

2022 ANNUAL REPORT

STRONGER TOGETHER

ANYTHING IS POSSIBLE WITH THE RIGHT SUPPORT



American College of
Emergency Physicians®

ADVANCING EMERGENCY CARE 

YOUR SUPPORT SYSTEM

In 2022, we recommitted to our mission to serve as the leading advocate for emergency physicians, their patients, and the public - in that order.

YOU ARE OUR FIRST PRIORITY

When you're supported, our specialty thrives. When you're empowered, the public is safer.

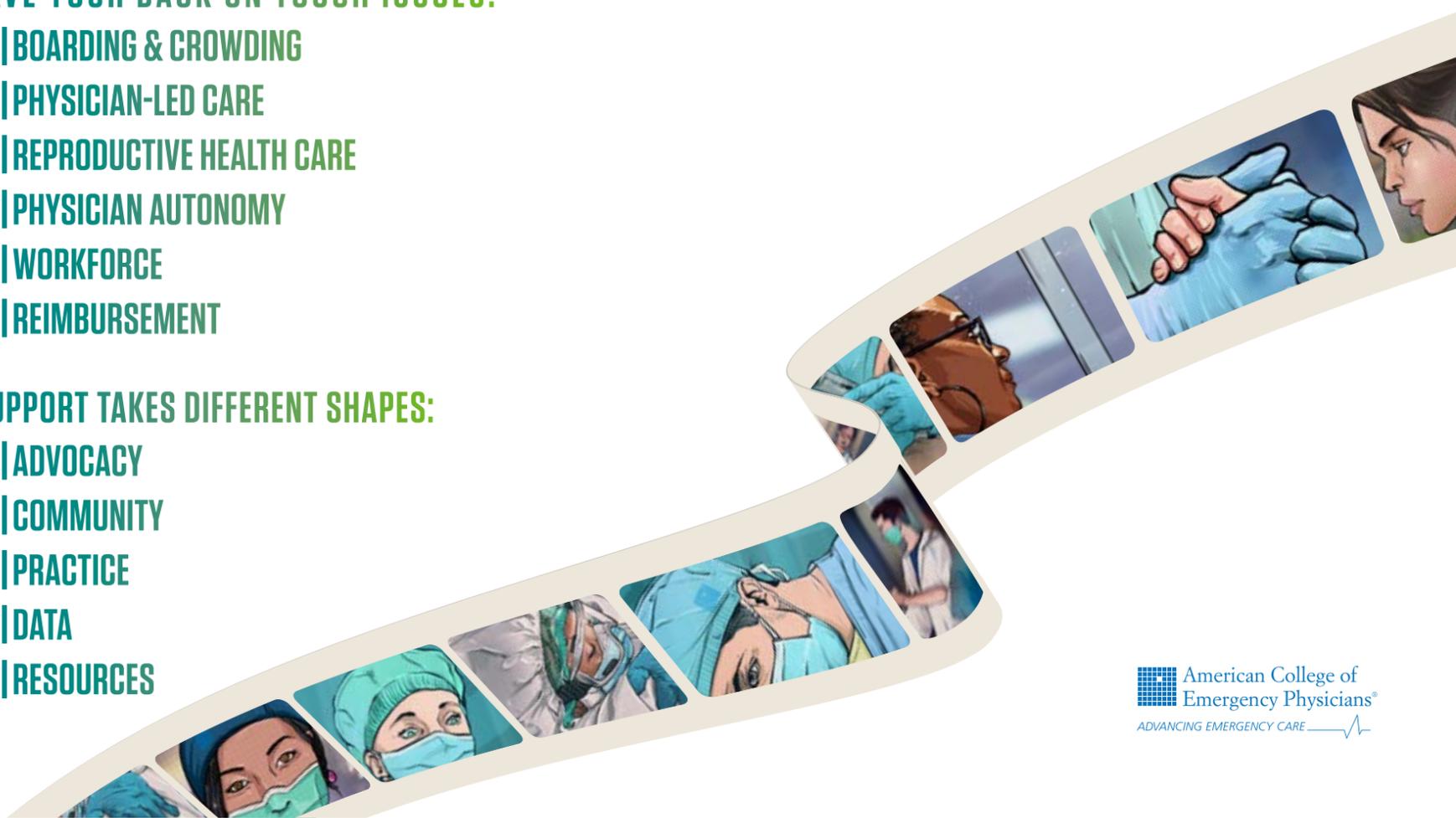
WE HAVE YOUR BACK ON TOUGH ISSUES:

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American College of
Emergency Physicians®
ADVANCING EMERGENCY CARE

SHARED PRIDE



ACEP PRESIDENT, 2021-2022

DR. GILLIAN SCHMITZ

What. A. Year! As your President, I knew we'd be tackling some important topics in 2022, and boy did we! Some battles we knew were coming - our ongoing COVID-19 crisis, the corporatization of medicine, scope of practice challenges, the future of our workforce. But Roe v. Wade? I did not see that one coming.

I am proud of how we waded through these complex issues together. We prioritized transparency and refused to shy away from hard conversations. We stood united in our fight to protect each other and our specialty. I hope you share the immense pride that I feel when I look back on these highlights from 2022:

- 1 We set a course for the future.** Our new strategic plan pushes us forward during a time when vision is more important than ever.
- 2 We listened.** Through virtual town halls, in-person chapter meetings, and social media channels, we hosted forums so you could tell us directly what you're concerned about and how ACEP could make your practice better.
- 3 We amplified your voice.** You told us what you needed, and we took a stand. Together we spoke out on impactful issues: physician mental health, boarding, scope of practice, private equity, physician autonomy, reimbursement, workforce and more. (See p. 3-13)
- 4 We made life easier.** ACEP provides a support system, personally and professionally. We developed new point of care tools, apps, field guides, educational events and communities to meet your needs and help solve your problems. (See p. 17-23)
- 5 We connected.** Finding community is more important than ever. Whether it was catching up with old friends at ACEP22 or making new ones during sweaty Biker Docs workouts, we were together. And that's what ACEP is all about.

