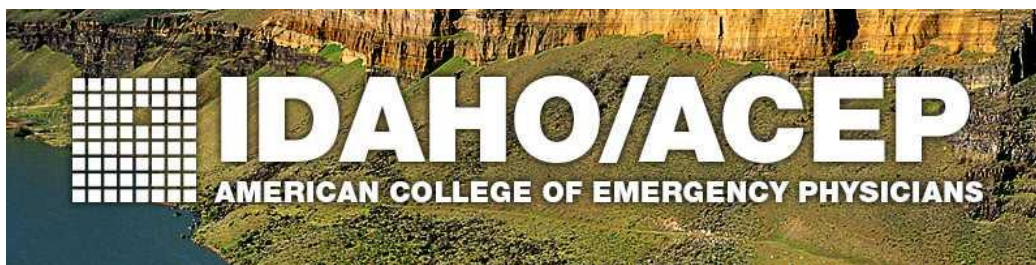


A Newsletter for the Members of the Idaho Chapter - Fall 2022

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President's Message

Jessica Kroll, MD

Dear Idaho EM Physicians,

Each quarter we are going to have a “Highlighted Member” section, this month is Dr. Miller. If you know of anyone you would like to recognize for future newsletters, please let me know.

There are many opportunities to get involved locally and nationally with policy and help shape your specialty. Dr. Ken Gramyk and Dr. Sierra Debenham attended ACEP Scientific Assembly as our chapter's Counselors. They spent two days hearing testimony on resolutions and helped give Idaho a voice on the national level. Please see their report.

This year was a productive year with resolutions. If you would like the opportunity to go as a counselor for our chapter, we have a stipend set aside for this. It is a great opportunity to see how ACEP makes its decision and to be part of the democratic process of how ACEP policies are made. We also sponsored another member, Dr. Hammerstedt to represent ICEP at the IMA (Idaho Medical Association) House of Delegate conference. This is where the IMA uses a democratic process to decide on what it will lobby towards for the year. If either of these sound like something you would be interested in, let me know.

Starting in January the Current Procedural Terminology (CPT) documentation guideline changes for all evaluation and management (E/M) services. This will be the first change to documentation since 1990s! The emphasis on “History and Physical” and ROS will no longer be a part of the coding. There will be a larger emphasis on the MDM and complexity around the patient and decision

making. ACEP has a FAQ section worth a read 2023 ED E/M Guidelines FAQ Another topic to point out was the implementation of CMS Split Shared Service with advance providers and physicians for billing. Luckily, this had been delayed till 2024 (YAY!).

A brief follow-up regarding reproductive laws in Idaho, I wanted to point out two questions that I have heard coming up on shift. Can I give Plan B? YES. You still can treat patients with Plan B after sexual assault. Can I treat ectopic pregnancies? Under the current injunction you also can treat all reproductive emergencies (ectopic) in the emergency room if it is life threatening.

Our next meeting will be held in March, exact date and location TBD, but it will be held IN PERSON in the Treasure Valley area. Please come or stop by even if briefly, all are welcome. Details will be sent out after the new year.

ACEP Council 2022
San Francisco Hilton September 29-30, 2022
Ken Gramyk, MD, FACEP
Sierra Debenham, MD, MSHP



New ACEP Officers Elected

The ACEP Council meetings were held in San Francisco, CA at the San Francisco Hilton on September 29-30, 2022. It has been three years since the Council has met fully in person, and for many a welcome return to the professional networking and the flurry of 2 full days of live Council deliberations and 3 packed Reference Committees. Idaho ACEP (ICEP) had two Councillors credentialed and seated for this year's Council: Ken Gramyk, MD, FACEP and Sierra Debenham, MD, MSPH.



Aisha T. Terry
MD, MPH, FACEP
ACEP President-elect

The Council conducted elections for ACEP President-elect, and four spots on the Board of Directors. Aisha Terry, MD, FACEP was voted President-elect and elected by acclamation on the first day of Council. President-elect Dr. Terry will serve one year as President-elect before becoming ACEP President during [ACEP23](#) in Philadelphia. Elected to the Board in 2017, Dr. Terry will become the first Black president in ACEP's history. Four members were elected to serve to three-year terms on the ACEP Board of Directors: Jeffery M. Goodloe, MD, FACEP (incumbent), Gabe Kelen, MD, FRCP(C), FACEP (incumbent), Kristin McCabe-Kline, MD, FACEP, and Ryan Stanton, MD, FACEP (incumbent).

