

# PaACEP News

PENNSYLVANIA CHAPTER, AMERICAN COLLEGE OF EMERGENCY PHYSICIANS  
FEBRUARY 2006

## Executive Privilege

### The National Report Card – An Advocacy Tool

by Douglas McGee, DO, FACEP  
President, PaACEP



The long anticipated Report Card was finally released by ACEP in January. Our Chapter held a successful press conference in Harrisburg and overall, our Chapter has been

pleased with the Report Card's impact so far. I suggest you look at the report card and study not only what it says, but also what it means. I wanted to provide some insight from my perspective.

The *National Report Card on the State of Emergency Medicine* gave Pennsylvania a B-, ranking us 7th highest in the nation. While being 7th in the nation is much better than being 47th and there are lots of things to be proud of, closer analysis of the 4 graded areas reveals some concerning trends in Pennsylvania's emergency healthcare system.

Pennsylvania received an A in *Access to Emergency Care*, and an A- in *Quality and Patient Safety*. Ours was the highest rated state for access in the country. These two sections made up 65% of the total report card. Pennsylvania fared much better than most states in the number of per capita nurses (3rd), hospital staffed beds (14th), expenditures on hospital care (8th), emergency medicine residents (5th), and emergency medicine residency programs (3rd). We have a lot of medical

resources in our State but can you actually get emergency care? Have you been to your local emergency department lately? The waiting room is often full, patients sometimes wait to see a doctor or wait to get to their hospital beds, and in some counties in the Commonwealth finding a local specialist is impossible. Our grade in these areas is good but we need to do better.

Our hospitals need to focus on hospital crowding and we need to find more resources to expand the number of well-staffed Emergency Departments. The number of Pennsylvania emergency departments per capita ranked 33rd in the nation. The Hospital and Healthsystem Association of Pennsylvania has convened an advisory group to address hospital and Emergency Department crowding. But the crowding issue will never come into greater focus than when a natural or man-made disaster strikes and our ability to meet the surge of patients is overwhelmed. Make no mistake, it will happen in Pennsylvania.

While our state scored well in disaster training for our hospital personnel, no one really knows how our system will respond in a disaster. Representative Tom Gannon from Delaware County has recently introduced a House Resolution to assess our state's degree of preparedness.

Pennsylvania received a C- in *Public Health and Injury Prevention*. While we had respectable scores in elderly and infant immunizations, we still don't have a law that allows the police to ticket unbelted

drivers unless they get pulled over for another offense. The State's motorcyclists are cruising the highways without a helmet despite the fact that according to the National Highway Safety Transportation Administration, the highest number of motorcycle fatalities ever recorded in Pennsylvania occurred during the year after the mandatory helmet law was repealed. Addressing these two issues will improve our state's injury prevention program. The Department of Health has made youth, domestic and sexual violence prevention a high priority and some fall prevention programs for the elderly have taken root since the Report Card's data was collected. Improved public health and enhanced injury prevention programs may actually keep some Pennsylvanians from having to use our already overburdened emergency care system.

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## Annual Scientific Assembly Convenes this April in Pittsburgh

Pennsylvania ACEP is gearing up for the 33rd gathering of its Annual Scientific Assembly. The Chapter's premier educational meeting will be held from April 25 to 28 at the Sheraton Station Square Hotel in Pittsburgh.

The 2006 Scientific Assembly features only Pennsylvania physicians, according to Michael Turturro, MD, FACEP, chair of the 2006 Scientific Assembly Committee. "The faculty was recruited solely from Pennsylvania—a testament to the wealth and breath of talent we have in the Commonwealth," says Dr. Turturro who also served as program chair for ACEP's Scientific Assembly in 2002. "We are also excited about the participation and attendance of our future leaders, the emergency medicine residents from the 11 programs within the Commonwealth."