As you skim these pages and look back on the past year, I want to remind you that you make it happen. Your input guides ACEP forward. Your dues support this work. You're an integral part of our community, and we are grateful for you.

Sincerely,

Gillian Schmitz, MD, FACEP

Gillian Schmitz, MD, FACEP
ACEP President, 2021-22



TACKLING TOUGH ISSUES

ED BOARDING & CROWDING CRISIS

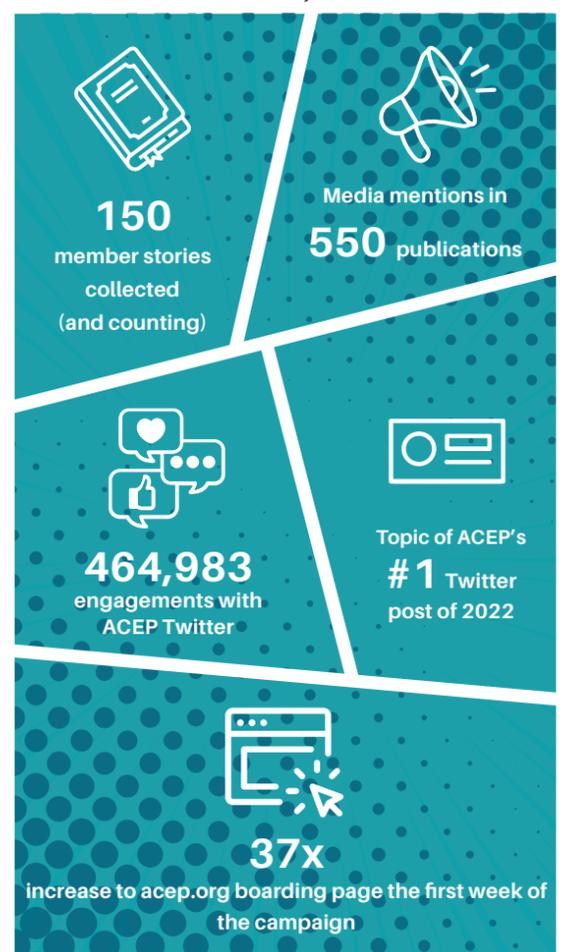
Brewing for years, the boarding crisis hit troublesome levels in late 2022. Your stories, filled with urgency and passion, allowed ACEP to launch a multichannel advocacy campaign.

ADVOCACY: ACEP'S COLLECTIVE VOICE PUSHES FOR SOLUTIONS

- 1 COLLECT STORIES**
 Data doesn't move the needle like stories do. Legislators needed to hear about the boarding crisis in your own words. And when we asked, your response was incredible.
- 2 ALERT THE WHITE HOUSE**
 Your frontline stories formed the heart of the letter ACEP sent to the White House in early November. We rallied the troops, getting 34 additional health care and patient advocacy groups to sign on.
- 3 RAISE PUBLIC AWARENESS**
 As our letter was sent to the White House, ACEP launched a digital storybook filled with your frontline ED boarding stories. This powerful collection pulled back the curtain on this crisis for the press and general public.
- 4 ADVOCATE FOR THE STATES**
 ACEP sent a letter to the National Governors Association, and ACEP chapters received a template letter for contacting their governors so we could address this crisis on local levels.
- 5 CREATE A TASK FORCE**
 In December 2022, an ACEP Task Force was appointed to develop potential solutions to present to the government.

BY THE NUMBERS*

*as of January 1, 2023



NEXT STEPS

Stay updated on ACEP's boarding advocacy efforts at acep.org/boarding.



Amogh Krishnagiri
@SDKrishnagiri

Grateful for the strong advocacy of ACEP here. Chief amongst the skillset of ER docs is a commitment to problem solving - this community will continue to use it to tackle the tough issues. Optimistic that as bellwethers of the healthcare system, we will be a part of the solution!





TACKLING TOUGH ISSUES

FIGHTING FOR PHYSICIAN-LED CARE

ACEP is leading efforts to make sure that policymakers and health care leaders know that emergency physicians should lead every emergency care team.

EDUCATING PATIENTS AND DECISIONMAKERS

ACEP launched an aggressive public education campaign with polls and PSAs that spelled out a clear message to the press, federal policymakers, and patients: **There is no substitute for an emergency physician in emergency departments.** Allowing nurse practitioners or physician assistants to perform complex medical procedures without supervision is dangerous.



"MY EXPERIENCE MATTERS"

ACEP collected and amplified personal stories from emergency physicians who began their careers as RNs, PAs, or NPs to demonstrate the dramatic difference in physician training and education.

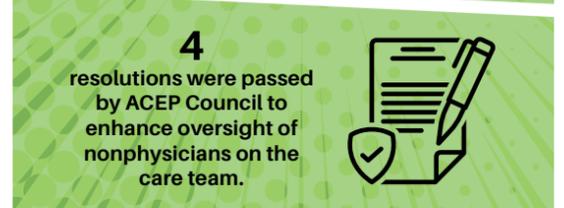
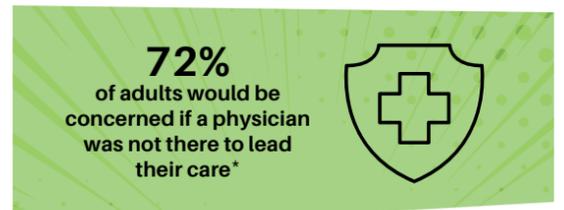
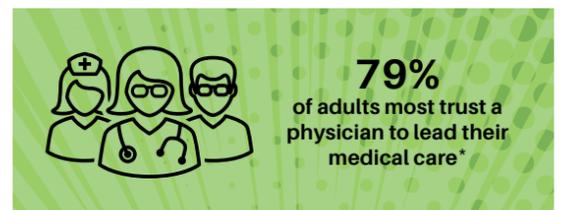
When emergency physicians fought scope of practice legislative battles at the state level, ACEP made sure members' voices were heard and supported with a comprehensive advocacy toolkit that included messaging, graphics and more.

