

# PACEP NEWS

WINTER 2021

## Executive Privilege

By **Shawn M. Quinn, DO, FACEP, FACOEP**



**Shawn M. Quinn, DO, FACEP, FACOEP**  
PACEP President 2020-2021

*"Some of the most beautiful chapters in our lives won't have a title until much later." – Bob Goff*

We certainly are living in uncertain times and the above quote takes a positive spin on approaching uncertainty. Aside from the uncertainty with many other things occurring in the country, emergency medicine has been navigating uncertain waters for much of the last year. But there is hope on the horizon. Between balance billing, reimbursement cuts, and the COVID pandemic, your PACEP team has been deftly maneuvering through this murky time to provide our members and our patients with positive advocacy and outcomes. As your PACEP leadership has been fighting for our members and patients in the Commonwealth to prevent detrimental balance billing legislation, we have also been part of the national discussion within ACEP to help mold the recently passed federal law on balance billing. Details aside, it keeps our patients out of the middle of balance billing disputes and helps to enhance our physician members' practice environment. The potentially large reimbursement cuts that were proposed to emergency medicine are now almost back to neutral for many physicians and many will see an overall positive increase. COVID continues to wreak havoc in our emergency departments and threaten the health and safety of our patients and colleagues but our members continue to find innovative ways to handle the onslaught of high volumes in combination with complex, critically ill patients during these challenging times. The hope of vaccination and herd immunity provides the potential light at the end of this very dark tunnel. This chapter in medicine still doesn't have a title but I'm convinced that when it does, emergency medicine will be the lead authors as the group of physicians who persevered through these tough times, preserving the health of our country, while constantly answering the call to duty 24/7/365.

It has truly been an honor to serve as your President this year. I joke with our leadership on our many calls and virtual meetings, that this has been the year of the virtual presidency. I understand the time we live in, but it's been painful to not personally interact with our board, committees and membership.

It's hard to believe that we will not have seen each other for 2 consecutive Scientific Assemblies. But I think we've taken what's been dealt to us and pulled through this year with an extraordinary amount of flexibility. Although we had to cancel SA2020, we are more excited than ever to be able to provide an excellent virtual SA2021 program. The Education Committee and our SA2021 Program Chair, Blake Bailey, have been working tirelessly to put together an amazing program. Please look out for communications on how to register and what exciting virtual events and lectures we have planned.



**Some of the most beautiful chapters in our lives won't have a title until much later."**

– Bob Goff

**PLEASE JOIN US AT  
OUR VIRTUAL ANNUAL  
MEMBERSHIP MEETING**

**SATURDAY, APRIL 10  
8:00 – 9:30 AM**

There are no proposed bylaws changes this year due to the extensive review in 2020.

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## 2020 – 2021 PACEP Board of Directors

### Executive Committee

President	Shawn M. Quinn, DO, FACEP, FACOEP
President-Elect	Ronald V. Hall, MD, FACEP
Vice President	Chadd Kraus, DO, DrPH, MPH, FACEP
Treasurer	F. Richard Heath, MD, FACEP
Secretary	Robert J. Strony, DO, MBA, FACEP
Immediate Past President	Arvind Venkat, MD, FACEP

### Board Members

Richard Hamilton, MD, FACEP  
Erik I. Kochert, MD, FACEP  
Michael Lynch, MD  
Jennifer Marin, MD, MSc, FACEP  
Jennifer Savino, DO, FACEP  
Elizabeth Barrall Werley, MD, FACEP

### Resident Representatives

Taylor J. Haas, DO, MBA (Geisinger)  
Gary Khammahavong, MD (Allegheny General Hospital)  
Daniel Tannenholtz, DO (Tower Health Reading Hospital)  
Loren S. Touma, DO (Jefferson Health NE)

### Executive Director

Jan Reisinger, MBA, CAE

## PACEP Committee Chairs/Co-Chairs

### Education

Chair	Annahieta Kalantari, DO, FACEP
Board Liaison	Elizabeth B. Werley, MD, FACEP

### EMS & Terrorism and Disaster Prep

Chair	Scott Goldstein, DO, FACEP
Co-Chair	Philip Nawrocki, MD
Co-Chair	Gregory Hellier, DO, FACEP
Board Liaison	Richard Hamilton, MD, FACEP

### Government Affairs/Medical Economics

Chair	Michael Boyd, MD
Co-Chair	Marcus Eubanks, MD, FACEP
Co-Chair	David Rottinghaus, MD
PEP-PAC Chair	Steven D. Guyton, MD, FACEP
Board Liaison	Michael Lynch, MD

### Wellness/Young Physicians

Chair	Hannah Mishkin, MD, FACEP
Co-Chair	Monisha Bindra, DO
Co-Chair	Dhimitri Nikolla, DO
Board Liaison	Jennifer Savino, DO, FACEP

If you are interested in joining a committee, visit <http://pacep.net/committees.html>

## Executive Privilege

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Organized medicine is a team sport and I'm so happy to have such amazing teammates. Our youngest members, our medical students and residents, are more involved than ever, and we are all in awe of their volunteerism and resilience during this pandemic. Thank you to our executive committee, committee leadership, and all of our many involved members for your work during the past year. My successor, Ron Hall, is a selfless, gentleman physician leader who has provided me such superb guidance and support. He is more than prepared to take PACEP to new heights and pull us out of these troubling times. Finally, my deepest thanks to our Executive Director, Jan Reisinger, who has been the guiding light for PACEP this year. Her ability to pivot, adapt, and lead during these times confirms why we brought her on board.

**Again, it has been a pleasure and honor to serve you all over the past year. I can't wait to thank you all in person when we can safely return to our new normal. Stay safe. ■**



# ANNIVERSARY CELEBRATION

Although PACEP's 2021 Annual Meeting and Scientific Assembly has gone virtual, preparations for PACEP's 50th Anniversary continue. The documentary history film telling PACEP's story through the perspectives of members and past leaders is in post-production, and we are still seeking any 'b-roll' photos, historic memorabilia, or other items that help to tell the story of emergency medicine in Pennsylvania. Please contact PACEP Executive Director, Jan Reisinger ([exec@pacep.net](mailto:exec@pacep.net)) with any items that we could borrow or use for this important project. Due to the virtual meeting in 2021, the film will premiere at PACEP 2022. Stay tuned for preview clips of the film on the PACEP website and social media throughout 2021.

**HAPPY 50TH PACEP!**

## WELCOME NEW PACEP MEMBERS

Joseph Ash  
Mark Bialas  
Edward Bowman  
Lindsay Anne Caldarone  
Nicole Castro  
Rachael Maylene Chaska  
Ketki N Chinoy  
Andrew Chiu  
Titus Chu  
Corey Jon Coleman  
Taylor Daniel  
Evrhett Davis  
Marykate Decker  
Alex Fazioli  
Joshua S Fenton

Landon Gregory Foulger  
Shayan Ghiaee  
Victoria Glascott  
Frederick Gmora  
Mohamed Hagahmed  
Madison May Heck  
Courtney Hrabosky  
Suhail Hamza Kaleem  
Sushant Kapoor  
Joseph A Kebisek  
Steven Kurban  
Michaela LeDonne  
Rhea Sarah Mathew  
Alyssa Muchisky  
Ronald Obi Nwumeh

Danielle Seori Park  
Daniel Petrosky  
Karen Mulloy Restifo  
Samuel Saucedo  
Maria C Sember  
James T VandenBerg  
Oluwarotimi Vaughan-Ogunlusi  
Niraj Jayendra Vyas  
Blake Wadsworth  
Jordan Blake Wallis  
Cynthia Wang  
Rebecca Welsh  
Holly Whitt  
Alicia M Williams



# Exciting opportunities at our growing organization

- Emergency Medicine Faculty Positions
- Pediatric Emergency Medicine Faculty Positions
- Vice Chair, Clinical Operations
- Vice Chair, Research

Penn State Health, Hershey PA, is expanding our health system. We offer multiple new positions for exceptional physicians eager to join our dynamic team of EM and PEM faculty treating patients at the only Level I Adult and Level I Pediatric Trauma Center in Central Pennsylvania.