Each year, PaACEP's Scientific Assembly draws over 200 emergency physicians, residents and ED staff members from Pennsylvania and surrounding states. Participants sharpen skills, hear clinical updates and network—all while earning CME credit. Dr. Turturro says highlights of the 2006 meeting include:

- **Pre-conference workshops** – On Thursday evening, April 25, the Chapter will sponsor a "Difficult Airway Management Lab," led by Richard M. Levitan, MD, FACEP. Attendees can also sign up for the ever-popular "Poison Symposium," which is again coordinated by one of Pennsylvania's well-known toxicologists, J. Ward Donovan, MD, FACEP.
- **Life-Long Learning Self-Assessment Articles Review (LLSA)** – On April 27, the Chapter is providing review sessions for ABEM diplomats who are behind on taking their LLSA examinations to prepare them for both the 2004 and 2005 exams. "Emergency physicians who do not complete the ABEM-required number of LLSA tests will have different, more rigorous testing requirements to renew their

certifications," explains Dr. Turturro. "This year, we're offering participants the opportunity to take the exams while we review the articles as a group."

- **Procedure labs** – The 2006 meeting includes multiple, hands-on procedure labs, including advance uses of ultrasound, difficult airway management, and a dental and facial anesthesia lab.

"We are offering a wide variety of topics at the 2006 Scientific Assembly...from state-of-the-art advances in emergency medicine, to clinical updates of common conditions, to issues that affect the daily practice of emergency medicine," Dr. Turturro emphasizes. "At \$250 for 31 Category 1 ACEP credits, this is one of the best CME values anywhere. This meeting is also the place where the emergency medicine community within the Commonwealth comes together to reconnect, share ideas, and learn from each other."

### Sign up early for discounts

Tuition for PaACEP's 2006 Scientific Assembly is \$250 for members and \$425 for non-members if you register before April 1. First-year graduated residents, current residents and medical students attend free. To review the detailed program agenda or to register, check the enclosed brochure or visit the Chapter's secure website, [www.paacep.org](http://www.paacep.org).

PaACEP has reserved a block of rooms at the Sheraton Station Square Hotel for Scientific Assembly attendees. Single rooms cost \$129 per night; while double rooms are \$149, plus tax. The reservation deadline is **March 28**. After that, reservations will be accepted on a space and rate availability basis only. To reserve your room, contact the hotel directly at 412-261-2000. Remember to mention PaACEP when calling to be eligible for the reduced rate.

If you have questions, please call Meeting Manager, Lauren Brinjac at the PaACEP office, 888-633-5784, extension 1484 or send her an email at [lbrinjac@pamedsoc.org](mailto:lbrinjac@pamedsoc.org). ■

## AMPAC Campaign School

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Recognized as one of the top programs in the country, this comprehensive educational experience will mold you into a winning political strategist. As a graduate of the AMPAC program, candidates will rely on you to give advice on strategy, message and campaign plans.

Attendees include physicians, spouses of physicians, residents and medical students interested in becoming more involved in politics. Participants range from those attracted to grassroots efforts to those considering becoming a candidate for public office. Participants possess the desire to make a difference for organized medicine by applying techniques learned at the Campaign School to political contests in their communities.

Political training experts teach insider tactics from both ends of the political spectrum. These professionals are the people currently advising and assisting campaigns at every level around the country.

During the five days, you will develop a new understanding of how campaigns are run. You will become an invaluable source of ideas and wisdom that can help your candidate reach voters, inspire them to commit to your candidate, and bring in the necessary contributions and votes.

For registration information, contact Jim Wilson, PhD, Manager, Political Education Programs, American Medical Association, 202-789-7465 or [Jim.Wilson@ama-assn.org](mailto:Jim.Wilson@ama-assn.org). ■

### PaACEP Needs You...Volunteer

Your Chapter is looking for a few good men—and women—to serve on 2006 PaACEP Committees.

Volunteering your time and expertise to help your state specialty society enables PaACEP to move forward and effectively address the critical issues facing you and your patients today. Serving on a committee also gives you the chance to enhance your skills and gain invaluable experience.

“I have met some interesting and smart emergency physicians serving on the EM Practice Committee. I find we all have similar challenges, yet have learned some novel solutions to problems I encounter. I feel very up-to-date about evolving issues in our specialty,” says Ken Doroski, DO, FACEP. “You get to be at the forefront of evolving challenges and there’s an internal sense of satisfaction doing non-clinical emergency medicine.”