JOIN THE FIGHT

Share your scope of practice concerns, review ACEP resources and stay current on ACEP efforts by visiting acep.org/scopeofpractice.



BY THE NUMBERS



*March 2022 ACEP/Morning Consult poll.



TACKLING TOUGH ISSUES

ACCESS TO EMERGENCY REPRODUCTIVE HEALTH CARE

When the Supreme Court reversed *Roe v. Wade*, ACEP worked quickly to support you through the confusing aftermath of the decision to ensure that you can safely and confidently provide necessary care.

UNPACKING EMTALA CONSIDERATIONS

- 1 TAKING A STAND**
ACEP immediately issued a new policy statement.
- 2 GATHERING RESOURCES**
ACEP publications responded urgently to get ACEP members the information they needed to protect themselves from liability and be ready for new clinical presentations.
- 3 RAISING THE FLAG**
ACEP's legal, advocacy and communications teams raised concerns to media, in court and in Congress. Guided by ACEP members' expertise, emergency physicians directly confronted barriers to care expected to arise in this new legal environment.
- 4 TAKING ACTION**
ACEP filed an amicus brief in *United States v. State of Idaho* to express concerns about conflicts with EMTALA. ACEP also signed onto a brief in *Texas v. Becerra* to underscore that policies preventing emergency physicians from doing their jobs could put pregnant patients at risk.
- 5 GATHERING DATA**
ACEP is partnering with University of California San Francisco to better identify patterns of emerging gaps in emergency care so we can further protect our members.
- 6 CONVENING EXPERTS**
A cross-disciplinary Task Force was created to address gaps in existing regulation or statute that could create clinical and legal barriers.

ACEP POLICY STATEMENT

INTERFERENCE IN THE PHYSICIAN-PATIENT RELATIONSHIP

ACEP believes that emergency physicians must be able to practice high quality, objective evidence-based medicine without legislative, regulatory, or judicial interference in the physician-patient relationship.

The Emergency Department After the Fall of Roe

ORIGINALLY PUBLISHED ONLINE ON JUNE 24, 2022



STAY INFORMED

Discussions about applications of EMTALA, state and federal updates, and regulatory changes are ongoing. Get the most recent information by visiting acep.org/reproductive.



BY THE NUMBERS*

*as of December 1, 2022



ACEP and its members were featured **1,050** times in articles discussing the impact of the new laws.

4

ACEP22 Council resolutions clarified ACEP policy on access to reproductive health care services.



1

group of experts appointed to address gaps that could create clinical or legal barriers: the EM Reproductive Health and Patient Safety Task Force.



2

amicus briefs were filed in major lawsuits to raise emergency physicians' concerns.





TACKLING TOUGH ISSUES

PROTECTING EMERGENCY PHYSICIAN AUTONOMY

Forces outside of the ED continue to have a profound impact on patient care and practice management. In 2022, ACEP stood firm to uphold employer best practices and advocate for due process, transparency and the sanctity of the physician-patient relationship.

TAKING A STAND

ACEP stood up to corporate and external forces that threaten emergency medicine when left unchecked.

2022

MARCH

ACEP filed an amicus brief in the AAEMPG v. Envision case, upholding the sanctity of a physician's duty to patients and the importance of allowing them to practice medicine without undue pressure from outside forces.

The Board of Directors approved the ACEP Statement on Private Equity and Corporate Investment in Emergency Medicine, emphasizing the physician-patient relationship as the moral center of medicine that can never be compromised.

ACEP gathered more than 100 member stories about the impact of consolidation to include in its formal response and recommendations to the FTC.

President Dr. Gillian Schmitz and Executive Director Sue Sedory shared your stories during the FTC's "Listening Forum on Firsthand Effects of Mergers and Acquisitions: Health Care."

AMA House adopted a resolution ACEP developed and introduced to strengthen due process protections for both employed and contracted physicians. Now the entire House of Medicine is fighting to ensure due process protections for you at both the federal and state level.

APRIL

JUNE

KNOWLEDGE IS POWER

ACEP empowered members with tools to support their career goals.



ACEP launched the Independent EM Master Class to teach emergency physicians how to start their own groups, compete for contracts and more. acep.org/indyclass



ACEP's regulatory blog published a detailed series outlining horizontal and vertical consolidation in health care. acep.org/regsanddeggs



ACEP provided members access to legal review of job offers and contracts. acep.org/support



ACEP enhanced career resources including the new emcareers.org job site, contract review and compensation guidance. acep.org/careercenter



ACEP distributed a governance and structure checklist to advertising or exhibiting employers to ensure transparency. acep.org/employerprofiles

BY THE NUMBERS



100+
member stories about impact of consolidation that were utilized for ACEP's response to the FTC

53%
of members surveyed indicated that their medical decision-making was negatively impacted by employer mergers or acquisitions.



4
policy statements to support you at acep.org/physicianautonomy

- Compensation Arrangements
- Compensation Transparency
- Contractual Relationships
- Rights and Responsibilities

KEEP CURRENT

Find autonomy updates and resources at acep.org/physicianautonomy.