## What We're Offering:

- Salaries commensurate with qualifications
- Sign-on Bonus
- Relocation Assistance
- Retirement options, Penn State University Tuition Discount, and so much more!

## What We're Seeking:

- Emergency Medicine trained physicians with additional training in any of the following: Toxicology, Ultrasound, Geriatric Medicine, Pediatric Emergency Medicine, Research
- Completion of an accredited Residency Program.
- BE/BC by ABEM or ABOEM

## What the Area Offers:

We welcome you to a community that emulates the values Milton Hershey instilled in a town that holds his name. Located in a safe family-friendly setting, Hershey, PA, our local neighborhoods boast a reasonable cost of living whether you prefer a more suburban setting or thriving city rich in theater, arts, and culture. Known as the home of the Hershey chocolate bar, Hershey's community is rich in history and offers an abundant range of outdoor activities, arts, and diverse experiences. We're conveniently located within a short distance to major cities such as Philadelphia, Pittsburgh, NYC, Baltimore, and Washington DC.



**PennState Health**

**FOR MORE INFORMATION PLEASE CONTACT:**

Heather Peffley, PHR FASPR at: [hpeffley@pennstatehealth.psu.edu](mailto:hpeffley@pennstatehealth.psu.edu)

# Government Affairs/Medical Economics Committee: Advocating on your Behalf



**Michael Boyd, MD**  
Government Affairs/  
Medical Economics Chair

**By Michael Boyd, MD**

With 2020 behind us and the new 2021-22 Legislative Session underway, it is time to reflect on the PACEP Government Affairs/Medical Economic Committee achievements during a challenging year while looking forward to the opportunities that await.

Thanks to PACEP's grassroots efforts, we successfully fought

back against Out-of-Network Balance Billing legislation that would have been detrimental to Emergency Departments across the Commonwealth. The Balance Billing legislation introduced in 2019-2020 would have exerted downward pressure on our reimbursement rates, handicapped our negotiating leverage with insurers and diminished access to emergency care. The CARES Act stimulus package passed by the US Congress in December 2020 included measures to curtail surprise billing at a federal level. It is expected that the PA General Assembly will introduce its own Balance Billing legislation this session that would supersede federal law in the CARES Act. PACEP will continue to tirelessly work for a solution to Balance Billing that recognizes the unique nature of emergency care, preserves patient access to high quality emergency services, protects patients from surprise medical bills and provides adequate reimbursement for all reasonably necessary costs.

The opioid epidemic continues to rage within the COVID-19 pandemic. PACEP's Opioid Expert panel served on the PA Warm Handoff Task Force, participated in Warm Handoff Summits, expanded access to Medication Assistance Treatment in the ED and protected Emergency Physicians from more onerous regulations regarding ED prescribing. Unfortunately, the socioeconomic consequences of the shutdowns and pandemic caused a significant rebound in substance use disorder and we will continue to fight the opioid epidemic long after COVID-19 is behind us. We aim to expand reimbursement for tele-medicine

services related to substance use disorder treatment and MAT and build upon existing warm handoff and harm reduction programs.

In 2020, PACEP continued to focus on the issue of psychiatric boarding in the ED. We have all witnessed the increase mental health issues presenting to the ED as a consequence of the pandemic. PACEP representatives Dr. Eleanor Dunham, Dr. Erik Kochert and Dr. Chadd Kraus served on The Pennsylvania Coalition for Psychiatric Boarding. These doctors were the voice of Emergency Medicine on this Task Force and have made a series of recommendations to reduce ED Psychiatric Boarding that hopefully will be included in legislation this year.

While simultaneously maintaining clinical responsibilities during COVID-19, our membership sacrificed their time to advocate for the protection and support needed to serve our patients. PACEP joined with PAMED to successfully lobby Gov. Wolf for an executive order granting liability immunity protection during the pandemic. Many of our members have engaged in media relations and interviews promoting public health measures, and we advocated for PPE and resources for our members.

Looking forward to the 2021-22 legislative session, our priorities will remain COVID-19, Balance Billing, the Opioid Epidemic and reimbursement reform from both public and private payers. We will continue to balance clinical

responsibilities with advocacy efforts on the behalf of our physicians and patients.

In the midst of COVID-19, Emergency Physicians across the state continue to rise to the challenge while exhibiting our skill, dedication and ingenuity to provide compassionate care to our communities. Our lawmakers recognize our efforts, and are eager to hear about our experiences and advice. ■



**Thanks to PACEP's grassroots efforts, we successfully fought back against Out-of-Network Balance Billing legislation that would have been detrimental to Emergency Departments across the commonwealth.**

*Whether or not you have engaged in advocacy in the past, as an Emergency Physician you are the best person in your community to educate our representatives about the issues we confront daily. If you would like assistance contacting your local legislator or join the PACEP Government Affairs/Medical Economics Committee, please do not hesitate to reach out to me at [mboyd412@gmail.com](mailto:mboyd412@gmail.com).*

# Lobbyist Update

By Milliron & Goodman Government Relations, LLC



## PACEP Legislative Report – 12/30/20

Another two-year legislative session is about to begin, and this new beginning brings new faces and new challenges to the legislature. On Tuesday, January 5th, the Pennsylvania General Assembly will meet to convene the 204th legislative session. The 2021-2022 session brings over 30 new members to the House and Senate. With every freshmen class, there is a learning curve, new set of priorities, and competing interests. We strongly encourage you to get to know and/or continue to build your relationships with your local legislators and more importantly, making sure they know you.

Seat	Former Member	Member-Elect Based on Certified Results
House District 20 (Allegheny County)	Rep. Adam Ravenstahl (D)	Emily Kinhead (D)
House District 28 (Allegheny County)	Rep. Mike Turzai (R)	Robert Mercuri (R)
House District 33 (Allegheny County)	Rep. Frank Dermody (D)	Carrie DelRosso (R)
House District 36 (Allegheny County)	Rep. Harry Readshaw (D)	Jessica Benham (D)
House District 38 (Allegheny County)	Rep. Bill Kortz (D)	Nickolas Pisciotano (D)
House District 55 (Westmoreland County)	Rep. Joe Petrarca (D)	Jason Silvis (R)
House District 66 (Jefferson County)	Rep. Cris Dush (R)	Brian Smith (R)
House District 75 (Clearfield County)	Rep. Matt Gabler (R)	Michael Armanini (R)
House District 84 (Lycoming County)	Rep. Garth Everett (R)	Joseph Hamm (R)
House District 86 (Perry County)	Rep. Mark Keller (R)	Perry Stambaugh (R)
House District 123 (Schuylkill County)	Rep. Neal Goodman (D)	Timothy Twardzik (R)
House District 125 (Schuylkill County)	Rep. Mike Tobash (R)	Joseph Kerwin (R)
House District 127 (Berks County)	Rep. Thomas Caltagirone (D)	Manuel Guzman (D)
House District 131 (Northampton County)	Rep. Justin Simmons (R)	Milou Mackenzie (R)
House District 138 (Northampton County)	Rep. Marcia Hahn (R)	Ann Flood (R)
House District 143 (Bucks County)	Rep. Wendy Ullman (D)	Shelby Labs (R)
House District 147 (Montgomery County)	Rep. Marcy Toepel (R)	Tracy Pennyquick (R)
House District 152 (Montgomery County)	Rep. Thomas Murt (R)	Nancy Guenst (D)
House District 154 (Montgomery County)	Rep. Steve McCarter (D)	Napoleon Nelson (D)
House District 156 (Chester County)	Rep. Carolyn Comitta (D)	Dianne Herrin (D)
House District 160 (Delaware County)	Rep. Stephen Barrar (R)	Craig Williams (R)
House District 185 (Philadelphia County)	Rep. Maria Donatucci (D)	Regina Young (D)
House District 188 (Philadelphia County)	Rep. Jim Roebuck (D)	Rick Krajewski (D)
House District 190 (Philadelphia County)	Rep. G. Roni Green (D)	Amen Brown (D)
House District 198 (Philadelphia County)	Rep. Rosita Youngblood (D)	Darisha Parker (D)
Senate District 1 (Philadelphia County)	Sen. Larry Farnese (D)	Nikil Saval (D)
Senate District 9 (Delaware County)	Sen. Tom Killion (R)	John Kane (D)
Senate District 17 (Montgomery County)	Sen. Daylin Leach (D)	Amanda Cappelletti (D)
Senate District 19 (Chester County)	Sen. Andrew Dinniman (D)	Carolyn Comitta (D)
Senate District 25 (Jefferson County)	Sen. Joe Scarnati (R)	Cris Dush (R)
Senate District 37 (Allegheny County)	Sen. Pam Iovino (D)	Devlin Robinson (R)