At Council, ACEP debuted a new video and launched a [scope of practice](#) campaign for policymakers and patients emphasizing the importance of physician-led care teams in every emergency department.

Outgoing ACEP President Gillian Schmitz, MD, FACEP, and incoming ACEP President Christopher S. Kang, MD, FACEP addressed the Council as the silver Tiara and the gold Gavel were exchanged at the close of the meeting.

Following the Council Meeting, the ACEP Board of Directors met, and the following Board members were elected to new roles: L. Anthony Cirillo, MD, FACEP, is the new Chair of the Board. John T. Finnell, MD, FACEP, FACMI, is the new Vice President, and James L. Shoemaker, Jr., MD, FACEP, is the new Secretary/Treasurer.



The Council considered 65 resolutions this year of which 45 resolutions were adopted as amended, 17 resolutions were not adopted, and 4 resolutions were referred to the ACEP Board of Directors (BOD). There were many discussions and debates regarding reproductive health care practices in Emergency Medicine. Resolutions that were amended and passed were (24,25,26,27). Resolutions regarding Billing and Collections Transparency (28) and of special interest to rural emergency medicine improvement (50) were also amended and passed. Resolution (22) State Chapter Funding was an attempt to help small chapters with money for lobbying and advocacy efforts and was amended and passed resulting in 10% of national chapter dues return to the chapter. I have attached few of these highlights here. All the final council actions and resolutions are available here on the attached council 22 report to the ACEP BOD.

[ACEP23](#) will be held in Philadelphia on October 7-8, 2023.

Council Resolutions 2022

Resolution 24 Access to Reproductive Rights (as amended)

RESOLVED, That ACEP support equitable, nationwide access to reproductive health care procedures, medications, and other interventions.

Resolution 25 Advocacy for Safe Access to Full Spectrum Pregnancy Related Health Care (as amended)

RESOLVED, That ACEP affirm that: 1) abortion is a medical procedure and should be performed only by a duly licensed physician, surgeon, or other medical professional in conformance with standards of good medical practice and the Medical Practice Act of that individual's state; and 2) no physician or other professional personnel shall be required to perform an act violative of good medical judgment and this protection shall not be construed to remove the ethical obligation for referral for any medically indicated procedure; and be it further

RESOLVED, That ACEP support the position that the early termination of pregnancy (publicly referred to as "abortion") is a medical procedure, and as such, involves shared decision making between patients and their physician regarding: 1)

discussion of reproductive health care; 2) performance of indicated clinical assessments; 3) evaluation of the viability of pregnancy and safety of the pregnant person; 4) availability of appropriate resources to perform indicated procedure(s); and 5) is to be made only by health care professionals with their patients; and be it further

RESOLVED, That ACEP oppose the criminalization or mandatory reporting of reproductive health-related patient concerns in the emergency department; and be it further

RESOLVED, That ACEP support an individual's ability to access the full spectrum of evidence-based pre-pregnancy, prenatal, peripartum, and postpartum physical and mental health care, and supports the adequate payment from all payers for said care; and be it further

RESOLVED, That ACEP oppose the criminalization, imposition of penalties, or other retaliatory efforts against patients, patient advocates, physicians, health care workers, and health systems for receiving, assisting, or referring patients within a state or across state lines to receive reproductive health services or medications for contraception and abortion, and will further advocate for legal protection of said individuals.

Resolution 26 Promoting Safe Reproductive Health Care for Patients (as amended)

RESOLVED, That ACEP encourage hospitals and emergency medicine residency training programs to provide education, training, and resources outlining evidence-based clinical practices on acute presentations of pregnancy-related complications, including miscarriage, post-abortion care, and self-managed abortions; and be it further

RESOLVED, That ACEP continue to develop clinical practices and policies that protect the integrity of the physician-patient relationship, the legality of clinical decision-making, and possible referral to additional medical care services – even across state lines – for pregnancy-related concerns (including abortions).

