A Sample of EMAF Activities 2011 – Present

* Supported Washington ACEP’s efforts to preserve Medicaid access to emergency care with a total commitment of $100,000 by EMAF.
* Retained prominent consultants including Hart Health Strategies and Health Policy Alternatives
* Provided funding of $75,000 for development of and data modeling for the first EM-specific Alternative Payment Model, the Acute Unscheduled Care Model by ACEP’s APM Task Force.
  + Model is complete and scheduled to go before the PTAC, which can recommend it to the HHS Secretary as a MACRA Advanced Alternative Payment Model
* Facilitated data sharing on Anthem denials that supported advocacy and PR efforts to protect the prudent layperson standard
  + On PR side, data led to NY Times running a story on the issue that emphasized the significant increase in denials caused by Anthem
* Provided financial support for ACEP’s lawsuit filed against the U.S. Departments of Health and Human Services, Labor, and Treasury alleging a regulation issued under the Affordable Care Act failed to ensure reasonable payment to physicians for out-of-network emergency services.
  + ACEP’s motion for summary judgment was partially granted, with the Court noting CMS had “all but ignored” concerns raised by stakeholders, and directing the department to respond.
  + Discovery phase resulted in gaining access to the valuable NORC report commissioned by the Administration to compare existing transparent database options.
* Funded successful challenge to McKesson’s software that inappropriately bundles the professional component of FAST ultrasound exams with payments for E /M services.
  + Effective April 1, 2013, the bundling of CPT 76705 with ED E/M codes were removed from McKesson’s Knowledge Base.
* Funded the Rand study on multi-year trends in hospitalization, “The Evolving Role of Emergency Departments in the United States,” released on May 20, 2013.
  + ACEP’s public relations department coordinated a public advocacy campaign timed with the report’s release.
* In coordination with the Emergency Medicine Foundation, EMAF provided startup funding for development of the EMF Health Policy Senior Advisor Panel and Health Policy Research Fellowship Program.
* EMAF also made an important contribution to ACEP’s development, validation and maintenance of quality metrics of $100,000. This contribution comes on top of the generous contribution from the American Board of Emergency Medicine and ACEP’s own substantial funding of approximately $300,000.
* Met with Health Affairs to discuss a special publication on EM issues. Support and input from EMAF advanced EM priorities, contributed $25,000 toward publication expenses.
* Commissioned a study through the EMF funded scholars program, “Examining the evolving role of the Emergency Department in acute ambulatory services for Medicare beneficiaries: Implications for care coordination”