At the time of this writing, we are still awaiting the announcement of relevant committee chairs and membership. Also, while the date has not been formally announced, based on previous experience, we expect the Governor to hold his budget address on Tuesday, February 2nd.

A complete list of session days is as follows:

### 2021 SENATE SESSION SCHEDULE

January	5, 25, 26, 27
February	1, 2, 3
March	15, 16, 17, 22, 23, 24
April	12, 13, 14, 19, 20, 21
May	10, 11, 12, 24, 25, 26
June	7, 8, 9, 14, 15, 16, 21, 22, 23, 28, 29, 30

### 2021 HOUSE SESSION SCHEDULE

January	5, 11, 12, 13, 25, 26, 27
February	1, 2, 3
March	15, 16, 17, 22, 23, 24
April	5, 6, 7, 19, 20, 21, 26, 27, 28
May	3, 4, 5, 24, 25, 26
June	7, 8, 9, 14, 15, 16, 21, 22, 23, 24, 25, 28, 29, 30
September	13, 14, 15, 27, 28, 29
October	4, 5, 6, 25, 26, 27
November	8, 9, 10, 15, 16, 17
December	13, 14, 15

### HOSPITAL REGULATIONS

At the time of this writing, the hospital regulations have not been made public and we anticipate further delay due to the COVID-19 crisis.

The proposed draft regulations will be made public once they are published in the Pennsylvania Bulletin. At that time, the clock starts on a 30-day public comment period. The proposed draft regulations are over 500 pages, including preamble, proposed changes, and analysis. Once released, we will be reviewing these regulations and PACEP will be commenting on any proposed changes that would negatively impact the practice of emergency medicine and the care you provide to your patients.

### BALANCE BILLING

Working with our physician colleagues, PACEP led the charge to effectively block legislation from becoming law that would have disrupted the balance between physicians and insurers in the marketplace.

House Bill 1862, sponsored by House Insurance Committee Chair Tina Pickett (R-Bradford), was introduced, and quickly advanced out of Committee to the full House at the end of October 2019. PACEP's advocacy team and grassroots network worked continuously, and at times virtually around the clock, this past legislative session to lobby for a fair solution to surprise medical bills. Thanks to all the hard work, we can report that the bill did not make it to the floor for a vote before the end of the legislative session that concluded on November 30. This means the bill ceases to exist, and if the issue is still considered a priority, it must be reintroduced in the new two-year session that convenes in January and start the legislative process over again.

### BACKGROUND

While PACEP supported the intent of HB 1862 to protect patients and hold them harmless from out-of-network billing disputes, the payment approach laid out in the bill would have adversely impacted the ability of providers and insurers to negotiate appropriate reimbursement rates and further jeopardize access to quality care throughout the Commonwealth, especially in rural areas.

As introduced, the bill would have mandated a payment rate equal to the median in-network rate for that insurance policy on a rolling annual basis without any legitimate recourse for disputing whether the payment is appropriate. Knowing this, any incentive for insurance companies to negotiate with providers would have disappeared. This would eventually drive the median rate down, creating a self-perpetuating spiral of deteriorating reimbursements. According to models developed by the Congressional Budget Office, HB 1862 would have reduced payments to both in-network and out-of-network providers by 20 percent.

PACEP partnered with Representatives Rothman and Kaufer on a solution that has worked in states as diverse as Texas and New York to preserve access to quality health care throughout the Commonwealth while protecting patients from unexpected bills. PACEP lobbied lawmakers to support the adoption of the Kaufer and Rothman amendments to HB 1862 or oppose the bill without amendment.

- With the **Kaufer amendment**, the payment for out-of-network services would be determined by insurers to cover "all reasonably necessary costs" with no specific payment level mandated in statute. This flexible reimbursement standard has been in place in Pennsylvania law for over 20 years for

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# UPCOMING EVENTS

3/10/21	<b>Board of Directors Meeting</b> (Virtual)
4/8/21	<b>Board of Directors Meeting</b> (Virtual)
4/8/21 – 4/10/21	<b>PACEP Scientific Assembly 2021</b> (Virtual)
6/9/21	<b>Board of Directors Meeting</b> (Virtual)
9/15/21	<b>Western Residents Day</b> – Location TBD
9/30/21	<b>Central Residents Day</b> – St. Luke’s
9/30/21	<b>Board of Directors Meeting</b> – St. Luke’s (with Central Residents Day)
10/13/21	<b>Eastern Residents Day</b> - Crozer
10/23/21 – 10/24/21	<b>ACEP Council</b> – Boston, MA
10/25/21 – 10/28/21	<b>ACEP Scientific Assembly</b> – Boston, MA
11/10/21	<b>Board of Directors</b> – Harrisburg
01/12/22	<b>Board of Directors Meeting</b> (Virtual)
3/2/22	<b>Board of Directors Meeting</b> (Virtual)
3/31/22	<b>Board of Directors</b> – Kalahari Resorts, Pocono Manor
3/31/22 – 04/2/22	<b>PACEP Scientific Assembly 2022</b> – Kalahari Resorts, Pocono Manor



## Lobbyist Update

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emergency services, and is a known standard used by providers and insurers alike.

- With the **Rothman amendment**, an actual streamlined arbitration process for provider/insurer disputes would be established based on similar processes working today in other states. Arbitration that looks at payment appropriateness, with the loser paying arbitration costs, incentivizes insurers and providers to come to their own reasonable mutual accommodation and, overall encourages fair billing and fair payment practices upfront.

In 2020 other states, including Maine, Virginia, and Georgia, have enacted legislation to address surprise medical billing. In many instances, it was with the consensus of the providers and insurers, and the outcome was very similar to HB 1862 with the Rothman and Kaufer amendments.

