



PRESIDENTIAL REPORT

LAURA PIMENTEL, MD

Happy Labor Day weekend! As one of the hottest summers on record draws to an end, a break in the heat is a welcome relief. Many or most of Maryland's emergency departments experienced sharp increases in patient volume. Some are attributing the increases to the heat. Others think that the persistently weak economy is responsible as patients continue to have difficulty accessing primary and specialty care. Regardless of the reason, the need for outstanding emergency physicians has never been higher.

MD ACEP is pleased to introduce a new team of lobbyists to work with us on the policy front as we prepare for the changes that could come with the election season and the next legislative session. Our new team includes Pam Kasemeyer and Steve Wise of Schwartz, Metz, and Wise <http://www.schwartzmetz.com/about-us>. They were selected after an extensive RFP and interview process. The search committee was particularly impressed by their professionalism and depth of knowledge of health care policy. We look forward to their guidance and partnership as we navigate the uncertain months and years ahead.

Medical liability reform will be an issue of enormous importance to our specialty and our partners in other specialties and hospitals. This summer saw two outlandish verdicts for plaintiffs filing suit in Baltimore City http://articles.baltimoresun.com/2012-07-31/health/bs-md-ci-harbor-verdict-20120731_1_million-verdict-baltimore-jury-cerebral-palsy. Neither defendant included an emergency physician but we are vulnerable to similar cases and allegations when we treat critically ill children. One concern is that verdicts such as these will embolden plaintiff attorneys to hold out for crushingly high settlement amounts resulting in increasing insurance premiums. Hospitals may respond by requiring hospital-based groups to carry higher policy limits to decrease their liability. It is clear that meaningful change to the current tort system is necessary.



October is just around the corner. The ACEP Scientific Assembly in Denver, CO promises to be a fantastic conference <http://www.acep.org/sa/>. Our chapter will be well represented at the Council meeting by our excellent contingent of councilors. We are most honored that MD ACEP Board of Director's member, Dr. Bill Jacquis, has been nominated for the national Board of Directors. Many of our chapter members will be faculty at the educational meeting and presenting abstracts at the research forum. We look forward to seeing many of you there. Good luck, Bill.



LEGAL REPORT

**PAM METZ KASEMEYER, ESQ.
SCHWARTZ, METZ & WISE, P.A.**

Health Care Reform Implementation

Maryland continues to be a national leader in the implementation of federal health care reform. The Governor's Office of Health Care Reform and the Maryland Health Benefit Exchange convened advisory committees over the interim to assist in the selection of the State's "benchmark" plan and to provide input on what should be considered an "essential health benefit". Several physicians were appointed to these advisory committees, assuring that issues that will impact upon the practice of medicine are addressed. In addition the Exchange continued to develop its framework for the "navigator" program and other structural and operational issues relative to implementation of the Exchange. The outcome of these interim activities will be presented to the Governor's Health Care Coordinating Council in late August. It is expected that the State will select its benchmark plan by mid-September.

Bundled Payments

MD ACEP joined MedChi, the Maryland State Medical Society, and other specialty medical societies in a letter to Secretary Sharfstein regarding new payment models, including bundled payments, and the Maryland Medicare waiver. These principles included recommendations for gain sharing with physicians as a tool for facility fee bundled payment programs; objections to bundled payment programs for professional services; and a request for special tort protection. The letter was well received by the Secretary. MDACEP will continue to be actively involved in the waiver process with regard to this issue. It remains a work in progress.

Nurse Sedation Regulations

It is expected that the Board of Nursing will propose regulations regarding the "Administration of Intravenous Moderate Sedation by a Registered Nurse" that emanate from a controversial Declaratory Ruling which MD ACEP opposed and was withdrawn by the Board of Nursing. Chapter leadership and the Public Policy Committee will be working to craft the MD ACEP's arguments and will work vigorously to oppose any provisions that will create operational and quality concerns for MD ACEP members, their patients, and the institutions they serve.

Want to become more active with MD ACEP?

Serve on a committee!