RESOLVED, That ACEP support clear legal protections for emergency physicians providing federally mandated emergency care, particularly in cases of conflict between federal law and state reproductive health laws.

Resolution 27 Equitable Access to Emergency Contraception in the ED

RESOLVED, That ACEP develop a policy statement endorsing the accessibility of emergency contraception in emergency departments nationwide; and be it further

RESOLVED, ACEP advocate for universal access to emergency contraception in the emergency department.

Resolution 28 Billing and Collections Transparency and Interaction with ACEP (as amended)

RESOLVED, That ACEP advocate to establish the requirement that revenue cycle management entities will, upon request, directly provide every emergency physician it bills or collects for with, a detailed itemized statement of billing and remittances for medical services they provide.

Resolution 50 Supporting Emergency Physicians to Work in Rural Settings (as amended)

RESOLVED, That ACEP support and encourage emergency medicine trained and board certified emergency physicians to work in rural EDs; and be it further

RESOLVED, That ACEP help establish, with the Council of Residency Directors in

Emergency Medicine, a standardized training program for emergency medicine residents with aspirations to work in rural settings; and be it further RESOLVED, That ACEP support working with the Accreditation Council for Graduate Medical Education and Centers for Medicare and Medicaid Services to increase resident exposure and remove regulatory barriers to rural emergency medicine.

Resolution 22 State Chapter Funding

RESOLVED, That ACEP return 10% of national dues to each chapter calculated by 0.1 x number of state dues-paying members every year.

Spotlight a Member!

Dr. Jonathan Miller: father and husband, river guide, advocate, serviceman, pilot, entrepreneur, doctor.

He started his career interning for a medical magazine back in college. He was originally interested in journalism however this started his trajectory towards medicine. He was born and raised in Alabama where he also learned how to make amazing casseroles. I was fortunate enough to be given one on my maternity leave.

He defines himself as an “outdoor bum.” He has guided on many rivers across the United States. His favorite rivers to guide are the Gauley River in West Virginia and the Middle Fork of the Salmon. His favorite book is “Endurance” about Ernest Shackleton expedition to Antarctica in 1914, where he planned to cross the last uncharted continent on foot.

He attended the University of Alabama for undergraduate and medical school. He decided to go into EM because he “couldn’t see himself doing anything else.” He attended residency up in Portland Maine then landed himself in Boise, ID. He was Leader of Hospital Allied Services for many years within his group and has served as a Vice President of ICEP.

It is no surprise given Dr. Miller’s loyalty and dedication to his communities; he joined the Army National Guard. He was in the guard for 14 years. He has served as a Field Surgeon and Flight Physician on The Critical Care Air Transport Team (CCAT). He was a key member helping to get the CCAT Team off the ground (pun fully intended). He has served in two deployments. ICEP greatly appreciates Dr. Miller’s service and all those who have and are serving.

To add more to his skill set he has his pilot’s license. Since leaving the Guard he has been blending his outdoor bum-self with his many other skills and is carving out his niche in backcountry aviation medicine. Idaho is the second state in the US next to Alaska that has the most backcountry aviation. Aviation is his next journey, including being a Consultant for Delta Air Lines.

Welcome Members!

A special welcome to the new members of the Idaho Chapter and to those that renewed their membership. Please [reach out](#) if you would like to become involved at the chapter level, including leadership opportunities.

We are excited to have you!

Joseph M Anderson, DO, FACEP	Paul D Crapo, DO
Lauren Elizabeth Steenbeeke	Sadie Anne Shelton
Matthew J Larsen, MD	Sean E Williams, DO



Congratulations!

Congrats to the new FACEP'S

Jennie Hooper, MD, FACEP
Travis Marshall, MD, FACEP

FROM NATIONAL ACEP



ACEP Resources & Latest News

ED Boarding: Advocacy on the Front Lines: ACEP launched an [advocacy and public awareness campaign](#) to sound the alarm on the ED boarding crisis.