TACKLING TOUGH ISSUES

SHAPING THE WORKFORCE OF TOMORROW

In 2021, the *Emergency Medicine Physician Workforce: Projections for 2030* report indicated a likely oversupply of emergency physicians in the next decade. In 2022, ACEP continued working on its multifaceted plan to build a bright future for the specialty.

GOING ON RECORD

In February 2022, ACEP and EMRA filed joint testimony for a Senate HELP committee hearing on workforce shortages. The testimony provided the EM physician perspective on rural ED challenges, staff shortages, ED boarding and maintaining physician-led teams as the gold standard of emergency care.

LOOKING FORWARD

ACEP launched a new Task Force to help develop innovative practice models for the future of emergency medicine, including freestanding facilities, telemedicine and home-based care.

REVISITING THE DATA

A second workforce study published in *Annals of Emergency Medicine* in September 2022 indicated a higher attrition rate than in the original projections submitted. As the market continues to adjust, ACEP will monitor real-time, data-driven updates in the workforce and act as needed.

STAY UPDATED

ACEP resources, roundtable discussions with national and state chapter leaders, research, and more can be found at acep.org/workforce.



BY THE NUMBERS



5
pillars to guide ACEP's workforce initiatives

- Ensuring comprehensive and consistent EM residency training
- Protecting the unique role of emergency physicians
- Broadening emergency physician practice to meet evolving community needs
- Supporting emergency physicians and encourage rewarding practice in all communities
- Ensuring business interests do not supersede needs of educating the workforce

16
video updates on ACEP's workforce progress
acep.org/workforce-videos



8
organizations that are part of the EM Workforce Task Force that are working collaboratively to address workforce concerns

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TACKLING TOUGH ISSUES

INCREASING THE VALUE OF YOUR WORK

ACEP is the only EM organization that is part of the AMA’s Relative Value Scale Update Committee (RUC), which makes recommendations to CMS on how you are paid. We use our seat at the table to ensure your reimbursement reflects your realities.

MATCHING DOCUMENTATION TO CLINICAL REALITIES

To better reflect the unique environment of the emergency department, ACEP led efforts to advocate that “time spent” was less of a factor in documentation, ensuring that your reimbursement focuses on medical decision-making.

PROTECTING THE VALUE OF YOUR WORK

Despite a consensus recommendation from other medical specialties that failed to consider the unique value of EM, CMS leaders listened to ACEP and kept certain evaluation and management codes at their current values. This avoided a reduction in your pay.

SUPPORTING MORE MEANINGFUL COST MEASURES

ACEP led efforts to secure merit-based incentive payment system (MIPS) reporting options that are meaningful and uniquely applicable to EM. By helping develop an EM-specific cost measure, ACEP is making sure that your reimbursement aligns fairly with the actual work you perform.

LEARN MORE

Subscribe to ACEP’s regulatory blog at acep.org/regsandeggs, and get more reimbursement resources at acep.org/reimbursement.



BY THE NUMBERS*

*as of January 1, 2023

In July, ACEP learned that once-in-a-generation coding changes were coming so we developed educational resources to prepare you for the coming changes.



400

attended ACEP’s briefing to introduce impending reimbursement changes and their potential impact

30,000+

visits to ACEP’s online resources about the 2023 changes, including a detailed regulatory blog and an FAQ page



30,000

views for an ACEP Now article explaining the changes

OUR SUPPORT STRATEGY

Our new strategic plan is ACEP's **commitment to support emergency physicians first** so that you can recommit yourselves to your patients and this specialty.

ADVOCACY

ACEP fights for your rights across all landscapes and levels, including federal, state, local, facility and administrative.

MEMBER ENGAGEMENT & TRUST

ACEP makes it easy for you to find and feel connected to your little corner of our big community.

CAREER FULFILLMENT

ACEP supports you as you tackle career frustrations and seek greater career fulfillment and we promise to address the tough issues head on.

PRACTICE INNOVATION

ACEP revolutionizes acute unscheduled care, develops new career opportunities, and leads in reshaping the workforce landscape.

RESOURCES & ACCOUNTABILITY

ACEP ensures the thoughtful acquisition and management of resources to achieve our strategic goals.

A TIME TO MOVE FORWARD



We are living through a time when it feels like *everything* is being challenged: from our values and identities; to our communities and social norms; clinical practices, and, yes, our organizations. Some challenges have been large scale, some nuanced; some deliberate, some unintentional; and some have been productive, while others destructive.

The pandemic made us feel uncertain about the future, but history shows us that there will be a time for optimism. Our past pandemics have been followed by periods of medical advances and social and economic prosperity – the Renaissance, Industrial Revolution, and the Roaring 20s. What will future history books say about our generation? I believe we are on the cusp of a paradigm shift in health care full of incredible opportunity to make a better, brighter, and more fulfilling future for our patients, our College, and our specialty.

I am honored to serve our community of emergency physicians -- a group always ready to lead. We will face existing and new challenges, but there is strength in knowing you're on a team of proactive, positive problem solvers. We aren't the type to sit passively by and let things happen – we make things happen.

As we navigate the road ahead, I challenge us to move forward with camaraderie, intentionality, and innovation.

Let's talk with each other, not at each other.

Let's focus on finding common ground in difficult conversations.