Not convinced? Take a look at some of the benefits of volunteering...

- **Teamwork** – You’ll work with others—outside your ED—to gain a new level of team experience.
- **Management** – Whether you’re the chair or a member of a committee, you’ll gain real world management experience and observe the leadership styles of others.
- **Organization** – As you get involved with activities outside work, you’ll learn time management and organizational skills that can help in all aspects of your personal and professional lives.
- **Networking** – New alliances often start when volunteers share a common interest doing committee work. You may even make new friends.

*continued on page 6*

## Medical Economics

### Medicaid Denials

by Steven Brunetti, DO, FACEP



Are you aware of the increasing number of denials you may be receiving from the PA Medicaid Program regarding the Recipient Restriction Lock-In Program?

Due to the increasing volume of Medicaid recipients who are deemed by the Medicaid program to be misusing or defrauding the program, the State of PA has started to restrict these members from using certain types of services such as the emergency department.

Since the summer of 2005, there have been an increased number of Medicaid denials due to the Medicaid Lock-In program. Upon further investigation, I discovered that the state is denying payment for their

recipients that have had multiple recurring visits to various emergency departments.

To ensure that proper payment is received from the Medicaid program, and in order to have these claims adjudicated, you must first obtain a Medical Assistance Restricted Recipient Referral from the patient’s Primary Care Physician authorizing the ED visit or any procedures performed in the ED on that day. Once the referral is secured, you may refile the claim with the referral attached along with the appropriate information completed in blocks 17, 17A and 19 on the CMS-1500 claim form. Be sure to also include the original ICN number in block 22.

If you have questions, or need specific information, contact Michelle A. Kijek CPC, CCS-P, RMC, Director of Coding and Billing Services of the Medicaid Lock-In program at 570-969-4069 ext 309 or [Mkijek@cprcoding.com](mailto:Mkijek@cprcoding.com). ■

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### PaACEP News Changes with the Times

Watch for your March issue of *PaACEP News* in your e-mail rather than your mailbox. Next month, the Chapter's newsletter will be delivered as eNews in the Chapter's effort to deliver specialty news faster and easier to read. In April, the newsletter will again be mailed in its traditional printed form.

"Our world continues to be bombarded by advancements in technology which surrounds us in all aspects of our lives... news, medicine, politics. We rely on computers and the Internet to perform many of our daily activities. In keeping with this trend and to support the needs of our younger, newer physicians we must ride the wave," comments L. Albert Villarin, Jr., MD FACEP, who chairs PaACEP's Communications Committee. "We will transition over the year to this new eNews platform. We will also seek member feedback during the process."

Dr. Villarin said the Chapter decided to alternate printed and email versions of its popular newsletter to improve efficiency and defray costs. "Electronic publication and distribution is rapid, efficient, and highly condensed for easy reading. Publication costs are minimized," Dr. Villarin explains. "It's part of the Communications Committee's continuing commitment to technology for our members."

As 2006 progresses, the Chapter will periodically survey members to gauge their satisfaction with changes made to its monthly newsletter. At year's end, member feedback will determine whether an eNews platform will be continued or whether *PaACEP News* will revert back to a printed publication. "In the meantime, I encourage members to give me their opinions. My email is always open for suggestions," Dr. Villarin says. Contact Dr. Villarin at [villaria@einstein.edu](mailto:villaria@einstein.edu). ■

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# Chapter Releases Pennsylvania Grades At Press Conference in Harrisburg

On Tuesday, January 10, Pennsylvania ACEP held a press briefing at the State Capitol in Harrisburg to unveil the first-ever, comprehensive analysis of emergency care in the state. The American College of Emergency Physicians' *National Report Card on the State of Emergency Medicine* gave Pennsylvania an overall B- grade, ranking it seventh in the nation.

