislation that would:

- (a) Abolish the practice of insurers’ withholding funds from patient “Y” to reimburse alleged overpayments for patient “X”; and
- (b) Limit backtracking on claims reimbursement for alleged overpayments to ~~120 days~~ same time limits that apply for filing by the insurer for both in-network and out-of-network providers; and
- (c) Require that insurers provide tangible proof of overpayment, in each instance to providers, whether they be in-network or out-of-network.

RESOLUTION 10 – URBAN DEFORESTATION

Recommendation:

The Reference Committee recommends that Resolution 10 be adopted.

RESOLUTION 12 – VACCINES FOR CHILDREN

Recommendation:

The Reference Committee recommends that Resolution 12 be referred to the Council on Public Health.

RESOLUTION 13 – EXPEDITING KID CARE SIGN-UP

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1 **Recommendation:**

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3 The Reference Committee recommends that the following Substitute
4 Resolution for Resolution 13 be adopted:

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6 Resolved, that the Medical Society of New Jersey open a dialogue with the
7 New Jersey Department of Human Services to discuss the Kid Care
8 program and work with the state to improve this program.
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10 **RESOLUTION 14 – DISPENSING BENADRYL IN SCHOOLS**

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12 **Recommendation:**

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14 The Reference Committee recommends that Resolution 14 be referred to
15 the Council on Public Health.

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17 The Reference Committee acknowledges that the action called for in this resolution is now
18 current practice and asks that the Council on Public Health write to the Department of
19 Education thanking them for their efforts.
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21 **RESOLUTION 15 – BUDGET NEUTRAL JOURNAL**

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23 **Recommendation:**

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25 The Reference Committee recommends that Resolution 15 be referred to
26 the Board of Trustees.

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28 **RESOLUTION 16 – HEALTH SAVINGS ACCOUNTS AND MEDICAL SAVINGS**
29 **ACCOUNTS**

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31 **Recommendation:**

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33 The Reference Committee recommends that Resolution 16 be referred to
34 the Council on Medical Services.

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36 **RESOLUTION 17 – INCREASING INTRUSIVENESS OF PRECERTIFICATION-**
37 **RELATED ISSUES**

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39 **Recommendation:**

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41 The Reference Committee recommends that Resolution 17 be referred to
42 the Council on Legislation.

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1 **RESOLUTION 19 – RATING OF OUTSIDE SERVICES**

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3 **Recommendation:**

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5 The Reference Committee recommends that Resolution 19 be referred to
6 the Council on Medical Services.

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8 **RESOLUTION 22 – CME-ACCREDITED COURSE AT ANNUAL MEETINGS**
9 **CME CREDITS FOR REFERENCE COMMITTEES AND DELEGATE SESSIONS**

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11 **Recommendation:**

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13 The Reference Committee recommends that Resolution 22 be referred to
14 the Committee on Annual Meeting (or its successor) and the Committee on
15 Medical Education to determine the feasibility of providing a CME-
16 accredited course at each annual meeting.

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18 **RESOLUTION 23 – LICENSE REVOCATION FOR TRIAL LAWYERS FILING**
19 **THREE OR MORE FRIVOLOUS MALPRACTICE LAWSUITS**

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21 **Recommendation:**

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23 The Reference Committee recommends that Resolution 23 not be adopted.

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25 **RESOLUTION 24 – EXPERT TESTIMONY**

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27 **Recommendation:**

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29 The Reference Committee recommends that MSNJ policy 170.993 be
30 reaffirmed in lieu of Resolution 24.

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32 The Reference Committee supports the implementation of the expert-witness review-panel
33 plan that was adopted by the Board of Trustees at its March 2005 meeting.

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35 **RESOLUTION 26 – FLU VACCINES**

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37 **Recommendation:**

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39 The Reference Committee recommends that Resolution 26 be referred to
40 the Council on Public Health.

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42 **RESOLUTION 27 – BLISTER PACKAGING**

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Recommendation:

The Reference Committee recommends that Resolution 27 be referred to the Council on Public Health.

RESOLUTION 29 – MEDICAL EDUCATION CONTINUING MEDICAL EDUCATION ON THE MSNJ WEB SITE

Recommendation:

The Reference Committee recommends that Resolution 29 be referred to the Committee on Medical Education.

Membership of the Committee:

Satwant Gill Keswani, MD, chair; Leticia V. DeCastro, MD, Michael A. Graff, MD, Stephen J. Pilipshen, MD, and Richard A. Williams, MD. (Irvin M. Bonder, MD, and Pierre N. Coant, MD, were unable to attend.)