On the federal level, after years of debate that also featured high stakes lobbying, Congress approved a COVID-19 package that includes a surprise billing fix. The federal legislation was enacted at the end of December and will take effect in 2022. The new law does not set a benchmark reimbursement rate. It would require insurers and medical providers who cannot agree on a payment rate to use an outside arbiter to decide. The arbiter would determine a fair amount based, in part, on what other doctors and hospitals are typically paid for similar services. Patients could be charged the kind of cost sharing they would pay for in-network services, but nothing more. The new law will ban air ambulances from giving patients surprise bills. Ground ambulances, which have been criticized for generating a significant number of surprise bills, are excluded from the new law. The law also preserves a state’s ability to pursue additional safeguards.

### GOING FORWARD

House Health Committee Chair Kathy Rapp (R-Warren) and Tina Pickett (R-Bradford) have filed a joint cosponsor memo on their intent to introduce legislation to address surprise balance billing in 2021. We had initial conversations on draft language prior to enactment of the federal law. With a federal implementation date of January 1, 2022, opportunities may exist for PACEP and our partners to work for additional enhancements, if there is appetite in the Legislature to do more. The PACEP leadership and advocacy team remain committed to a fair solution to ensure that emergency physicians can continue to provide quality care throughout the Commonwealth. ■

▶ *Please stay tuned for updates. Thank you all for helping us to get to this point. We greatly appreciate your continued advocacy.*

# Congratulations to these Award Winning PACEP Members!



**Congratulations to Douglas F. Kupas, MD, EMT-P, FAEM, FACEP who was recently named as Medical Director for The National Association of Emergency Medical Technicians (NAEMT).**

**Douglas F. Kupas, MD,  
FAEMS, FACEP**



**Gillian Beauchamp, MD,  
FACEP**

**Emergency Physician  
of the Year**



**Steven K. Schirk, MD**

**Meritorious Service  
Award**



**Priyanka Lauber, DO**

**Resident  
of the Year**



**PA State Representative  
Aaron Kaufer**

**Legislator of the Year**



**Thomas (Doug) Sallade, DO**

**PACEP Leadership  
Fellowship 2021-2022**



**Karen Custodio, DO  
Einstein**

**PACEP Resident Board Members 2021-2022**



**Clairisse Hafey, DO  
Geisinger**

# RESIDENCY ROUNDUP

Welcome to the newest section of the PACEP Newsletter, Residency Roundup! We propose to utilize this section in each future newsletter as a personal spotlight for 3–4 residency programs. This section will be dedicated to discussing notable achievements, events, or other pertinent points of discussion from each program. Examples of potential discussion points would be: current residents and faculty members that may have notable achievements/publications/awards, residency social events, operational changes that may benefit other EDs (i.e., COVID-19 protocols, screening tools, discharge planning, etc.) The exact material highlighted from each residency program will largely be open to each program's decision, intended to serve as a rotating spotlight for every EM program. Associated photos are encouraged! We hope you enjoy the first edition of Residency Roundup below!

**Please reach out to Taylor Haas and Jan Reisinger if you would like to have your program hosted in the next newsletter.**

Taylor Haas, PGY-2 Geisinger Emergency Medicine  
PACEP Board of Directors Resident Representative  
thaas@geisinger.edu

Jan Reisinger, MBA, CAE  
Executive Director  
exec@pacep.net

## Jefferson Northeast

All of us at Jefferson Northeast (JNE) are excited to be a part of the first PACEP Residency Spotlight. In addition to a traditional emergency medicine (EM) residency program, we are one of the few programs in the nation to offer dual training programs in emergency medicine/internal medicine, emergency medicine/family medicine, and starting this year an emergency medicine/internal medicine/critical care medicine.

Jefferson Northeast EM (previously known as Aria Health) is a former AOA-accredited program that has been established for over 30 years and is now a fully accredited 4-year ACGME program. The program boasts three unique training sites in Northeast Philadelphia and Lower Bucks County (Torresdale, Frankford, and Bucks). These different practice environments provide a rich experience with a diverse patient population in both urban and suburban settings. With over 55 EM and combined-training residents, our mission is to provide meaningful education and experience in emergency medicine to prepare our residents to be outstanding and compassionate emergency physicians. To achieve this, we have a focus on high quality resident didactic education, offer high-volume and high-acuity clinical experience, and hands on procedural and resuscitative opportunities from the very first day of residency. We place a premium on POCUS, Resuscitation, Trauma, and Critical Care with a rotational curriculum that values a well-rounded educational experience.

In our opinion, one of the most important qualities of a strong EM residency is the ability to adapt over time. Our program strives to be the best possible with a continuous program improvement process that focuses on the training needs of our residents as it's guiding principle. In addition, resident mental health and wellness are of the utmost importance when designing our curriculum and individual resident schedules. Every year, residents are guaranteed a week vacation over Christmas or New Years, and the residents

select which week they prefer! We also have a Resident Wellness Committee, which has hosted a myriad of events that bring our residents together outside the hospital including snow tubing, pumpkin picking, a haunted house at the state penitentiary, wine tastings, hiking, and doggie play dates, just to name a few. Our program sponsors a resident retreat twice every year, in which every resident is given the day off (while the faculty cover the department) to spend with one another working together on a community service project, rafting down the Delaware, or exploring the history of Philadelphia on a faculty-created scavenger hunt! We feel that happy residents bring enthusiasm and dedication to not only the program but our patients as well.

Our four-year EM program affords residents the ability to hone and polish their clinical skills, explore the different specialties within emergency medicine, and also to participate in other endeavors such as scholarship, academic fellowships, hospital committees, specialty organization committees, community advocacy and leadership. You may have seen some of our residents and attending physicians recently published in EM Resident, WestJEM, and The American Journal of Emergency Medicine (see links below).

Philly is a such a great city — free time can be spent enjoying a game with one of Philadelphia's sports teams (76ers, Flyers, Eagles, Phillies and the Philadelphia Union), eating at a plethora of Philly's restaurants, gathering for drinks on a rooftop overlooking the city, engaging in the culture of the city's museums and neighborhoods, exploring the history of old city, or reading a book in one of our many parks. ■

<https://www.emra.org/emresident/article/septic-arthritis/>

<https://www.emra.org/emresident/article/septic-thrombophlebitis/>

<https://pubmed.ncbi.nlm.nih.gov/32818753/>

<https://naemsp.org/NAEMSP/media/NAEMSP-Documents/Clinical-Care-and-Restraint-of-Agitated-or-Combative-Patients.pdf>

## Penn State Health



Penn State Health Hampden



Penn State Health Lancaster

**Growth.** It's a great word to describe Penn State Health Emergency Medicine and all of our new learning opportunities. Our health system is growing with the recent acquisition of Holy Spirit Medical Center in Camp Hill and the construction of two new hospitals, Hampden Medical Center in Cumberland County and the other in Lancaster County. While it remains to be determined which of these facilities will have GME learners, and specifically EM residents, we are excited at the potential opportunities these new sites may offer our EM residents. Our Emergency Department has grown, as the initial phase of a planned expansion reaches completion. Our faculty have grown as we now have 36 faculty with a wide variety of expertise in

different topics and the addition of a recently appointed Vice Chair of Diversity, Equity and Inclusion. Last but not least, our teaching continues to grow. We have made several changes to the curriculum this academic year based on feedback from current residents and recent grads, including dedicated pediatric EM rotations in each year of training in conjunction with their longitudinal experience, a transition to a longitudinal EMS experience, prioritization of ultrasound training as a PGY1, and the addition of a senior-level Trauma rotation, among others. We hope to continue to grow the program in size, so that we can offer even more educational opportunities to our residents. ■