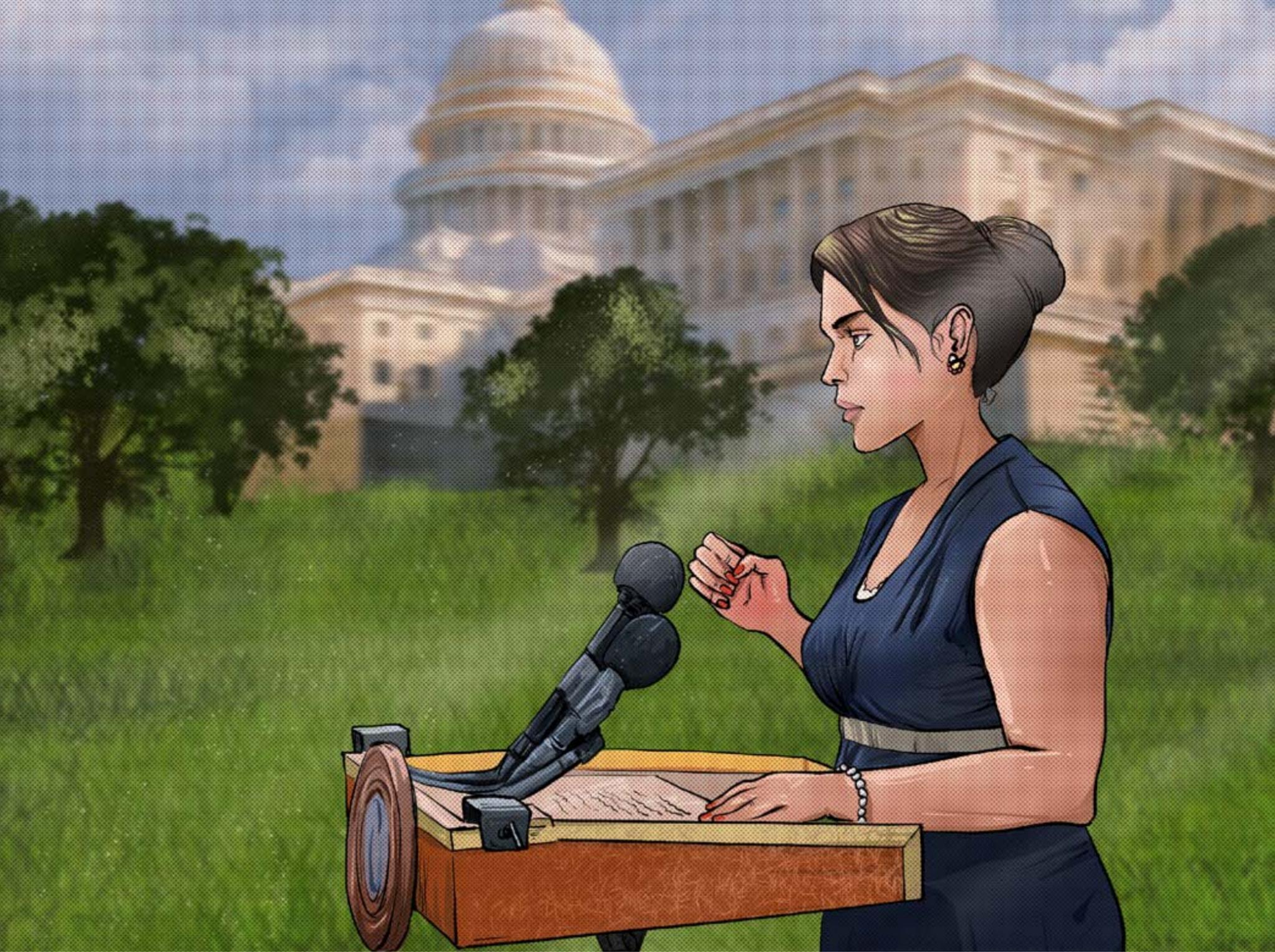
Let's be resolute as we advance our shared mission.

Let's be optimistic about the path forward, and

Let's cherish each other and our shared privilege to serve and care for others.

Sincerely,

Chris Kang, MD, FACEP
ACEP President, 2022-23



HELP IN THE TRENCHES SUPPORT THROUGH ADVOCACY

ACEP fights for your rights at all levels, including federal, state, local, facility and administrative. Despite what was truly a difficult year, the College defied the odds to get many ACEP priorities across the finish line.

DR. LORNA BREEN HEALTH CARE PROVIDER PROTECTION ACT BECOMES LAW

After nearly two years of ACEP's tireless advocacy, President Biden signed the "Dr. Lorna Breen Health Care Provider Protection Act" into law (Public Law 117-105) on March 18, 2022. This law ensures funding for grants, resources, training, national awareness campaigns, and more to help address mental health and burnout for health care professionals.

A part of the process from start to finish, ACEP will continue working with our champions to ensure additional funding can go to help address the stress, burnout, and other mental health needs of emergency physicians.

REPEALING THE X-WAIVER

ACEP has worked for years to fully eliminate the burdensome and unnecessary "X-waiver" requirement for physicians who wish to prescribe buprenorphine and other medication for opioid use disorder. The 2022 year-end package finally repealed this outdated federal requirement.

INCREASING STATE ADVOCACY EFFORTS

Emergency physicians are increasingly impacted by issues governed or regulated by states.

In 2022, ACEP:



Nearly tripled the amount of funding and resources dedicated to state government affairs.



Joined the National Conference of State Legislatures Foundation and provided support for chapter leaders in key issue states to attend.



Made its powerful grassroots tools available to chapters, enabling states to send advocacy alerts to support urgent legislative priorities.

MAKING ALTO PERMANENT

In 2018, ACEP got its "Alternatives to Opioids (ALTO) in the Emergency Department Act" signed into law as part of a larger opioid/SUD legislative package (the SUPPORT Act), to help EDs across the country establish and implement their own opioid-alternative pain treatment protocols. In 2022, ALTO became a full permanent program, authorized for five years, and its funding increased to \$8 million for 2023.