Education

EMS

Membership

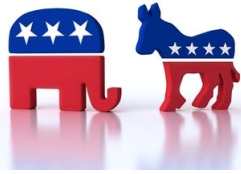
Practice Management

Public Policy/Legislative

Contact Lauren Myers if interested : lauren@amg101.com.

PAC REPORT

DAVID HEXTER, MD, FACEP



The Emergency Medicine Political Action Committee (EMPACT) provides financial support to the campaigns of legislators and candidates who are friends of Emergency Medicine and support our issues. EMPACT, along with a strong lobbying team and your grassroots support, are the keys to MD ACEP's long history of legislative success in the Maryland Statehouse. Just this year a bill concerning truth in advertising was near final passage when we discovered that it would allow emergency physicians who are not certified by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine to present themselves as board certified in emergency medicine. A quick phone call to an EMPACT supported legislator resulted in a hold on the bill until MD ACEP's concerns were addressed, over the objections of powerful special interests. This kind of influence is not automatic and does not come easy. When you send in your annual ACEP dues, I encourage you to include your membership dues to EMPACT.

In addition to EMPACT's annual memberships, I would like to recognize the following members who made leadership contributions in 2012: Michael Cetta, MD (Diamond), Angelo Falcone, MD (Diamond), Scott Freedman, MD (Diamond), Brett Gamma (Diamond), David Klein, MD (Diamond), Orlee Panitch, MD (Diamond), Aaron Snyder, MD (Diamond), David Srour, MD (Diamond), Shobhit Arora, MD (Gold), Stephen Schenkel, MD (Gold), and James Williams, DO (Platinum). If you are an EMPACT member and would like to attend a legislative event, please contact the chapter at MDACEP@aol.com. For a list of upcoming events, go to <http://www.schwartzmetz.com/fundraisers>.

Like all PACs, EMPACT is required to file detailed reports of its contributions and expenditures with the State Board of Elections. To view these reports, go to <https://campaignfinancemd.us/>.

PUBLIC POLICY REPORT

ORLEE PANITCH, MD, FACEP

Despite the fact that the summer months have been upon us, Maryland has continued to move forward towards implementation of all aspects of healthcare reform. Federal policymaking on the healthcare front has been guided by the "Triple Aim"--- improved healthcare for individuals, improved health for the population (a measure of quality) , and reduced per-capita costs. Maryland has, and continues to seek Federal funding for healthcare projects that comply with the principles of the Triple Aim. With this vigor, Maryland lead the nation in the implementation of the ACA.

Specifically, Maryland is deep in the process of developing and refining its Health Information Exchange. This summer, a focus was placed upon developing an essential benefits package, which will be the backbone of what services must be included in insurance packages sold on the healthcare exchange. Maryland has received \$157 million in Federal grants to establish this exchange--- we will be seeing more about this soon.

Regarding delivery of care, several private entities in the state have received over \$54 million in grants from CMS (the Center for Medicare and Medicaid Services) to begin reform-minded pilot projects. These reforms are in the areas of Patient Centered Medical homes (PCMH) and other changes in healthcare delivery, which will focus on a more holistic, preventative approach to chronic illness.

Now more than ever, attention is being placed upon community-based prevention and wellness efforts. There are ongoing efforts by Maryland to attempt to keep our populations healthier--- with focuses on obesity prevention, fitness and timely preventative services.

Recent legislation for the Maryland legislature has brought about activity to create a Prescription Drug Monitoring Program, which will focus upon prevention of addiction/abuse. Telemedicine is another program which is beginning to gain traction as well.

Emergency physicians are experts in many aspects of the delivery of healthcare. Our voice is critical to the process and is welcome. Please consider becoming an active participant in the process--- attend an ACEP public policy meeting, or serve as doctor of the day. Reach out to your legislators. Please be a part of the dialogue. We need you!

SAVE THE DATE:

APRIL 18, 2013

MD ACEP ANNUAL EDUCATIONAL CONFERENCE

WESTIN BWI HOTEL