

Practice Innovations

The Future of Emergency Medicine







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For Discussion Today

- Factors Impacting the Practice of Emergency Medicine
- Background on the New ACEP Practice Innovation Task Force
- Alternative Practice Models and Career Opportunities for Emergency Physicians
- Your Input!



Factors Impacting the Practice of Emergency Medicine



Lots of Factors Affecting Emergency Medicine!

ACEP 2021 Workforce Study

 Conclusion: There will likely be an oversupply of emergency physicians by 2030.

Impact of Being on Frontlines During COVID-19 Pandemic

- Significant Burnout
- Focus on Wellness
- Current State of Affairs in Emergency Departments
 - Staff Shortages
 - Overcrowding/Boarding
 - Workplace Violence

Use of Alternative Treatment Modalities

- Telehealth
- Community Paramedicine
- "Hospital at Home"
- Shift to Value-based Care and APMs



New ACEP Practice Innovation Task Force



Background on New Task Force

• ACEP Initiative: Develop new practice models and alternative career options that emergency physicians can pursue going forward.

 Task Force Commissioned by ACEP President, Dr. Gillian Schmitz, and led by Dr. Jesse Pines

Goal of Task Force: Come up with a comprehensive list of fulfilling career opportunities for emergency physicians who wish to use their skills outside of the traditional four walls of the emergency department.



First Task of Task Force: Develop List of Career Opportunities

Established Clinical

Emerging Clinical

Non-Clinical



Alternative Practice Models and Career Opportunities for Emergency Physicians



Established Clinical (List still in Development)

Academic	Non-Academic	Specialist	Specialist Continued
Academic Emergency		Pediatric Emergency	
Physician	Community Physician	Physician	Toxicologist
	Rural Physician	EMS Medical Director	Hyperbaric Center Physician
	Urgent Care Physician	Ultrasound Director/Provider	Geriatric Medicine Physician
	Concierge Physician	Sports Medicine Physician	Global Health Physician
		Event Medicine Physician	Palliative Physician
		Emergency Management	
		Physician	Occupational Medicine
		Aeromedical Medical Director	
		Wilderness Physician	
		Critical Care Physician	



Emerging Clinical (List still in Development)

Existing	Evolving
Proceduralist (General)	Acute Unscheduled Telehealth
Proceduralist (Airway, Code Team Member)	Home Care Physician
Care Transition Specialist (Post-acute Care)	Community Paramedicine Physician
Wound Care Physician	Emergency Psychiatrist
Pain Medicine Physician	Forensics Consultant
Addiction Physician	
Observation Medicine Physician (High Intensity- short Stay Unit)	
Aerospace Physician	



Established Clinical (List still in Development)

Academic	Non-Academic	Emerging Non-Clinical
Academic Researcher	Administrator	Entrepreneur
Medical Educator	Pharmaceutical Consultant	Policy Advocate
Residency Leader	Insurance Utilization Reviewer	Informatics Specialist Innovation Specialist For Hospital or
Simulation Specialist	Legal Case Reviewer	Physician Group
		Consultant
		Practice Owner/Practice Acquisition
		Scribe Service Leadership
		State Medical Board
		Physician Recruiter



Challenges:

- Lack of Reimbursement/ Funding
- Competition from Other Specialist Physicians and Non-Physician Practitioners
- Limited Positions
- Need for Additional Training, Certification, Education
- Unpredictability of Labor Market
- Uncertainty about Financial Security and Clinical Need for Position
- Regulatory/Legal Barriers



Possible Actions Moving Forward

- Actively market emergency physicians seeking non-clinical positions
- Create new payment / delivery models through regulatory changes
 - Rural Emergency Care (e.g., Remote Supervision Model)
 - Community Paramedicine
 - Telehealth
 - Home Based Care Services
 - Psychiatry And Behavioral Health

- Create and market short-term programs to retrain emergency physicians
 - Wound Care/Hyperbaric Medicine
 - Pain Medicine
 - Addiction Medicine
- Fund research that shows the value of emergency physicians outside of the Emergency Department
 - Urgent Care
 - Telehealth
 - Home-based Care



Possible Impact on You

 New staffing models and new personnel will require new workflows and new technology.

 Hospital systems must adapt to administrative/documentation changes and modifications to traditional roles. New coding rules as well.

 New subspecialties, like wound care, proceduralists, and hyperbolics, will create new markets.





Questions for Discussion

•What opportunities do you see going forward? How do we address any challenges we may face? •What are the ways we can partner together on creating innovative approaches to providing emergency care and meeting the needs of patients? •What other feedback do you have on ACEP's Practice Innovation work?



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