Health Policy

#ACEP 4U: Advocate for Change!
Faculty: Rebecca B. Parker, MD, FACEP; Ryan Stanton, MD, FACEP; Laura Wooster, MPH

The solution to burnout is CHANGE! Emergency physicians are the ONLY members of the US Healthcare system who work 24-7 caring for any patient with an acute need, regardless of their ability to pay. You know this, but do your legislators? If not, they should, as they have the power to enact the changes we need! Attend this course to discuss key advocacy issues that can effect change for emergency physicians & patients at the state & federal levels. Voice your ideas, concerns, and questions. Leave the course with an action plan to develop a relationship with your legislators & advance the critical advocacy agenda for emergency medicine physicians.

- Explain and justify the importance of advocacy for emergency physicians.
- Discuss key current advocacy issues brought forth by the panel and the audience & how they may be approached from a physician- and patient-centered perspective.
- Identify opportunities to increase involvement in the political advocacy work of the college; include a segment demonstrating legislator contact in which your audience can participate.

#Insurance Fail: Surprise Billing Update 2020
Faculty: James C. Mitchiner, MD, MPH, FACEP

The issues surrounding the out of network/balance billing debates have engulfed clinicians, politicians & consumers from DC to Olympia. The increasingly narrow networks offered by the fewer & fewer health plans in the ACA have exacerbated patient access issues along with the proliferation of high deductible health plans where “covered services” used to mean insurance reimbursement & now means patient financial responsibility. The discussion will highlight issues & strategies used to address existing & potential legislation effecting emergency physicians and patients as well as an update on pending or enacted federal legislation.

- Analyze out-of-network state & federal legislation, including strengths, weaknesses, opportunities & threats.
- Discuss successful governmental & public relations strategies to achieve “win-win” solutions for patients & physicians.
- Review information from recent legal action/judgments.
25 Ways in 50 Minutes: How to Shape Healthcare Policy
Faculty: Aisha T. Terry, MD, MPH, FACEP

As legislators & regulators increasingly impact our practice of emergency medicine, it is essential that we have a strong voice as healthcare policy is shaped. How do you rise above the noise in our state & national capitols so your view is heard? Learn key steps to hone effective messages, successfully communicate, & strengthen your impact.

- Recognize what makes a message effectively resonate with legislators & regulators.
- Define key communication channels for you to convey your message.

Alternative Payment Models: Exploring the Reimbursement Frontier
Faculty: Jennifer L. Wiler, MD, MBA, FACEP

Does your group meet the CMS’s APM requirements? If so, you’re excused from MIPS and eligible for a five percent bonus! Gear up to understand your group’s options. The speaker will discuss the latest developments in APMs for emergency physicians & how your practice may fit into an APM in the future.

- Describe the current state of alternative payment models including participation of emergency physicians.
- Analyze the role of emergency medicine in future alternative payment models as they mature; include a discussion of AUCM.
- Explain the likely impact of alternative payments models on emergency physicians in varied practice settings.

Annual Census Ten Million: Emergency Medicine in the State Capital (Colin C. Rorrie Lecture)
Faculty: Joneigh S. Khaldun, MD, FACEP

As the Chief Deputy for Health in the Michigan Department of Health and Human Services (MDHHS) and a board-certified practicing emergency physician at Henry Ford Hospital, Dr. Joneigh Khaldun enacts Michigan’s health agenda through collaborative partnerships, evidence-based programs, and a social justice lens. Prior to her position in Detroit, she served as Chief Medical Officer of the Baltimore City Health Department, Director of the Center for Injury Prevention and Control at George Washington University, and in the Obama administration’s Office of Health Reform. The discussion will highlight the intersection of her experience as a leader in public health and challenges faced by emergency physicians at the bedside, including innovation programs to address social disparities affecting emergency care, violence prevention, and the opiate crisis.

- Describe trends in US public health that challenge our current thinking on socio-economic, gender, racial/ethnic and other social disparities.
- Explore policy changes that have the potential to improve outcomes of emergency care.
Climate Fever: Earth’s Vital Signs are Changing Emergency Medicine Practice
Faculty: Renee N. Salas, MD, MPH
Climate change influences human health and disease. Expectations for emergency care as a result of increasing heat, decreasing air and water quality, changes in vector ecology, increasing allergens, and severe weather related injuries will be discussed. What can we do to prepare for these changes? Is there a way we can mitigate these changes or are we too late?
- Discuss the impact of climate change on human health.
- Explore recommended changes to emergency care to address the impact of climate change on human health.

Dallas Buyer’s Club: The Intersection of State-Based Marijuana Policy and Emergency Care
Faculty: Todd Phillips, MD, FACEP
This course will provide an outlook from states that have legalized or are considering legalization of marijuana. It will also address the effect of legalization on emergency care & public health as well as explore positive & negative opinions regarding an organized emergency medicine position on legalization.
- Analyze outcomes & lessons learned from states who have legalized medical and/or recreational marijuana use.
- Discuss the pros & cons of organized emergency medicine’s position on legalization of recreational marijuana use.