PaACEP's press conference drew coverage from major media in the state. The Associated Press, Radio Pennsylvania, Capitolwire, several radio stations, including KYW in Philadelphia, and numerous newspapers statewide reported on PaACEP's briefing. At the press event, the Chapter called on Governor Ed Rendell to appoint a task force to review Pennsylvania's Report Card and identify problem areas. As follow up, Dr. McGee also authored an editorial piece in the *Harrisburg Patriot News* and met with editors at the *Philadelphia Inquirer*.

ACEP's first national and state-by-state report of its kind provides state and federal policy makers with a road map for improving emergency care. Pennsylvania received letter grades in four categories—access to care, quality of care and patient safety, public health and injury prevention and the medical liability environment. The grades were based on objective and credible criteria and measure the state's support of the emergency health care system through its laws, policies and funding, not on the care provided by emergency departments or physicians.

"Pennsylvania's Report Card is a useful tool for the public, health care providers, policy makers and the governor to use to measure progress," Dr. McGee told the media. At the press conference and in a follow-up letter to Governor Rendell, Dr. McGee asked the governor to appoint a task force to review Pennsylvania's Report Card to address the following:

- Determine if other data sources or more current data sources more accurately reflect the state of emergency care in Pennsylvania.
- Coordinate the efforts by various stakeholders, some of which are already working to improve some issues cited in the Report Card
- Develop and implement strategies to remove access barriers to emergency care in Pennsylvania. ■



## Executive Privilege

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Pennsylvania ranked 6th lowest in the country for *Medical Liability Environment*; we received an F. While there may be many reasons to address this issue, the most important is that the consequences of a poor liability environment impact our patient's access to emergency care. In our unfriendly liability environment, only one in five Emergency Medicine residents in our training program stay after four years. There are Emergency Departments in rural Pennsylvania counties that cannot access specialty care for critically injured or ill patients. The Governor and the legislature

have provided some short-term relief and have begun to improve our liability environment. Emergency Physicians who work in the state's trauma centers have benefited from some of this short-term premium relief. Not surprisingly, more than 8,000 trauma patients in Pennsylvania are initially resuscitated in non-trauma centers each year. These Emergency Physicians need the same relief too. Stabilizing premiums and lawsuit filings do not necessarily indicate that the environment has improved. We need to find a way to increase the number of specialists in neurosurgery, orthopedics and obstetrics willing to take call for our Emergency Departments.

The National Report Card for Emergency Medicine can be a useful tool for the public, healthcare providers and policy makers, and the Governor to use to measure our progress. Pennsylvanians should be proud of all of you: the men and women who are ready to respond 24 hours a day 7 days a week to personal catastrophes or our State's next natural catastrophe. As we continue to press our advocacy agenda and make progress on some of the issues raised in the report card, we'll keep you posted. Come to the PaACEP Scientific Assembly in Pittsburgh where you will have a chance to hear ACEP President Rick Blum, MD give his overview of the Report Card Project. ■

## EDIS 2005

by Alan Forstater, MD, FACEP

The introduction of an Electronic Medical Record (EMR) into an ED is the Holy Grail. At the 11th Annual National Symposium on ED Information Systems (isEDIS) held in Scottsdale, AZ Dec 5-8 this myth was challenged while still reaffirming the incremental value of certain components of an EDIS. Over 200 registrants and 21 exhibitors attended the meeting. An in-depth conference schedule was designed to prepare people for all aspects of purchasing and implementing an EDIS. This schedule was punctuated by blocks of exhibit hall time. Section members gave many of these presentations.

### 2005 highlights included:

- An illustration of a successful EDIS installation, a recipe for success in the purchase and implementation of an EDIS and a presentation about the impact of an EDIS installation on work process, especially if it has passive tracking.
- Debate about whether clinical decision tools and reminders in an EDIS would be effective in changing practice and in reducing the incidence of medical malpractice claims or improving patient safety.
- A presentation on concepts of successful ED facility designs that incorporate functional ED information systems.

The cutting edge was in the limelight during presentations on regional data collection and analysis; unique applications of technology that can be integrated with the EDIS; and space age technology, such as software that formulates 3D reconstructions from CT images and robots in the hospital that detect infection or malignancy by sniffing.



