



## **ACEP 2018 GEMS Agenda**

Monday, October 1, 2018 2:00-4:00p PST

Grand Hyatt | 3rd Floor - Seaport Tower | Hillcrest AB

Attendees: uploaded document into engagED

### **GEMS Election results:**

Appointed to 2- year term positions

- i. Chair-elect nominee Lauren Southerland (serves in 2020)
  - ii. Secretary nominee Phil Magidson (serves in 2018, post ACEP18)
  - iii. Councilor nominee Maura Kennedy (serves in 2018, post ACEP18)
  - iv. Alternate Councilor nominee Shan Liu (serves in 2018, post ACEP18)
- Kevin Biese, MD, MAT, FACEP took over as Chair of GEMS at October 1 meeting

### **Corporate Council updates:**

**New ACEP President 2018-2019:** Dr. Vidor Friedman begins his term Sept 30, 2018

### **ACEP Elections:**

#### 1. President of ACEP 2019-2020

There were two candidates for ACEP president

Jon Mark Hirshon MD, FACEP and

William P. Jaquis MD, FACEP-- ELECTED

#### 2. Board of Directors

There were 9 candidates for ACEP Board of Directors: L. Anthony Cirillo, MD, FACEP, Kathleen J. Clem, MD, FACEP, Francis L Counselman MD, FACEP, John T. (JT) Finnell MD, FACEP, Jeffrey M Goodloe, MD, FACEP, Christopher S. Kang MD, FACEP, Michael McCrea MD, FACEP, Mark S. Rosenberg DO, FACEP, Thomas J Sugarman MD, FACEP

Elected: Marc Rosenberg!!! Great friend of GEM and GEDs!!! Also, JT Finnell, Chris Kang, and Tony Cirillo

**Resolutions:** The majority of the two days was spent discussing, debating, and voting on some 37 resolutions. Of interest to geriatrics was one of note.

POLST forms. RESOLVED, that ACEP advocates and assists chapters for broad recognition of POLST, including the use of nationally recognized, standardized POLST forms: and be it further

RESOLVED, That ACEP supports legislation where states recognize and honor POLST forms from other states; and be it further

RESOLVED, That ACEP encourages appropriate stakeholders (e.g. medical record systems, health information exchanges) to incorporate POLST into their products thus encouraging widespread national availability and adoption.

### **Announcements**

**1. ACEP Executive Director, Dean Wilkerson announces GEDA accreditation. He discussed they will soon start marketing GEDA as a core product with the full support of ACEP**

**2. ACEP is considering opening membership to SEMPA and NPs/APP's**

This is a great opportunity for Geriatric Section members to foster increasing interdisciplinary cooperation in care of Elder Patients.

**3. Journals:** Annals rejects 85% of submissions ACEP is starting a second journal to boost publications from its sections, chapters, work groups. This includes white papers and guidelines of interest. Predicted start date late 2019.

### **Items of interest**

#### **Federal Advisory Committee Recommends ACEP-Developed Alternative Payment Model to HHS**

On September 6, the Physician-Focused Payment Model Technical Advisory Committee (PTAC) voted in favor of recommending ACEP's proposed alternative payment model (APM), the [Acute Unscheduled Care Model \(AUCM\)](#), to the Secretary of the Department of Health and Human Services (HHS) for full implementation. ACEP's model joins only 4 others of the 26 submitted to the PTAC to date that have been recommended for full implementation. The voluntary model aims to improve quality and reduce costs in Medicare by allowing emergency physicians to accept some financial risk for the decisions they make around discharges for certain episodes of acute unscheduled care, and ACEP believes that the AUCM has the potential to transform the way emergency care is delivered. While the PTAC recommendation is a victory worth celebrating for emergency medicine, there is still a long road ahead before the model becomes operational. With PTAC's endorsement, ACEP will begin discussions with the Centers for Medicare & Medicaid Services (CMS) about implementation.

#### **Price transparency**

**ACEP** led an effort to convene and draft a group response to the CMS request for information on price transparency included in the annual Inpatient Prospective Payment System proposed rule that specifically asked for input on out-of-network and surprise bills including those from emergency care. Eleven other medical associations and organization participated and [signed onto the letter](#) in addition to ACEP.

- ACEP participated by invitation in a roundtable discussion on health care price transparency initiated by Senators Bill Cassidy (R-LA), Michael Bennet (D-CO), Chuck Grassley (R-IA), Tom Carper (D-DE), Todd Young (R-IN), and Claire McCaskill (D-MO). ACEP was one of only three physician associations in attendance (joining the AMA and the American College of Surgeons)—among the other groups participating were the American Hospital Association, insurers and brokers, and patient advocates.
- ACEP was the only medical association invited to participate in a meeting on price transparency at the Department of Health and Human Services--Demetrius Kouzouka, Principal Deputy Administrator of CMS and Director of the Center for Medicare, attended the majority of the session.