BY THE NUMBERS



Up to
\$135 million
provided by the Dr. Lorna Breen Bill to improve mental health support for health care clinicians



\$8 million
in funding for ALTO in 2023, a \$2 million increase compared to 2022



2 year
extension of Medicare telehealth flexibilities originally provided in response to COVID-19

THE NETWORK NEEDS YOU

Take your advocacy involvement up a notch this year by joining the 911 Grassroots Network, the only dedicated grassroots advocacy action network that speaks on behalf of emergency medicine. acep.org/actioncenter



HELP IN THE TRENCHES SUPPORT THROUGH COMMUNITY

ACEP is your home for career fulfillment and professional identity. Finding your personal community looks different for everyone, so ACEP offers a variety of ways to connect with your peers.

CONNECTING ONLINE

The digital world is 24/7/365 just like you, so there is always something to discuss. It's not all serious stuff, as you can see from our most engaging social media conversations from 2022:



NEW WAYS TO CONNECT

Independent EM Master Class

To serve a growing cadre of entrepreneurial emergency physicians creating new independent groups, the inaugural Independent EM Master Class held in August, in conjunction with EMBC, was a huge success — providing an unprecedented opportunity to learn how to succeed in group ownership, negotiate and manage like a boss, and take control of your own future with policies and practices that matter most to you. Learn more at acep.org/indyclass.

Diversity, Inclusion & Health Equity Committee

In June 2022, the Diversity, Inclusion & Health Equity Committee was formed to prioritize issues of equity and inclusion in emergency medicine. Learn more about how you can get involved in ACEP's committees at acep.org/committees.

Member Interest Groups

In an effort to connect members in more personal ways, ACEP launched Member Interest Groups (MIG) in 2022. The first MIG, a group focused on exploring retirement, grew so quickly that it is now an ACEP section. Who do you want to connect with? Learn how to start a group at acep.org/migs.

BY THE NUMBERS





HELP IN THE TRENCHES

CLINICAL & CAREER SUPPORT

In a specialty that's always evolving, ACEP works to get you the resources you need, when you need them. From COVID-19 to Monkeypox and the pediatric "triple-demic," it was a year that kept us on our toes.

BUILDING OPIOID ADVISORY NETWORK, SUMMARY GUIDE

This new initiative connects EM physicians combating the opioid crisis with expert advice on managing Opioid Use Disorder patients presenting in the ED, creating a protocol to initiate buprenorphine, and more.

acep.org/opioidadvisorynetwork

For a quick introduction to Opioids, Opioid Use Disorder and ED-initiated buprenorphine, check out ACEP's new Opioid Summary Guide.

acep.org/opioids

PROVIDING MPOX RESOURCES

When Monkeypox started presenting in the United States, ACEP developed the Monkeypox Field Guide and partnered with VisualDx to create the Monkeypox Emergency Medicine Project.

acep.org/monkeypox-field-guide

PUTTING CLINICAL POLICIES IN YOUR POCKET

ACEP's new app, launched in late 2022, provides more reliable access to some of our most popular website content, including clinical policies, reimbursement FAQs and advocacy alerts.

acep.org/mobile-app

BRINGING EM TOGETHER AT ACEP22

Opening keynote speakers Dr. and Lady Glaucomflecken had the audience in stitches *and* tears at ACEP22 in San Francisco! There were many highlights from a fantastic week together, including 383 courses, labs and workshops led by 176 expert faculty.



LAUNCHING THE NEW CAREER CENTER

ACEP launched a new and improved Career Center in 2022 with a more advanced search engine to connect members with the biggest network of EM job opportunities. emcareers.org

BY THE NUMBERS*

*as of December 1, 2022



300+

on-demand courses added to the Online Learning Center



1

new field guide for Monkeypox

4

new bedside tools



1

new clinical policy: Acute Heart Failure Syndromes





HELP IN THE TRENCHES

SUPPORT BEYOND DATA

ACEP's quality and research programs are improving outcomes for you and your patients. We're investing in the data that drives us forward.

DEVELOPING THE EM DATA INSTITUTE

Initially, ACEP developed the Clinical Emergency Data Registry (CEDR), the first EM specialty-wide registry. Now we're thinking even bigger! Our new EM Data Institute is poised to become the single source of truth for all emergency medicine data. Our data registry is combining with quality efforts to build the robust data sets needed to advance the practice of emergency care.

Find out more at acep.org/emdi.

HackED!

ACEP22 included a new hackathon event designed to harness the power of EM problem-solving with the technical know-how of Stanford University StEMI-X innovators.

BY THE NUMBERS*

*as of December 1, 2022

E-QUAL

Since its inception, ED participation and improvement in ACEP's Emergency Quality Program has resulted in:

- **25,000+** lives saved due to increased sepsis bundle compliance
- **30,000+** fewer patients harmed by ionizing radiation
- **\$55 million** saved from fewer imaging studies and hospitalization
- **35%** fewer opioids administered
- **23%** increase in opioid alternatives prescribed

CEDR

- **191** active practice groups
- **700+** EDs
- **16 million** billable ED visits recorded
- **37** quality measures released on CEDR's EM Dashboard



