Membership Committee

1. Increase regular/life membership by 2% and total membership (including candidate members) by 3%.

Outcome: Total membership increased by 4.73% over the prior year and regular/life increased 2.5%.

2. Continue to develop innovative national and chapter membership recruitment and retention tools, communications, and strategies focused on the emergency physician’s life cycle/career and differing generational needs, specifically late career physicians, transitioning members, and board certified physicians, to include end of career transitioning tools, networking opportunities for mid-career physicians, and resources to aid in work-life balance for mid- and late-career members.

Outcome: The committee continues to work with staff to ensure appropriate and useful recruitment methods are used and tools are available to members. The EM Futures tools developed by the Texas Chapter have been utilized extensively. The committee also worked with staff to ensure young members take advantage of section membership. The committee reviewed membership surveys to determine member interest and provide information based on those interests. Additional resources were identified to assist members in work/life balance and in late career.

Changes to the Maintenance of Certification area of the ACEP website were made last year and no additional changes were identified by the committee.

The committee also:
- Recommended mentorship strategies for chapters and sections.
- Worked with staff to enhance Mobile ACEP.
- Suggested discussion forums for the ACEP website.
- Suggested ACEPNow podcasts.
- Suggested developing a “Tech 101” course for older members.
- Recommended creating additional online CME for early and mid-career members.
- Recommended creating aged-based e-mail messages.
- Reviewed two video vignettes for older members. Other vignettes are in development.
- The Board approved the committee’s recommendation in April 2016 to change the billing structure for transitioning residents by extending the grace period from four months to six months.

3. Create a value-added information kit for Medical Directors, department chairs, and other decision makers regarding the allocation of funds for ACEP membership and educational opportunities.

Outcome: Work on this objective will continue in 2016-17.

4. Develop ways to demonstrate the value of membership and educate physicians on the reasons for joining ACEP and maintaining membership.

Outcome: This objective was combined with objective two. See comments for objective two.

5. Review the benefits and requirements for EM physician group participation in the 100% club and suggest program improvements. Identify value-added for groups and physicians employed by groups while dispelling negative connotations regarding ACEP’s involvement with contract groups.

Outcome: The committee reviewed current processes and agreed they were appropriate and did not need enhancements at this time. Changes in group demographics will require a larger emphasis on this objective in 2016-17 with the expectations that additional incentives will be needed to entire groups to pay for ACEP membership.
6. Evaluate the success of the EM Futures program for those chapters who have committed to the process, develop information to help smaller chapters ease into the process, and continue to expand the program to more geographical regions.

**Outcome:** A subcommittee worked diligently with the designers of EM Futures program to determine if enhancements were necessary. An audio presentation was developed for inclusion in the chapter web portal. The committee concurred that the work on this objective has been accomplished.

7. Implement and evaluate results of recommendations for increased international presence in membership recruitment.

**Outcome:** The committee monitored international membership activity and recommendations were provided to the International Emergency Medicine Section.

8. Increase the number of ACEP Fellows through retention and increased applications.

**Outcome:** Special recruitment efforts continue for new fellows and to members who have recertified. Though we have been unable to secure lists of those board certified through AOBEM, Staff continue to work on recruiting efforts to osteopathic physician members who are board certified in emergency medicine.

9. Investigate the benefit and consequences of reducing membership rates for all EM fellows in training, including new residency graduates and active members returning to training.

**Outcome:** The committee determined this objective should be postponed to a future year since the restructuring Bylaws amendment was adopted in 2014 and the Board’s approval in April 2016 to extend the grace period from four months to six months.