## Geisinger



**Geisinger is happy to share our new residency office space!** In addition to new office space for attending physicians, the residents have a brand new lounge area. Outfitted with a computer lab area to work on notes after a shift, and individual lockers to keep belongings. Additionally, our lounge space offers a relaxing room with couches and TV to decompress after a shift. Our new lecture space offers a significant increase in size from our previous lecture hall, ensuring adequate spacing for medical students, off-service residents and others to join conferences. Our most exciting upgrade is our new simulation lab! This will provide the ability for residents to practice procedures and patient cases with a computerized mannequin that allows a full physical exam to be performed and displays real time vitals. We are looking forward to taking full advantage of this new space! ■

# ACEP Council 2020 – PACEP Representing Our Members and Patients



**Arvind Venkat, MD, FACEP**  
Immediate Past President

**By Arvind Venkat, MD,  
FACEP**

In this extraordinary year when Covid-19 changed both how we deliver emergency care and live, Pennsylvania College of Emergency Physicians (PACEP) leaders represented you and our patients during the ACEP Council, October 24–25, 2020. The Council serves as the deliberative and decision making body for ACEP,

considering resolutions that set the agenda and electing leaders for the College for the upcoming year and beyond. Originally planned to take place in Dallas, ACEP moved the Council to a virtual platform due to the pandemic. This allowed the over 400 Councillors, Alternate Councillors, Representatives of Emergency Medicine Organizations, and former ACEP leaders to consider the full range of issues confronting our members, patients, and profession.

As the sixth largest Chapter in ACEP, PACEP had a delegation of 19 Councillors and 8 Alternate Councillors. Pennsylvania's delegation additionally benefitted from two former ACEP leaders to guide our deliberations. As always, our delegation exemplified the diversity and talents in our Chapter, bringing together residents, young physicians, former Chapter Presidents, and current Chapter leaders. Our goal as a Council delegation is to represent our members and patients as we put forward resolutions that reflect the issues we face in practice, consider resolutions from other Chapters and Sections of ACEP, and vote for leaders of the College as a whole.

The work for Council began in the spring when our Councillors and Alternate Councillors drafted resolutions for submission to ACEP. This year, PACEP put forward six resolutions reflecting priorities identified by our members:

- Framework to Assess the Work of the College Through the Lens of Health Equity
- State Media Training for Emergency Physicians

- Telehealth Implementation, Reimbursement, & Coverage
- Universal Access to Telehealth Care
- Addressing Critical Need for PPE by Emergency Physicians During a Pandemic
- Addressing Ethical Challenges of the COVID-19 Pandemic for Emergency Physicians

In addition, the Chapter submitted in memoriam resolutions to recognize and remember the extraordinary contributions of two former Chapter Presidents who died this year - Herbert Arnold ("Arn") Muller, MD, FACEP and J. Ward Donovan, MD, FACEP, FACMT. The resolutions put forward by PACEP received significant support from multiple Chapters and Sections and all but one were adopted or referred to the ACEP Board for consideration and implementation.

Our Council delegation also considered 52 additional resolutions put forward by other component bodies of ACEP. This work involved detailed evaluation of the implications for our

members and patients in Pennsylvania as well as how setting these priorities would advance emergency care through ACEP's leadership. PACEP's Councillors and Alternate Councillors deliberated in the early fall and prepared detailed testimony presented before and during Council. Their work shaped the debate and ensured that those resolutions ultimately adopted reflected the needs and priorities of emergency physicians and patients in the Commonwealth.

Council is also an important venue for ACEP to ensure that its political action committee (NEMPAC) and research arm (EMF) replenish their coffers to advance both the advocacy and science of our specialty. PACEP's Council delegation shined by being the first component body to reach 100% participation in contributions to both and received special recognition for that achievement.

Finally, our Councillors and Alternate Councillors elected the next generation of ACEP's leaders. During the summer and fall, our delegation interviewed all the candidates for the ACEP Board and for ACEP President-Elect. Their due diligence led to highly informed discussions and discernment of who could best lead the College moving forward.

**Overall, PACEP shined in our work this year at ACEP Council and successfully represented our members and patients. The Chapter always wants to involve more of our members in Council, which next year will take place in Boston.**

*continued on next page...*



## Curious about getting involved in policy-setting at the national level?

The PACEP Board of Directors is seeking interested members to join our Delegation to the 2021 ACEP Council to be held Saturday and Sunday, October 23 and 24, 2021 in Boston, MA. This year, PACEP is allotted 19 councillors, as well as alternates. Any active PACEP member who has been a member for two years or more is eligible. We want to know your opinions and thoughts!

A councillor/alternate councillor is a key participant in the leadership and development of ACEP policy and has the responsibility to voice the concerns of their (Pennsylvania) constituents on the floor of the Council meeting and in reference committees. Councillors can also express the will of their constituents by voting for or against resolutions and electing board members and Council officers.

Councillors and alternates will be a part of PACEP's resolution planning and writing efforts, discussion of and response to all other resolutions selected for review at the Council meeting, and onsite Pennsylvania Delegation events.

Interested in serving on the 2021 PACEP Delegation? Have an idea for a 2021 Council resolution? Email a brief statement of interest to [info@pacep.net](mailto:info@pacep.net) by April 26, 2021.

To learn more, visit the ACEP Council page at <https://www.acep.org/how-we-serve/council/>

If you have any questions, contact Jan Reisinger, MBA, CAE – PACEP Executive Director at [info@pacep.net](mailto:info@pacep.net).

On a personal note, I was privileged this year to both serve as our Council delegation chair and as our Chapter's nominee as a candidate for the ACEP Board. The teamwork and leadership of our Councillors and Alternate Councillors were critical to my election and the chance to bring our successes as a Chapter to the College as a whole. I will always be grateful.

Overall, PACEP shined in our work this year at ACEP Council and successfully represented our members and patients. The Chapter

always wants to involve more of our members in Council, which next year will take place in Boston. ■

If you are interested in learning more, please contact PACEP at [info@pacep.net](mailto:info@pacep.net) as the Chapter begins our deliberations in 2021.

# In Memoriam: Samuel C. Slimmer, MD, FACEP

**By Samuel J. Slimmer,  
MD, FACEP**

**Associate Medical  
Director, Life Flight**

**Associate Medical  
Director, Geisinger EMS**

**Associate Program  
Director, Emergency  
Medicine Residency**

Dr. Samuel C. Slimmer, Jr. passed away Monday, December 21st at the age of 81. While certainly this is a personal loss of the highest magnitude for me and my family, it is also a monumental loss for the specialty of Emergency Medicine.

My dad was truly one of the pioneers of Emergency Medicine. He began a 51-year journey in 1967 when the first Emergency Medicine group was formed at The Reading Hospital (now Tower Health). He joined ACEP in 1968 as one of its first members. In 1983 he moved to The Pottsville Hospital and Warne Clinic (now Lehigh Valley Health Network – Schuylkill South). He served as the Medical Director at both for many years. He also worked locums at various other Emergency Departments throughout his career. I recall finding the department schedule for a month from 1984 in his house recently. I was amazed at how he worked 20+ twelve hour shifts that month and pieced the rest of the schedule together with primary care physicians and general surgeons still building their own practice, but who were willing to put some hours in. For many reasons, not all of which I know, dad worked a lot.

Much is owed to this original generation of Emergency Physicians. In our specialty, they are truly the greatest generation. Their hard work and passionate dedication to the specialty has made it into the premier specialty that it is today. But it wasn't always easy. At the outset, many physicians outside the specialty viewed Emergency Medicine physicians as those who just couldn't cut it in other specialties. They were often ridiculed and put down and frankly viewed as 'lesser' physicians because of the specialty they chose. My dad and many others pushed back, took a lot of abuse, but lifted Emergency Medicine up on their shoulders to make it a respectable specialty.