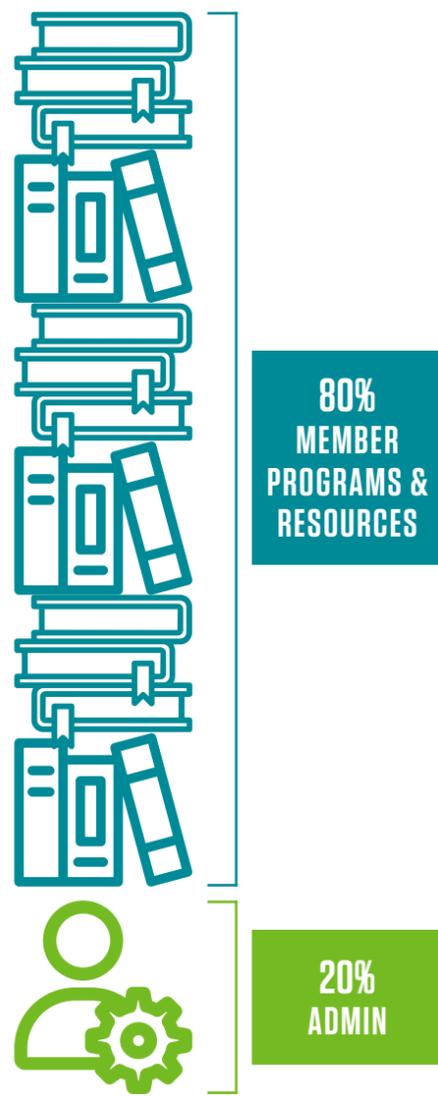
2022 ACEP RESEARCH FORUM

- **762** abstracts submitted
- **411** abstracts selected
- **41** international submissions
- **Top 5 topics:** Disaster, Infectious Disease - COVID, Quality Improvement, Ultrasound, Toxicology



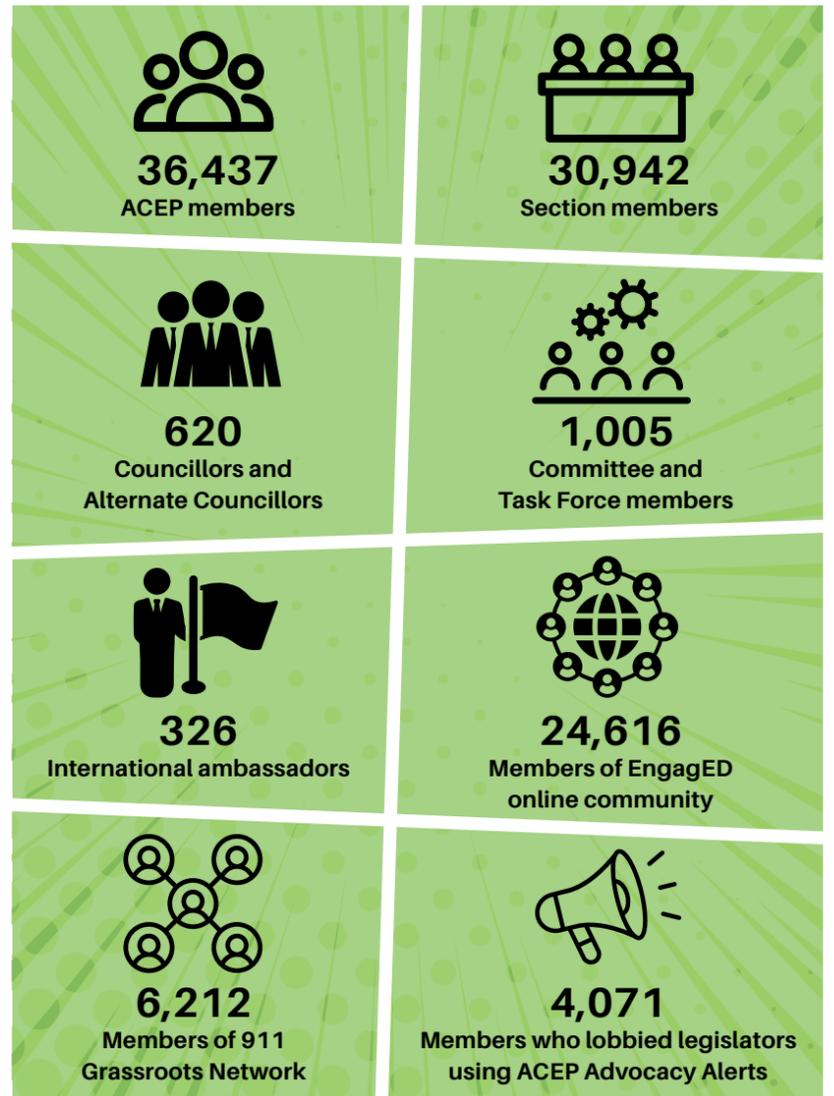
2021-22 FISCAL YEAR

HOW OUR WORK IS FUNDED WHAT YOUR DUES SUPPORT



POWERED BY OUR PEOPLE

Our volunteers are ACEP's most valuable resource



HELP IN THE TRENCHES

SUPPORTING OUR MISSION

ACEP's new strategic plan lays out an accountability strategy for our finances. Our Board of Directors, Finance Committee and staff work collaboratively to ensure ACEP's financial resources go toward valuable projects and initiatives that support our members and push our specialty forward.

PERSONALIZING AND MODERNIZING SYSTEMS

We're investing in our digital infrastructure to ensure our members have secure, efficient and personalized experiences with ACEP.

In late 2022, ACEP launched a new app that provides quick access to some of the most popular resources on acep.org, including clinical policies and reimbursement FAQs. The app's resource library will continue to grow.

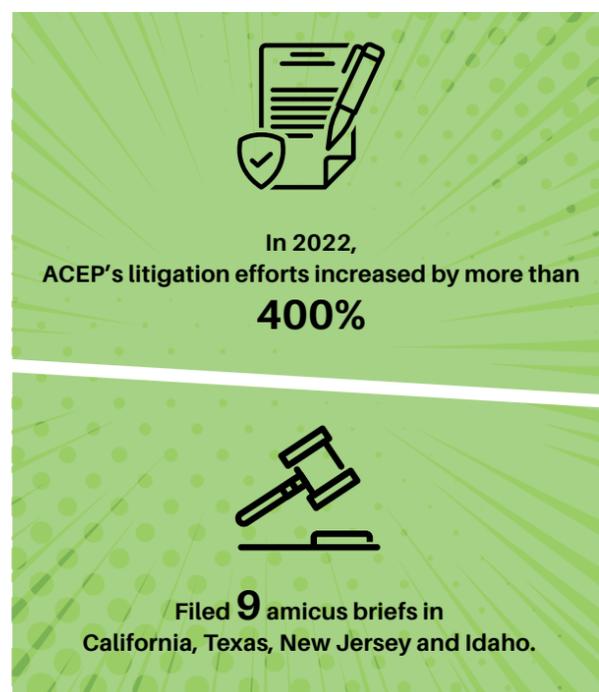
In 2023, we'll add more personalization features to our website and email newsletters, allowing members to tailor content to their interests.