### **Insurance denial and ACEP lawsuit**

- ACEP contributed information to, and coordinated with, Sen. Claire McCaskill (D-MO) on her [report detailing Anthem's retroactive denials](#) of emergency care coverage that was released late last month.
- ACEP and the Medical Association of Georgia (MAG) filed suit against Anthem's Blue Cross Blue Shield of Georgia in federal court in an effort to compel the insurance giant to rescind its controversial and dangerous emergency care policy that retroactively denies coverage for emergency patients. To read the lawsuit, visit [newsroom.acep.org](http://newsroom.acep.org).

## **DRUG SHORTAGES 1 2 3**

### **1. ACEP Participates in Drug Shortage Summit**

On September 20, ACEP President Paul Kivela, MD, MBA, FACEP, participated in a drug shortage summit hosted by the American Society of Anesthesiologists, the American Hospital Association, and the American Society of Health-System Pharmacies. The summit focused on the national security aspect of drug shortages and ways to improve the resilience of the nation's health care infrastructure. Many of the speakers were federal employees representing HHS, ASPR, FDA, CDC, and the Defense Logistics Agency (DLA) who engaged the attendees in discussions on how their programs could work better to facilitate patient care, improve transparency and communications, and more effectively utilize the supply chain capacity.

### **2. ACEP Participates in NASEM Drug Shortage Workshop**

On September 6, ACEP Board member Aisha Liferidge, MD, FACEP, participated in a two-day workshop hosted by the National Academies of Sciences, Engineering, and Medicine (NASEM) on medical product shortages during disasters and discussed the unique challenges facing emergency physicians and their patients during these crises. The workshop was planned after recent disasters and public health emergencies, such as hurricanes Harvey, Irma, and Maria and the Ebola outbreak, highlighted the impact that shortages of commonly used medical supplies, equipment, and pharmaceuticals had on health care delivery and emergency response. Panels explored opportunities to lessen the effects of medical product shortages through information sharing, improved supply-chain infrastructure, and enhanced collaboration among public, private, and non-profit stakeholders. The United States Assistant Secretary of Preparedness & Response, Dr. Robert Kadlec, and key members of his staff were in attendance.

**3.** The Congressional drug shortage letter to FDA Commissioner Scott Gottlieb that ACEP developed and led, and ACEP LAC attendees asked their members of Congress to sign onto, closed with 107 House representatives and 31 Senators signed on—over a quarter of the entire Congress. ACEP also worked with the [New York Times on a story](#) it ran on the drug shortage issue, and referenced ACEP’s drug shortage survey as well as the Congressional letter.

## **OPIOIDS 1 2 3**

### **1. ACEP-led Provision Boosts Prescription Drug Monitoring Programs**

An ACEP-developed provision that requires the Department of Defense to share controlled substance prescribing information of TRICARE beneficiaries with State Prescription Drug Monitoring Programs was successfully passed into law as part of H.R.5515, the John S. McCain National Defense Authorization Act for Fiscal Year 2019. ACEP staff worked closely with Representative Mike Turner (D-OH) to develop this legislative effort and ensure its inclusion in this year’s defense authorization bill.

### **2. ACEP Contributes to Development of Fentanyl Safety Video for First Responders Released by Federal Workgroup**

The Department of Justice (DOJ) hosted a White House event last month to announce the release of a safety video for first responders called [Fentanyl: The Real Deal](#). The DOJ worked with nine other Federal agencies as well as 24 stakeholder groups, including ACEP, to produce [written guidance](#) and this video that enforces the guidance. The guidance and the video include the following science-based recommendations to help first responders protect themselves when the presence of fentanyl is suspected or encountered:

- Actions first responders can take to protect themselves from exposure
- Actions first responders can take when exposure occurs
- Actions first responders can take when they or their partners exhibit signs of opioid intoxication

### **3. Senate Passes Opioid Package**

On September 17, the Senate voted 99-1 to pass a legislative package on opioids that includes two ACEP-developed bills to expand ED-focused tools for addressing the opioid epidemic. Since they were also part of the opioid package passed by the House of Representatives in July, the two ED-focused bills are now well-positioned to being passed into law later this Fall once Congress is able to reconcile the House and Senate versions into a final bill.

### **ACEP & The American College of Physicians**

ACEP President Dr. Paul Kivela led a teleconference discussion this month with the American College of Physicians, on ACEP initiatives involving physician wellness, the opioid crisis, end-of-life issues, and how we could potentially work together to create greater cohesion. More on this as work continues.

### **ACEP Teams Up To Improve ED Sickle Cell Disease Care**

Sickle Cell Care Coalition (EDSC3) hosted a one-day leadership summit on Thursday, August 16th, 2018

at the American Society of Hematology's headquarters in Washington, D.C. The purpose of this summit was to identify concrete and specific actions to improve care in the emergency department for children and adults living with sickle cell disease (SCD). A variety of leaders from key organizations discussed current initiatives and how we can collaborate to effectively and efficiently disseminate best practices to improve the emergency department care for children and adults with SCD. The keynote address was presented by ADM Brett P. Giroir, Assistant Secretary for Health at the U.S. Department of Health and Human Services (HHS).