In watching my dad over the years, he moved forward undeterred. His commitment to Emergency Medicine was unassailable. I recall going on vacation and having to listen to EM podcasts (at that time cassette tapes) for the entire four-hour ride. While I may enjoy that now, as a kid, it was a bit painful. He would spend his time on the beach reading Annals of Emergency Medicine and other journals. He attended almost every ACEP assembly. His goal

was to be as knowledgeable as possible in his own personal journey to prove to all that Emergency Medicine was its own unique specialty and was deserving of the respect so few at that time were willing to give it.

When asked in a 2018 ACEP Now interview why he decided to become a member of ACEP when it was created in 1968, he answered, "of course, why wouldn't I." I recall my Dad getting excited when he would tell the story of

the moment he found out that the American Board of Medical Specialties recognized Emergency Medicine as a specialty. He would always smile and you could hear the excitement in his voice every time. For him, it was one of his greatest days.

**My dad retired in the spring of 2018 at the age of 79. A few months ago, he looked at me and said, "You know Sam, I really miss taking care of people." I looked at him and saw the tears in his eyes. Thanks, Dad, thanks for a lifetime of dedication to plow the path clear for me and for all of us, you succeeded and made it to the finish line. ■**



# PEP-PAC 2020 Summary and 2021



**Steven D. Guyton, MD, FACEP**  
PEP-PAC Chair – 2020-2021

**By Steven D. Guyton, MD, FACEP**

It is January, and I think we are all happy to have 2020 in the rear-view mirror. There is no way to summarize the year in any concise way other than to say it was epic, unprecedented, and monumental. Despite all the challenges, we definitely had some successes that are worth noting. From a fundraising

standpoint, it was a great year. Despite not being able to gather in person, so many of you made the effort to contribute through payroll deduction, online donations, and contributions during our PEP-PAC push which raised over \$7000! The individual contributors for 2020 are listed below. Thank you all very much! Also listed are the names of the PA legislators we supported this past year.

In addition to financial contributions, PACEP members met (both virtually and in-person) with several house members and senators to discuss various topics, and we had some significant successes.

Balance billing, an ever-present ongoing issue, was once again on the forefront. As has been said before, stopping a bad bill is often as important as advancing good legislation. This was the case with HB 1862 which is officially off the table now with the end of legislative session. We will continue to be involved in the process going forward to try and advance a bill that meets the important standards of taking the patient out of the middle and protecting fair reimbursement for our physicians.

Additionally, a great deal of advocacy was done in relation to the COVID pandemic. We were able to advocate for PPE use standards and increased supplies. PACEP also helped develop messaging on the pandemic to let people know how to protect themselves and when to seek medical attention. Additionally, PACEP worked hard to gain extra liability protection for frontline workers, and Governor Wolf ultimately signed an executive order offering limited liability protection related to COVID-19 patients.

So even though the year was full of challenges, we should reflect upon the victories to celebrate together. Thank you to everyone who has supported these efforts through hard work and financial contributions. The advocacy journey is ongoing, so thanks in advance for continued support in 2021 and beyond. ■

## TOTAL CAMPAIGN CONTRIBUTIONS: \$18,400.00

Rep. David Argall	Rep. MaryLouise Isaacson
Rep. Ryan Aument	Rep. Barry Jozwiak
Rep. Lisa Baker	Rep. Aaron Kaufer
Rep. Kerry Benninghoff	Rep. Leanne Krueger
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Rep. Valerie Gaydos	Rep. Peter Schweyer
Rep. Keith Greiner	Rep. Melissa Shusterman
Rep. Patrick Harkins	Rep. Sharif Street
House Republican Campaign Committee	Rep. Michael Sturla
	Rep. Joe Webster

## TOTAL CONTRIBUTIONS TO THE PACEP PAC: \$26,948.02

Donna Balewick, MD	Annahieta Kalantari, MD
Charles Barbera, MD	Ken Katz, MD
David Barton	Thompson Kehrl, MD
Michele Belak, MD	Jacob Kleinman, MD
Ralph Bledsoe, MD	Erik Kochert, MD
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Richard F. Heath, MD	Arvind, Venkat, MD
Marilyn Heine, MD	Elizabeth Werley, MD
Claire Holekamp, MD	

# Holding Fast During These Unprecedented Times



*Kevin Argentieri, MD*  
*EM-1 UPMC Pinnacle*

**By Kevin Argentieri, MD**  
**EM-1 UPMC Pinnacle**

It's 05:45 on a dreary Tuesday morning in November. I walk into the emergency department to begin my shift and am greeted with hand sanitizer and the daily temperature check. I'm thankful to be handed a new surgical mask and not have to reuse my mask from yesterday. The waiting room has been overflowing for days and it's no different this morning. Scanning the room, the impossibility of adequate social distancing is all too apparent and I am acutely aware that every cough and sneeze could be the department's next COVID exposure, as if it's even remotely possible to count them anymore. I take a couple of deep breaths, swipe my badge, and the doors swing open before me revealing the symphony of organized chaos that my colleagues and I will own for the next nine hours. I find an open computer, log into Epic, and I am reminded that while this is my new normal, these are not normal times.

Coming to terms with the responsibility of what it means to be a doctor, accompanied by the demanding schedule and myriad new skills to learn, is a lot to take on for any intern. Medical school and my experiences prior to it had prepared my expectations in such a way that I felt as ready as anyone to take the plunge into residency. What I had not been prepared for was that these challenges would be compounded by a global pandemic.

The uncertainty that COVID-19 has brought to residency has been, as an old friend described it, "akin to walking onto the battlefield without your ammo." Medical school arms us with a set of knowledge and skills, however, our preparation only gets us so far when our daily experience ends up differing from what we had come to expect. Shifting protocols and order sets, the worry of contracting the virus or unknowingly passing it to loved ones, and the constant reminder of unthinkable suffering and lonesome death amplify the stresses that exist at our chosen profession's baseline.

We have all been forced to make decisions this year that make us feel anxious and vulnerable, but as I navigate through these complex times, I have reaffirmed the necessity of maintaining a balance and finding small ways to reconnect with who I am. A post-shift run through the woods with my dog or Zoom happy hour with old friends has had a significant impact on my ability to cope with the stressors at work and reset my motivations for the next day. I will be the first to admit that at times it is difficult to leave work at work, but focusing on the things I can control in my personal life allows me to be a better doctor, student, colleague, dog-dad, and husband.

Later on that shift I'm totally pumped after I sink a tube on first pass in patient with facial and airway burns. I swap stories with another intern who just had a patient with a GSW to the chest and got his first chest tube. We catch a glimpse of one of our core faculty beaming at us and we feed off of his energy and enthusiasm. I am reminded in moments like these that regardless of the world around us, it is a privilege to be doing what we love to do. Despite the canceled family holiday gatherings and ruined vacation plans, we must remain mindful of the fact that the world needs us now literally more than ever before.

**We will never know what this year could have looked like, but it has been humbling to know that this experience will help us be more prepared, resilient, and versatile medical providers for the rest of our careers. We will all get through this, one patient at a time, and the waiting room will empty. ■**



**Despite the canceled family holiday gatherings and ruined vacation plans, we must remain mindful of the fact that the world needs us now literally more than ever before.**



◀ Dr. Merle Carter

Dr. Meaghan Reid ▼



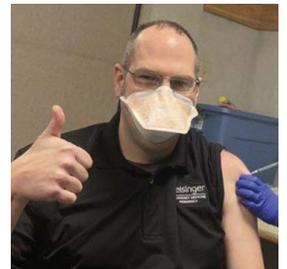
Dr. Priyanka Lauber



# #GotMyCovidShot

We're thrilled to see Pennsylvania's Emergency Physicians getting the #COVID19Vaccine!