EVALUATING ROI

ACEP's staff and Board used a validated assessment tool to ensure data was driving decisions about the investment of member dues into the most impactful programs.

FIGHTING FOR YOU IN COURT

ACEP fights for its members using all channels available. Our legal participation increased exponentially in 2022 as the College pushed back on issues related to the No Surprises Act, physician autonomy, reproductive health care, and more.



HOW MUCH OF ACEP'S FUNDING COMES FROM PRIVATE EQUITY?



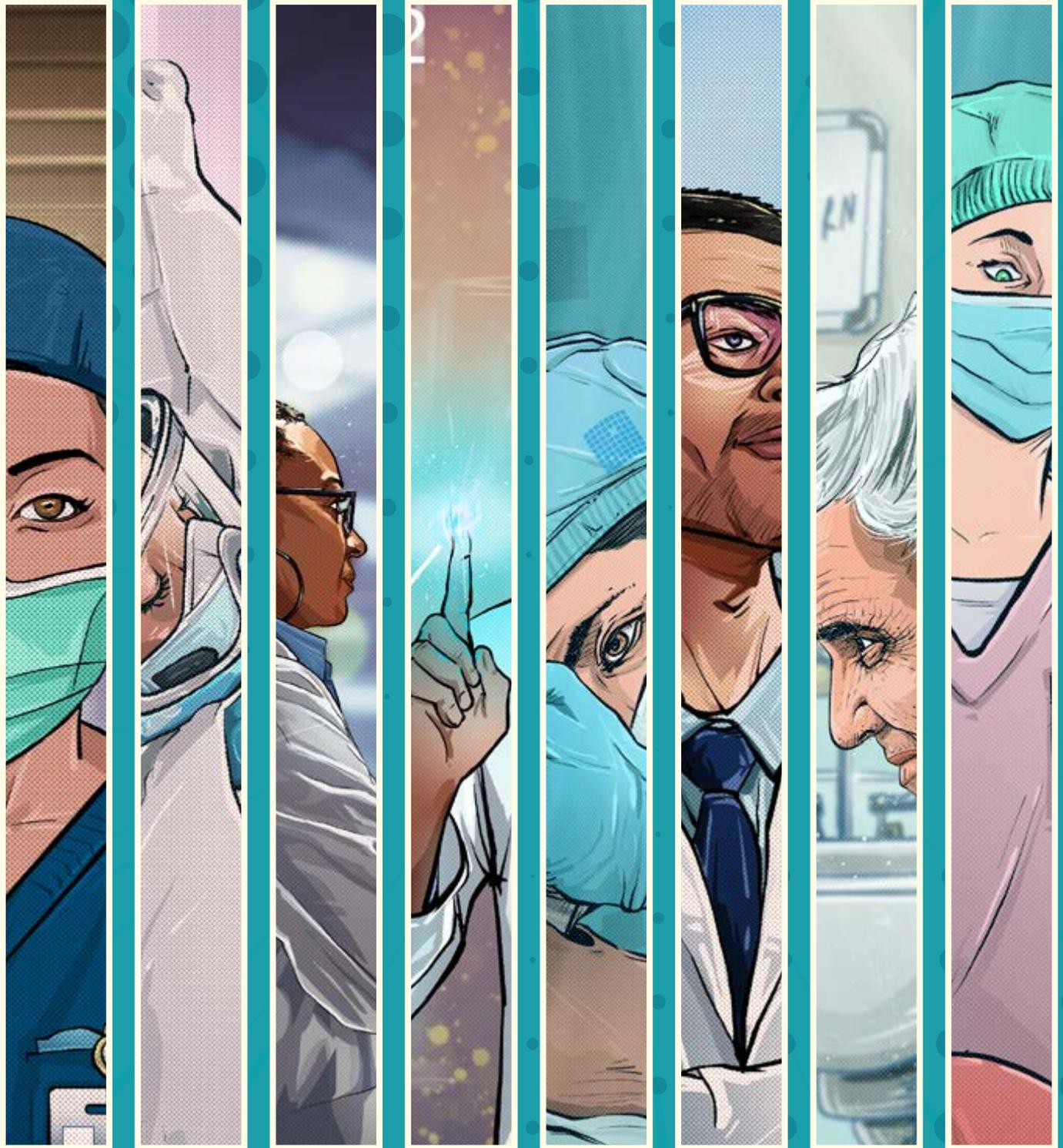
We get this question a lot, and the answer may surprise you. In the 2021-22 fiscal year, less than 1% of ACEP's total revenue came from private equity staffing companies. Diversifying how ACEP seeks non-dues revenue and shrinking PE support has been a key focus for the College since 2018.

GROWING OUR GRANT FUNDING



Diversifying revenue sources is always a priority, and this was a banner year for one alternative source in particular - grant funding. Grants have supported the development of popular member resources including E-QUAL, the Geriatric ED Accreditation program, point-of-care tools, the COVID-19 Field Guide, the EM Opioid Advisory Network and more.

YOUR SUPPORT SYSTEM



EMERGENCY MEDICINE IS A CHALLENGING SPECIALTY,
BUT THE LOAD IS LIGHTER WHEN WE CARRY IT TOGETHER.