### **National Suicide Prevention Week**

September 10-16 ACEP will be taking part in National Suicide Prevention Week with a week-long campaign focusing on the multi-layered issues with mental health care in the ED. We'll share and discuss treatment resources for civilians and veterans, including a new bedside tool, and barriers to psychiatric care for our patients.

We close out the week on September 17 by participating in the Council of Emergency Medicine Residency Directors (CORD)'s National Physician Suicide Awareness Day, where we focus on Doc-to-Doc resources for medical students, residents, and Attendings, and advocate for the removal of barriers to psychiatric care for physicians.

Join the conversation, remove the stigma. Let's realize #VisionZero. Follow us on Twitter (@ACEPnow) and Facebook (Facebook.com/ACEPfan).

### **Continuing ACEP Advocacy for Physicians and Patients:**

- ACEP was invited by AHIP, a trade association for commercial insurers, to participate in a meeting of payers seeking input on expanding use of non-opioid pain management. Other physician groups invited to participate were AMA, ACP, and AAFP.
- ACEP participated by invitation in a convening by the White House's Office of National Drug Control & Policy on efforts to address the opioid epidemic.
- ACEP attended multiple listening sessions with the Centers for Medicare & Medicaid Services (CMS) to discuss proposals related to the CY 2019 Physician Fee Schedule and Quality Payment Program Proposed Rule.
- ACEP, AAEM, ACOEP, AOA, ACMT, CORD, EMRA, and SAEM join together to support the introduction of federal legislation to protect emergency physicians' right to due process in the workplace if they are employed by a third party. The bipartisan bill, introduced by Rep. Chris Collins (R-NY) and Rep. Raul Ruiz (D-CA), would preserve the ability for emergency physicians to strongly advocate for patients by avoiding the mandatory waiver of due process rights which many emergency physicians are forced to comply with as a condition of employment. See more about this at [newsroom.acep.org](http://newsroom.acep.org).

### **ACEP Works with Other Medical Societies for Patient Care**

- ACEP Senior Leadership recently attended the American College of Surgeons Committee on Trauma (ACS COT) meeting. The group discussed achieving greater involvement in the Trauma Center Verification Program. Also discussed was a revision of the REBOA statement.

- ACEP participated in a small meeting of several medical specialty associations with America's Health Insurance Plans (AHIP) and several private payers to discuss how to expand access to non-opioid treatments and other pain management strategies to address chronic low back pain.
- As part of ACEP's continuing Leader Visit Program, Drs. Jay Kaplan (University Medical Center – New Orleans), Abhi Mehrotra (University of North Carolina), and Scott Zeller (Vituity) met with several key members of the House and Senate on Tuesday to discuss innovative approaches to treating patients with emergency mental health conditions that provide access to more timely, appropriate care for emergency psychiatric patients and have been shown to reduce psychiatric boarding times in the ED, as well as hospital inpatient stays. The Members of Congress and congressional offices they met with are: Rep. Mike Burgess (R-TX), Rep. Janet Napolitano (D-CA), Sen. Lamar Alexander (R-TN), Dr. Raul Ruiz (D-CA), Sen. Bill Cassidy (R-LA), and Sen. Thom Tillis (R-NC).
- ACEP and senior leadership of Centers for Clinical Standards and Quality (CCSQ) to meet to discuss ACEP's Quality Measures and ongoing support for CEDR. This meeting was very encouraging where CMS provided collaboration support and guidance for measure harmonization and validation for 2018 approved measures and 2019 proposed measures. CMS agreed to provide 2 speakers for ACEP's July webinar on Quality and CEDR.

**ACEP Facts:**

Announcement of >38,000 ACEP members, 421 councilors,

Sections = 39 with 2 now in formation and 33,909 members in at least one section

First office = trunk of John Weinstein's car

There were 129 people in 1st meeting in 1969 today 7,301.

Moment of silence for John Rupke

Recognition to: Pam Benson first female EM resident and ACEP member

**GEDA**

GED accreditation data updates were provided by Kevin Biese

**GEDA accredited:**

- 4 level 1s
- 10 level 3s

**Apps on next BoG vote (Oct. 1):**

- 6 level 3s
- 3 level 2s
- 1 level 1

**GEDA Pre-conference attendees: 65**

- Sites attending: 40

### **GEDA Full Interest List: 108**

- Applications in process, but not submitted: 42
- Interested, but application not started: 66 (Majority of the 39 attending the pre-conference are on the interest list)

#### **Guest speaker**

Ronald Stewart, OC, ONS, MD, FACEP, presented on the Evolution of EM.

#### **Networking**

The networking session went for roughly 20 minutes and gave attendees the chance to chat with other geriatric physicians.

#### **GEMS Sponsor**

Igal Ladabaum from Hospi Corporation presented for 15 minutes on Rectal administration of medications and fluids as a first line alternative.

Meeting adjourned at 4:00