Please email photos to Jan Reisinger at [exec@pacep.net](mailto:exec@pacep.net)



Dr. Chadd Kraus



Dr. Annahieta Kalantari



Dr. Shawn Quinn

COVID-19 Vaccination Record Card		
Please keep this record card, which includes medical information about the vaccines you have received.		
Por favor, guarde esta tarjeta de registro, que incluye información médica sobre las vacunas que ha recibido.		
Patient number (medical record or IIS record number)		
Manufacturer	Date	Healthcare Professional or Clinic Site
1 <sup>st</sup> Dose COVID-19	2020-12-21	Kimberly Lybki
2 <sup>nd</sup> Dose COVID-19		
Other		

Dr. Arvind Venkat

## New Leadership for the PACEP Medical Student Council



**Shayan Ghiaee, MS3**  
Medical Student Council Chair

**By Shayan Ghiaee, MS3, Chair**

In the words of one of my favorite medical school professors, it is an honor and a privilege to be able to introduce myself to the physician and student members of the Pennsylvania College of Emergency Physicians. My name is Shayan Ghiaee, and I will be serving as the Chair of the 2021-2022 Medical Student Council. Over my past three years at the Sidney Kimmel Medical College at Thomas Jefferson University, my passion for emergency medicine has continued to grow. I vow that our board and our school representatives will strive to increase medical student interest in the field, in hopes of expanding the ranks of emergency physicians for the next generation.

As we are currently filling the final positions on our board, I would like to take this opportunity to lay out several of our goals for the coming year. We are a very eager group of EM-interested medical students, and we look forward to working with the physician members on many of our initiatives.

One of the most important things on our agenda for this year is to create a state-wide mentorship program. While most medical students are fortunate to have emergency medicine faculty based at their home institution, there are some students who do not have this same opportunity. We will begin creating a database of EM faculty from all over Pennsylvania who are interested in advising medical students. Once physicians and students for this program have been identified, we will match them to one another and provide contact information. In this way, we hope to create a more even playing field for all students who want to pursue a career in emergency medicine.

As a former president of Jefferson's emergency medicine interest group, I was very lucky to interact and work with EM faculty from Jefferson and surrounding institutions, all of whom have varied interests within emergency medicine. As such, we will be launching a Zoom-based lecture series, in which physicians from around the state will be welcomed to speak on any emergency medicine topic they please. We hope this will continue to foster engagement of medical students in emergency medicine, especially in this time of social distancing.

We will also be using our social media pages on Facebook and Instagram to highlight different residency programs throughout the state. By allowing for takeovers of our social media by residents, we hope to showcase to medical students what life is like in different training programs. This plan is mutually beneficial for residency programs and for medical students. Students will receive an inside look at resident life, while residency programs will be able to increase their social media presence.

I would like to end by thanking our outgoing chair Alex Kurtzman, MS4 at the Pennsylvania College of Osteopathic Medicine, for all that he has done to grow the Medical Student Council, as well as to thank the PACEP Board of Directors for welcoming us as collaborators.

**We are very excited to get to work, and look forward to a very successful, collaborative year. ■**



**One of the most important things on our agenda for this year is to create a state-wide mentorship program. While most medical students are fortunate to have emergency medicine faculty based at their home institution, there are some students who do not have this same opportunity.**

## Education Committee Update



**Annahieta Kalantari, DO, FACEP**  
Education Committee Chair

**By Annahieta Kalantari, DO, FACEP**

*"It is not the strongest of the species that survives, nor the most intelligent. It is the one that is most adaptable to change." – Charles Darwin*

Sir Darwin's words brilliantly capture 2020 for all of us. If nothing else, we have all had to adapt. Education included. We cancelled our 2020 Scientific Assembly and have made the decision to hold our 2021 SA virtually. All those involved in emergency medicine graduate medical education training have had to adapt by adding more interview spots and navigating virtual interviews. We have all had to find new ways of learning and acquiring our CMEs this year, and all of this has been done in addition to the many other ways we are adapting within our personal lives and clinical work. But with these adaptations and changes come growth and new learning.

ACEP and many of the other state chapters who have held virtual events this past year have had record attendance. Our committee is learning from these organizations and working diligently to provide you with the best virtual scientific assembly event possible. Virtual interviews have created a financially responsible way for residency candidates to find their future training sites. Many residency programs are discussing ways to create a hybrid interview model for future residency candidate recruiting. And although we miss seeing one another at our live continuing medical education events, learning from the comfort of our homes has been well received by many. The forced adaptation of 2020 has provided us with many teaching points and new knowledge.

When it comes to the education committee, one teaching point for me has been that we need to grow, adapt and learn by increasing our member diversity. Our committee is dedicated to providing the emergency medicine physicians of Pennsylvania with the best educational opportunities possible. We are working on ways of creating future CME events. We are working on ways of reaching out to our communities and educating our citizens, but we need more heterogeneity in our brainstorming processes. As I know so many of you have learned and experienced new things in the last year, both positive and negative, I am asking that you consider joining our committee and sharing your experiences and ideas.

**2021 is hopeful and promising. We have a vaccine that will allow for some degree of normalcy again. We have newly gained knowledge to apply to future endeavors. We have a stronger sense of unity among one another. Let us come together, share our ideas, and learn from one another. ■**

## PACEP NOW HAS A STORE!

Get the latest in PACEP gear – Jackets and Vests embroidered with the PACEP Logo. Personalization is also available.

► Visit [doc-mom.com/collections/pacep-apparel](https://doc-mom.com/collections/pacep-apparel)



# Vote Now for 2021 Board of Directors



Michael Boyd, MD



Scott Goldstein, DO, FACEP, FAEMS, EMT-PHP



Chadd Kraus, DO, DrPH, CPE, FACEP (Incumbent)



Hannah Mishkin, MD, FACEP



Theresa A. Walls, MD, MPH

Thank you for your continued involvement with PACEP and your daily impact on the health of the citizens of the Commonwealth. As per our bylaws, the membership of the College elects the Board of Directors, your day-to-day representatives for the issues facing Emergency Medicine. As a member, you should have already received an email around February 1, 2021 with voting rules and instructions.

We have five candidates this year for four open positions (listed in alphabetical order):

- Michael Boyd, MD
- Scott Goldstein, DO, FACEP, FAEMS, EMT-PHP
- Chadd Kraus, DO, DrPH, CPE, FACEP (Incumbent)
- Hannah Mishkin, MD, FACEP
- Theresa A. Walls, MD, MPH

To Meet Your Candidates, visit [www.pacep.net/meetthecandidates](http://www.pacep.net/meetthecandidates). You will find the CV from each candidate along with the answer to these two key questions:

- 1 How will your skills/assets make the PACEP Board of Directors more effective?
- 2 What are the top changes to the practice of Emergency Medicine that you believe will happen in the next 3-5years? How do you think PACEP should react to these?

Each candidate was also given the opportunity to provide a brief optional video. For those who chose to provide one, you will find these in the meet the candidate section as well.

**Voting will close on March 8, 2021. ■**



## HOW DO YOU PRACTICE WELLNESS?

What do you do to be well outside of the ED? Do you run marathons, go fishing, paint, or lay out on your hammock? We want to show how we relax, rejuvenate, and reenergize between shifts. Share your wellness story with photo(s) to be featured at the Wellness Booth at PACEP Scientific Assembly. Do you have a talent you'd like to share in person? We are looking for musicians, singers, artists, crafters, magicians, and others to share their gifts during the Assembly.