The session also included an update on the efforts of members of the ACEPs' Section on Informatics to collaborate with others on a consensus on "Standards" for the new HIPAA regulations as well as a look at an inpatient bed board tracking system that has been used successfully to improve hospital and therefore ED flow.

Additionally, a special forum informed vendors of the new HIPAA regulations and acted as the seed for future collaboration on adoption of common standards and interoperability.

All in all it was very informative, providing registrants with the tools they need to purchase and implement an EDIS, plus the ability to compare the major players in one location while entertaining and stimulating attendees with technology available in the present and the future. The course was a resounding success with excellent evaluations by the large audience. Don't miss the 12th Annual isEDIS in Orlando, FL, December 10-13, 2006. And don't forget to visit the [isEDIS.com](http://isEDIS.com) website for more details about the course's growing list of articles about EDIS and a new forum for Buyers and Users to enter information or seek information. ■

### PaACEP Needs You... Volunteer

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- **Feel Good** – The experience of giving back to your profession can't be accounted for in a paycheck -- it's very satisfying. By volunteering, you'll discover a sense of community with your colleagues that you can take back to your own organization.

"After many years in practice, I like giving back my experience and knowledge. If we don't define our own specialty, someone else will do it for us," explains Freda Lozanoff, DO, FACEP, who serves on the Education Committee. "Our role and function in the ED changes daily, and serving on a committee helps us shape our own future and the direction of our specialty."

### You have the time

PaACEP offers many opportunities to get involved and matches your interests with the Chapter's needs. PaACEP also strives to keep the time and travel commitments for its committee members to a minimum. Committees hold on-site meetings only twice a year—once at PaACEP's Annual Scientific Assembly and once in Harrisburg. All other committee work is done via telephone, mail or email.

"Committee work gives your voice a larger audience. Rather than just expressing your concerns and ideas locally in your own group or medical staff, you are heard across the state and even carried to the national level in some instances through the ACEP 'pyramid,'" comments Robert Whipkey, MD, FACEP, who volunteers on both the EM Practice and Medical Economics Committees.

Each year at the Scientific Assembly, Chapter committees welcome new members to their ranks. To add your name to the pool of active committee members, simply fill out the enclosed Committee Interest Form and return it to the Chapter office.

"PaACEP committees are the workhorses of the organization. Many excellent projects have been launched and successfully completed under the auspices of Chapter committees, and this will continue into the future," says Michael A. Bohrn, MD, FACEP, an Education Committee member. "It's easy to become involved in PaACEP committees, and being involved allows me to feel that I'm a true contributor to the organization. The more Pennsylvania's emergency physicians become involved with PaACEP, the better the work that we can do for our home institutions and for our state." ■

**Pennsylvania, Greenville/Sharon:** UPMC Horizon—with hospital sites in Greenville, PA, and Farrell, PA—serves the Mercer County region in northwestern PA and offers a full range of services at both campuses. The Greenville Campus ED sees 18,000 patients annually with 24 hours of physician coverage and 10 hours of physician-extender coverage. The Shenango Valley Campus ED sees 15,000 patients annually with 12-hour physician shifts. The cost of living is low, the patient population is pleasant, outdoor activities are plentiful, and the amenities of Pittsburgh are easily accessible. Excellent salary with full benefits including paid malpractice insurance with tail, employer-funded retirement plan, paid health insurance, CME allowance, etc. Board certification/eligibility in EM or board certification in IM/FP/SUR with EM experience required. Call Dr. Robert Maha at 888-647-9077/Fax 412-432-7480 or email at mahar@upmc.edu.