- The campaign centers around more than [100 boarding stories](#) sent in by ACEP members that paint a picture of the grim situation in many EDs across the country.
- Your stories formed the heart of the [letter ACEP sent to the White House](#) on Nov. 7, cosigned by 34 health care and patient advocate organizations.
- In [the latest regulatory blog](#), ACEP Senior Vice President for Advocacy & Practice Affairs Laura Wooster provides a progress report on these efforts and previews next steps.
- ACEP continues to collect stories. [Submit yours via this anonymous form](#).
- Visit our new [ED Boarding resource page](#) to view the stories, read the advocacy letter and get talking points on the issue.

Prepare for the potential pediatric tripledemic: ACEP's Pediatric EM Committee has pulled together some resources to help.

- [The Pediatric Tripledemic: How to Survive](#) presented by Annalise Sorrentino, MD, FACEP
- [Managing RSV and Bronchiolitis](#) presented by Christopher Amato, MD, FACEP, and Jessica Wall, MD, FACEP
- [Managing Difficult Pediatric Airways](#): In this episode of ACEP Frontline, Dr. Al Sacchetti reviews the approach and management of difficult pediatric airways.

CMS Finalizes Requirements for Rural Emergency Hospitals: Will any Hospitals Convert to this New Facility-type Next Year? In Regs & Eggs this week, [get ACEP's analysis of the final REH policies](#) and whether they will improve access to care.

The 2023 Physician Fee Schedule Final Reg-- Highlights and Analysis: Two major Medicare final rules were recently released, including the 2023 Physician Fee Schedule that has a big impact on reimbursement. ACEP's regulatory team analyzed 3,000+ pages of content and wrote [a special edition of Regs & Eggs](#).

New Data Underscores Cost and Health Outcome Concerns with Independent Practice: We know that everyone on an emergency care team is integral and valued. But our experience shows that nobody else has the training or expertise of an emergency physician. As lawmakers and administrators evaluate whether to empower nurse practitioners and physician assistants beyond the scope of their training, new data from Stanford University reinforces our reservations about exposing non-physician practitioners to responsibility they are not prepared to assume. [Read more in the November ACEP Board Blog](#).

Childcare challenges + solutions: ACEP's Young Physicians Section convened a panel of YPs who utilize au pairs, nannies, at-home daycares and more. [View the episode and related resources](#).

Dangerous toys? ACEP's smart phrase library has a new addition related to consumer product safety to help with reporting injuries from commercial products. [View all smart phrases](#).

ACEP4U: Making it Easier to Find Your Crew with [ACEP's New Member Interest Groups!](#)

Honor Outstanding Medical Students with ACEP/EMRA Awards: Make sure standout students get recognized for going above and beyond! The deadline is Jan. 8 to nominate a 4th year EM-bound medical student for the ACEP/EMRA National Outstanding Medical Student Award. [Learn more.](#)

EMF Grant Cycle is Open, Set to Award \$1.5 Million in Funding: Get those grant applications ready! The Emergency Medicine Foundation is set to award \$1.5 million in grants, with opportunities covering a wide range of critical EM research topics. This cycle includes seven new grant categories. [Apply by Jan. 20, 2023.](#)

From the CDC: CDC Releases 2022 Clinical Practice Guideline for Prescribing Opioids for Pain: The new CDC Clinical Practice Guideline for Prescribing Opioids for Pain—United States, 2022 (2022 Clinical Practice Guideline) provides 12 evidence-based recommendations for primary care and other clinicians who provide pain care, including those prescribing opioids, for outpatients aged 18 years and older with acute, subacute and chronic pain. [Read more on the CDC's website.](#)

Upcoming ACEP Events and Deadlines

Jan. 8: Deadline to nominate a 4th year EM-bound medical student for the [ACEP/EMRA National Outstanding Medical Student Award](#)

Jan. 17: [The Nuts and Bolts of Physician Reimbursement 2023](#)

Jan. 20: [Deadline to Apply for an EMF Grant](#)

March 31-April 3: [ACEP's Advanced Pediatric EM Assembly](#)

April 13-15: [EM Basic Research Skills, Session II](#)

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