▶ Please send your wellness stories and offers of talent to Jan Reisinger at [exec@pacep.net](mailto:exec@pacep.net). Please contact Michelle Appel at [maappel@geisinger.edu](mailto:maappel@geisinger.edu) with any questions

# ED Buprenorphine Regulatory Updates



**Michael Lynch, MD**  
Board Liaison

**By Michael Lynch, MD**

Since December, there have been several developments that impact the management of patients with opioid use disorder in the emergency department.

Congress passed H.R. 8900, a continuing appropriations resolution, on 12/11/20 that included language directing the DEA to update the “3 Day

Rule” regulations to allow healthcare providers to dispense, but not prescribe, 3 days’ doses of buprenorphine to patients for the initiation of detoxification or maintenance treatment while outpatient follow up is being arranged.<sup>1</sup>

On 12/28/2020, the final published 2021 CMS Physician Fee Schedule instituted a billing code for ED buprenorphine initiation.<sup>2</sup>

Finally, on 1/14/2021, the Department of Health and Human Services announced that it will publish guidelines to expand access to buprenorphine treatment for individuals with OUD by creating additional exemptions to x-waiver requirements to prescribe buprenorphine.<sup>3</sup>

Emergency providers are currently permitted to treat patients with opioid withdrawal in the ED using long-acting opioids including buprenorphine and methadone. However, unless that provider has obtained an x-waiver from the DEA, only a single day’s dose can be administered. Patients can return to the ED on two additional days to receive subsequent doses. The new legislation, originally introduced as the “Easy MAT Act” by Dr. Raul Ruiz (D-CA), with support and advocacy by ACEP, will allow a provider to dispense, but not prescribe, all 3 days of medication to a patient while arranging for outpatient follow up. This applies only to buprenorphine. Methadone can still be provided, but not dispensed for subsequent outpatient use. DEA has 6 months from passage to update regulations. Once regulatory language is updated, ED providers may begin to dispense a total of 3 days of buprenorphine as “to go” medications. Given the barriers and costs involved with return ED visits as well as the proven efficacy of ED-initiated buprenorphine increasing treatment engagement and decreasing illicit drug use, this update has the potential to greatly benefit our patients.<sup>4</sup>

Emergency department physicians can now be compensated for buprenorphine initiation in recognition of the time, expertise, and value of such treatment. CMS has finalized HCPCS code G2213 at a 1.3 RVU reimbursement for the “Initiation of medication for the treatment of opioid use disorder in the emergency department setting, including assessment, referral to ongoing care, and arranging access to supportive services.”<sup>2</sup>

Documentation of assessment for withdrawal and/or opioid use disorder coupled with administration or prescribing of buprenorphine and warm handoff to community treatment resources would satisfy the coding requirements. At a time when ED volumes have declined and reimbursement challenges are affecting our practices, this additional source of revenue for providing evidence-based care is a welcome update.

The 1/14/21 Department of Health and Human Services announcement would permit physicians, not APPs, to prescribe buprenorphine for no more than 30 patients at one time without an x-waiver.<sup>3</sup>

Hospital-based physicians including emergency physicians would not be subject to that limit. While this would be a significant change in current practice, these guidelines have not yet been enacted. Current DEA regulations have not yet been updated to reflect this guidance. While we should evaluate how this change will fit our various practice environments, an x-waiver is still required to prescribe buprenorphine. Our responsibility to facilitate community-based addiction treatment, ideally through a warm handoff, will remain unchanged and critical to providing effective care.

In the meantime, all ED physicians can currently provide a single dose of buprenorphine or methadone to patients in active withdrawal. Physicians with x-waivers can provide prescriptions for ongoing care or home induction of buprenorphine in appropriate patients. With or without medication treatment, active connection to follow-up care via a warm handoff mechanism remains ideal to ensure low barrier access to treatment.

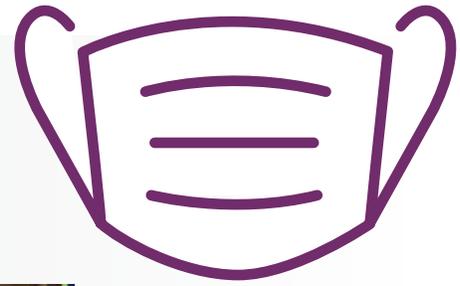
The PACEP website, [www.pacep.net](http://www.pacep.net), will provide regulatory updates as well as resources to assist ED physicians with buprenorphine treatment. ■

► *The DEA has recommended that parties interested in clarifications or submitting questions and comments regarding the HHS x-waiver exemption announcement email the DEA Policy Section at [ODLP@usdoj.gov](mailto:ODLP@usdoj.gov).*

#### References:

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# #MaskUpPa #StaySafeCoverYourFace

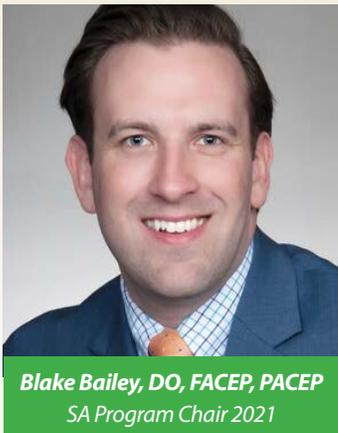


Help PACEP continue to spread the word about the importance of wearing a mask, social distancing, and washing your hands! Send us photos of you in your mask to support #MaskUpPA and #StaySafeCoverYourFace campaigns.

▶ Please email photos to Jan Reisinger at [exec@pacep.net](mailto:exec@pacep.net).



## PACEP Scientific Assembly 2021, April 8-10, Going Virtual!

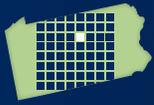


**By Blake Bailey, DO, FACEP, PACEP**

I am excited to announce that Scientific Assembly 2021 will be occurring virtually! With the flexibility and opportunities our virtual platform will offer, you won't want to miss an outstanding group of speakers to celebrate the 50th Anniversary of PACEP. In honor of this momentous anniversary, this year's theme of PACEP 2021: Past, Present, and Future will include a variety of talented speakers and leaders of the field discussing how we got here and where we could be headed in emergency medicine.

As 2021 will mark the 50th Anniversary of PACEP, there will be several events to celebrate the rich history of the organization and its impact on emergency medicine. In addition, the keynote speaker panel will consist of several key leaders of PACEP over the years discussing some of their experiences and what PACEP has meant to them.

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PENNSYLVANIA COLLEGE  
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**VIRTUAL  
LIVE EVENT**

# PACEP21

## SCIENTIFIC ASSEMBLY

**PACEP: Past, Present, & Future**

# REGISTRATION IS OPEN!

Join nearly 200 of your emergency medicine colleagues *virtually* at PACEP's premiere educational event — PACEP21 Scientific Assembly — where we celebrate the Past, Present, & Future along with our 50 Year Anniversary.

**April 8–10, 2021**



A great lineup of speakers will cover a diverse collection of topics to expand your expertise, including:

- Healthcare Disparities in Emergency Medicine: Impact of Social Determinants of Health & Implicit Bias
- Research in Emergency Medicine: How did we get here?
- Learning and Teaching in the Digital Age
- Physician, Heal Thyself! Wellness in 2021 and Beyond
- Emergency Medicine's Revenue Challenges: Past, Present and Future

All of the fantastic resident programs, including the CPC and Spivey Research Competitions, will also be taking place virtually this year.

**Don't miss this opportunity to expand your knowledge in the field, connect with colleagues, and celebrates PACEP's memorable anniversary. ■**

Registration and complete schedule details are available at  
<https://registration.pacep.net/pacep21>



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# PACEP NEWS

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where and when I work  
and still live here.*

*Dr. Abram Weimer*

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