Great Debate: Is Medicare for All Ready for Prime Time?
Faculty: James C. Mitchiner, MD, MPH, FACEP; Rebecca B. Parker, MD, FACEP
No healthcare policy idea has been more controversial than “Medicare for All.” With the November election around the corner, several progressive candidates have voiced support for a single-payer health care system, while critics argue such policies would be unaffordable. However, as the political rhetoric heats up, the terms of debate are often unclear. What’s the difference between Medicare-for-all and Medicare-for-some? Is there a difference between Medicare for All and single payer? What would such programs mean for physicians and patients in the US health care system?
- Define Medicare-for-All.
- Describe how Medicare-for-All would be financed.
- List Advantages and Disadvantages of Medicare-for-All.
International Medicine Migrating Your Way  
Faculty: Regan Marsh, MD

Climate change & global warming is bringing tropical diseases to the US — no longer just through returning travelers, but now with epidemiological spread of disease outside the conventional “tropics.” Emergency physicians must be prepared to diagnose & manage these neglected tropical diseases, which are increasingly presenting to our EDs. The speaker will offer training on conditions like Ebola, Zika, Chikungunya, Dengue & Chagas so that you can be prepared.

- Discuss the shifting epidemiology of key vector-borne, neglected tropical diseases likely to be seen in the US.
- Identify fundamentals of recognition & treatment of Ebola, Zika, Chikungunya, dengue, & Chagas, which have seen domestic transmission within the US.
- Explain testing & reporting requirements, as part of required public health surveillance within the ED.
- Identify vector-borne, Zika, Chikungunya, dengue, and Chagas, and public health.

Narcotics to Naloxone - Effective EM Responses to the Opioid Crisis: FAST FACTS  
Faculty: Ryan Stanton, MD, FACEP; Matthew D. Zuckerman, MD, FACEP

Attend this course to learn the latest & greatest challenges & potential solutions to the opioid crisis in rapid fashion from a panel of experts. Updates on effective drug monitoring programs, state legislative initiatives, emergency department based opioid reduction policies, Narcan distribution, & MAT will be covered in rapid fire fashion through a series of FAST FACTS talks, followed by Q&A.

- Discuss effective initiatives for appropriate opioid prescribing, including prescription drug monitoring programs, guidelines, & prescriber feedback.
- Review emergency department ALTO examples.
- Discuss innovative programs for harm reduction in the ED, including needle-exchanges/supervised injection facilities, Narcan distribution, and MAT.

Report Your MIPS or Your Paycheck Dips: Emergency Physician Compensation Update 2020  
Faculty: Michael A. Granovsky, MD, FACEP

Physicians caring for America’s 60 million Medicare patients are receiving payments based on quality of care over quantity of care via CMS’s Quality Payment Program. The speaker will review MIPS, the value based payment modifier, reporting options including CEDAR, recent Quality Payment Program updates and the expectation for your bottom line.

- Review reporting strategies for & potential barriers to successfully meeting the MIPS reporting requirements.
- Develop strategies to ensure your individual & group financial success under MIPS.
Thinking Twice About Transfusions: When TACOs & TRALIs Turn Treatment Into Tragedy
Faculty: Alisa V. Wray, MD, FACEP

Over 85 million red blood cell units are transfused worldwide each year & up to 8 percent of cases are complicated by transfusion reactions. While virus transmission is the most widely publicized risk of blood transfusion, complications such as transfusion associated circulatory overload (TACO) & transfusion related acute lung injury (TRALI) occur much more frequently & cause a higher rate of mortality. During this case-based discussion the speaker will highlight six complications of transfusion, focusing on the diagnosis, prevention, & management.

- Identify the indications for blood transfusion in acute & chronic anemia.
- List the six most common complications of blood transfusion & discuss their management.
- Discuss the indications for ordering leukoreduced, washed, & irradiated blood products.

Too Hot, Too Cold, or Just Right: Would Goldilocks Practice EM in Your State?
Faculty: TBA

Malpractice reform, often known as medical tort reform, has been tackled in a number of states, but attempts at passing similar regulations on the federal level have failed since the 1970s. As of 2016, thirty-three states have imposed caps on any damages sustained in medical malpractice lawsuits. Is your state a physician friendly practice state? If not, what action should you and your physician colleagues take to protect yourself and your patients' access to care?

- Define medical malpractice tort reform.
- Explore effects of tort reform; address cost malpractice insurance, cost of healthcare, access to care.
- Provide examples of actions physicians and physician organizations can take to enact or further medical malpractice reform on a state basis.

YOU Need to be an Advocate for Patients with Mental Illness
Faculty: L. Anthony Cirillo, MD, FACEP

There are just 14 psychiatric beds per every 100,000 people in the US, a 95 percent decline from the 1950s; however, the problem may not be the lack of such facilities but how little has been done to fill the mental healthcare void. This session will explore how federal & state health policy & insurance regulations have affected current mental healthcare availability. The speaker will discuss federal & state-based policy changes we can champion to improve mental healthcare for our patients & decrease ED boarding of psychiatric patients.

- Examine the effects current federal health policy & insurance regulations have affected current mental healthcare availability.
- Explore federal & state-based policy changes that national ACEP & state based chapters can champion to improve mental healthcare for our patients & decrease ED boarding of psychiatric patients.