The 2013 Interim Meeting of the AMA House of Delegates was held at the Gaylord National Convention Center in Maryland from November 16-19. New Mexico was well represented, with attendance by NMMS and specialty society delegates and alternates, medical students, and NMMS officers and staff.

New Mexico introduced a resolution at this meeting, prompted by reports from Farmington physicians that the hospital there was allowing a contracted out-of-state utilization review firm to overrule physician initiated hospital admissions, changing some full admissions to observation. New Mexico’s Resolution 816 asked that the AMA study whether contracted patient management personnel are inappropriately making medical decisions about hospital admissions outside of an established physician-patient relationship and without being duly licensed and privileged to do so, and to make recommendations for new policy to address this issue. There was strong support for our resolution in Reference Committee J, making it clear that this is a growing problem that is not limited to New Mexico. The Reference Committee noted that “speakers expressed concern and confusion regarding the complexity of the inpatient/observations status designations of Medicare patients who are treated in the hospital setting”, and our New Mexico resolution was one of the few that were adopted without modification.

As always at AMA House of Delegates meetings, there were many excellent and informative reports submitted by the various AMA Councils and the Board of Trustees. The final reports will all be available on the AMA website www.ama-assn.org, and your delegation highly recommends them as excellent resources.

Several issues of national importance rose to the forefront at this meeting. The most significant was the possibility that after far too many years of the annual specter of increasingly draconian cuts in Medicare reimbursement mandated by the “Sustainable Growth Rate” (SGR) formula requiring annual last-minute emergency “doc-fixes”, that a bipartisan legislative solution may be at hand. An actual bill had not yet been introduced, so it was difficult to discuss specifics. Many physicians, and AMA leadership, expressed concern that the solution might include unpalatable freezes in reimbursement, and a zero-sum approach for meeting quality standards. But the strong consensus was that this was an opportunity that might not come again for years, and that in the future, the price tag might be much higher and the politics much more challenging. The House authorized the AMA to aggressively pursue the best possible solution to ending the SGR, and to continue strong advocacy for the optimization of the Medicare payment system.

Not surprisingly, there was also considerable debate about the Affordable Care Act, and its difficult rollout. There were a number of related resolutions put forward, including Resolution 206 from Indiana that asked for adoption of a comprehensive set of principles in lieu of continued support for working to improve the ACA and optimize its implementation. Because of evident deep divisions within the HOD and the complexity of the rapidly evolving ACA
implementation, this resolution was referred back to the Board for further consideration. Your delegation would also highly recommend BOT Report 6 which was filed during the Interim Meeting as an informational report presenting a detailed review of the broad range of policies that have been adopted by the HOD on the ACA, and current AMA activities related to each of them.

Anyone wishing to read the final report of the various Reference Committees including action taken on all of the reports and resolutions at this meeting can do so using this link or scan the QR code below:


One final note: The Interim meeting was held in the aftermath of the typhoon that devastated the Phillipines. Delegates generously donated $4,300 at this meeting, and a subsequent fundraiser at AMA Headquarters raised an additional $5,240, all of which went to the Red Cross, earmarked for victims of the storm.

All of your delegates to the AMA strongly encourage all New Mexico physicians to join the AMA, and become actively involved in organized advocacy on behalf of the entire profession. You can easily reach any of us via NMMS.

Steven Kanig MD
Chair, NMMS Delegation