

OPEN BOARD MINUTES
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A meeting of the New Jersey State Board of Medical Examiners was held on Wednesday, June 9, 2010 at the Richard J. Hughes Justice Complex, 25 Market Street, 4th Floor Conference Center, Trenton, New Jersey. The meeting was called to order by President Paul Mendelowitz, M.D.

Board Members Baker, Berkowitz, Cheema, Criss, Howard, Jordan, Lambert, Lomazow, Mendelowitz, Paul, Rajput, Scott, Stanley, Tedeschi, Weiss and Walsh. were present.

EXCUSED

Board Members Ciechanowski, DeGregorio and Iannuzzi.

ALSO PRESENT

Assistant Attorney General Joyce, Senior Deputy Attorneys General Flanzman, and Gelber; Deputy Attorneys General Hafner, Levine, Puteska; Executive Director William V. Roeder and Mary Lou Mottola, Executive Director, Medical Practitioner Review Panel.

STATEMENT CONCERNING THE ANNUAL NOTICE OF PUBLIC MEETINGS

The requirements of the "Open Public Meetings Act" were satisfied by notice of this meeting given in the annual notice adopted by the New Jersey State Board of Medical Examiners on September 9, 2009 which was transmitted to the ATLANTIC CITY PRESS, STAR LEDGER, CAMDEN COURIER POST, ASBURY PARK PRESS, BERGEN RECORD and the TRENTON TIMES, all on the 1st day of October 2009.

ANNOUNCEMENTS

MINUTES

THE BOARD, UPON MOTION MADE AND SECONDED, APPROVED THE MAY 12, 2010 OPEN BOARD MINUTES

THE BOARD, UPON MOTION MADE AND SECONDED, APPROVED THE MARCH 19, 2010 OPEN PHYSICIAN ASSISTANT ADVISORY COMMITTEE MINUTES, HOWEVER,

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THE BOARD REQUESTED THAT THE COMMITTEE BE ADVISED THAT REQUESTS FOR LEGAL INTERPRETATION SHOULD BE FORWARDED TO THE EXECUTIVE COMMITTEE WITH A RECOMMENDATION FOR THE RESPONSE TO BE PROVIDED BY THE COMMITTEE.

THE BOARD, UPON MOTION MADE AND SECONDED, VOTED TO APPROVE THE JANUARY 21, 2010 ELECTROLOGIST ADVISORY COMMITTEE MINUTES.

NEW BUSINESS

1. NOMINATING COMMITTEE REPORT

The Nominating Committee announced the following slate of officers for consideration at the July election.

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| President | Paul Jordan, M.D. |
| Vice - President | Kevin Walsh, P.A. |
| Secretary | Kathryn Lambert, D.O. |
| Treasurer | George J. Scott, D.P.M., D.O. |

2. LEGISLATION

Assembly Bill No. 2672 Seeks to require health care professionals to notify patients of the end of health benefits coverage during the course of treatment in certain circumstances.

THE BOARD, UPON MOTION MADE AND SECONDED, VOTED TO OPPOSE THE BILL. THE BOARD RECOGNIZED THE IMPORTANCE OF HAVING PATIENTS FULLY INFORMED WHEN A PARTICULAR SERVICE OR PROVIDER MAY NO LONGER BE COVERED UNDER THE TERMS OF THEIR PLAN AND WHEN THE PATIENT MIGHT BEGIN TO INCUR OUT OF POCKET EXPENSES. THIS BILL, HOWEVER, WOULD NOT NECESSARILY ACHIEVE THAT END. THE WRITTEN REQUIREMENTS CONTEMPLATED ARE NOT ONLY ONEROUS ON THE PART OF THE HEALTH CARE PROFESSIONAL

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PROVIDING THE SERVICE, BUT WHOLLY OUTSIDE THE PURVIEW OF INFORMATION THAT A HEALTH CARE PROVIDER WOULD HAVE AVAILABLE AND WOULD CREATE AN ENORMOUS BURDEN ON THE HEALTH CARE PROVIDER TO OBTAIN. THE PRACTICAL EFFECT OF THIS REQUIREMENT MAY IN FACT DELAY, NECESSARY REFERRALS. GENERALLY, IT IS THE OPINION OF THE BOARD, THAT IT IS THE PATIENT'S RESPONSIBILITY TO KNOW WHAT THEIR DEDUCTIBLE AND/OR CO PAYMENTS IS/ARE, AS WELL AS THE PARAMETERS OF COVERAGE. EACH COMPANY HAS A NUMBER OF PLANS EACH WITH VARIANCES AS TO WHAT AND/OR WHO MAY BE COVERED. WITH SUCH A WIDE VARIANCE OF PLANS EVEN WRITTEN BY THE SAME CARRIER, IT WOULD BE VIRTUALLY IMPOSSIBLE FOR ONE HEALTH CARE PROVIDER TO KNOW WHEN ANOTHER HEALTH CARE PROVIDER IS OR IS NOT COVERED. TOO OFTEN, A HEALTH CARE PROVIDER (AND FOR THAT MATTER, THE PATIENT) ONLY BECOMES AWARE THAT AN INDIVIDUAL OR SERVICE IS NOT COVERED AFTER THE FACT, BECAUSE THE PAYMENT OR REFERRED SERVICE IS DENIED. MORE THAN LIKELY, THIS INFORMATION ISN'T EVEN AVAILABLE TO THE HEALTH CARE PROVIDER AT THE TIME THE REFERRAL IS BEING MADE. REQUIREMENTS CONTEMPLATED UNDER THIS BILL ARE MORE APPROPRIATELY PLACED WITH THE CARRIER. THE BILL WOULD NOT BE IN THE BEST INTEREST OF THE PATIENT AS IT WILL LEAD TO INORDINATE DELAY AND/OR ULTRA CONSERVATIVE DECISIONS IN MAKING REFERRALS.

Motion made by Dr. Rajput and seconded by Dr. Stanley. It carried unanimously.

Assembly Bill No. 2711 Seeks to allow physicians to jointly negotiate with carriers over contractual terms and conditions.

THE BOARD, UPON MOTION MADE AND SECONDED VOTED TO SUPPORT THIS PROPOSED LEGISLATION. IT VIEWED ITS OBJECTIONS AS IN THE BEST INTEREST OF PATIENT CARE AS IT WOULD EMPOWER PHYSICIANS TO BE ON A LEVEL PLAYING FIELD IN THE NEGOTIATION PROCESS. THE BOARD, HOWEVER, DID QUESTION WHAT THE ATTORNEY GENERAL'S OFFICE WAS BEING INSERTED INTO THE PROCESS WHICH SHOULD BE A PRIVATE, CONTRACTUAL MATTER. IT ALSO QUESTIONED THE NEED TO REGISTER, PAY A FEE AND HAVE THE TERMS OF THE

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CONTRACT APPROVED.

Motion made by Dr. Paul, seconded by Dr. Rajput. It carried unanimously.

Ms. Howard entered the meeting.

OLD BUSINESS

Nothing.

INFORMATIONAL

Nothing.

PUBLIC COMMENT

Lawrence Downs, Esq., General Counsel for the Medical Society of New Jersey, commented on Assembly Bill No. 2711, which seeks to allow physicians to jointly negotiate with carriers over contractual terms and conditions, explaining that the Medical Society has noted that there should be sufficient state oversight in order to avoid any federal antitrust (safe harbor) issues.

Respectfully submitted,

Paul C. Mendelowitz, M.D., President

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