**Pennsylvania, Pittsburgh:** Exceptional Medical Director opportunity at the nationally-renowned Magee-Womens Hospital. Magee is part of the prestigious UPMC Health System and the full service ED sees 10,500 patients annually including both male and female patients. In addition to maintaining its status as a center of excellence for women's healthcare, Magee is now expanding its services to include comprehensive medical/surgical care. This position provides a tertiary care setting with academic and research opportunities. Candidates should be board-certified in emergency medicine and preference will be given to candidates with an interest/background in women's health care. Excellent compensation package with full benefits including paid malpractice with tail, employer-funded retirement plan, paid health insurance, CME allowance, etc. Contact Dr. Robert Maha at 412-432-7404 or mahar@upmc.edu

**Pennsylvania, Pittsburgh Suburb:** UPMC Passavant Hospital is located in an affluent suburban area with excellent housing and schools, and is a short commute from the amenities of Pittsburgh. The progressive ED sees 33,000 patients annually with 36 hrs of physician coverage and 15 hrs of physician-extender coverage daily. The ED is state-of-the-art with excellent nursing staff and great on-call coverage. An outstanding compensation/benefit package includes paid malpractice with tail, employer-funded retirement plan, paid health insurance, CME allowance, etc. EM board-certification/preparation required. Call Dr. Robert Maha at 888-647-9077/ Fax 412-432-7480 or email at mahar@upmc.edu.

**Pennsylvania, North of Pittsburgh:** Jameson Hospital is less than an hour drive to Pittsburgh, PA. The ED sees 35,000 patients annually with 42 hours of physician coverage & 12 hours of physician-extender coverage daily. The surrounding community offers a great lifestyle with affordable housing and a low cost of living, and is close to the amenities of Pittsburgh. Jameson offers an outstanding compensation/benefit package including paid malpractice insurance with tail, employer-funded retirement plan, paid health insurance, CME allowance, etc. Board certification/eligibility in EM or board certification in IM/FP/SUR with EM experience required. Call Dr. Robert Maha at 888-647-9077/Fax 412-432-7480 or email at mahar@upmc.edu.

**Colleagial Group at Lehigh Valley Hospital Seeks 2 More Emergency Medicine Physicians:** Join 44 EM physicians and 12 PAs evaluating over 114,000 patients at the three local sites of 800-bed Lehigh Valley Hospital in Eastern Pennsylvania ([www.LVH.org](http://www.LVH.org)), winner of numerous quality awards. Must be clinically excellent, patient focused and EM Residency trained. Great opportunity for advancement. We have electronic: medical records, physician order entry, documentation, radiology, etc. Largest Level I Trauma program in Pennsylvania, Regional Burn Center and 18 fully-accredited training programs, including one in Emergency Medicine. Competitive salary and robust benefits including fully-funded family healthcare, 3 forms of pension, malpractice, 5 weeks of PTO plus one week of CME with \$4,500 annually, etc. LVH located in the beautiful Lehigh Valley, with 700,000 people, excellent suburban public schools, safe neighborhoods, 10 colleges and universities, moderate cost of living, one hour north of Philadelphia and 90 minutes west of NYC. Email CV to carol.voorhees@LVH.com. Phone (610) 402-7008.

**Chair, Department of Emergency Medicine:** University of Pittsburgh Medical Center (UPMC) Shadyside Hospital is a tertiary-care teaching hospital within the city of Pittsburgh. The campus includes the nationally-renowned Hillman Cancer Center, offers a full range of specialty and subspecialty services, and supports numerous teaching programs. The progressive Emergency Department sees 36,000 patients annually with 52 hours of physician coverage and 22 hours of physician-extender coverage daily. Shadyside is an upscale area of the city with great housing and easy access to numerous amenities of Pittsburgh, and is also a short commute from Pittsburgh's finest suburbs.

Candidates should have a record of excellence in administrative leadership and clinical skills, as well as a background including academic/teaching activities. Interested candidates should send a letter of introduction and cv to Dr. Robert Maha, Quantum One, 2 Hotmetal Street, 2nd Floor, Pittsburgh, PA 15203 or via email at mahar@upmc.edu. Phone: 412-432-7404.

**Hanover, PA – Emergency Medicine Staff Physician:** TeamHealth East is seeking a physician who is BC/BP in EM with a current Pennsylvania license for a Full-time position at Hanover Hospital. This position offers highly competitive compensation and paid professional liability insurance. Contact Karen-Marie Johnson Toll free (800) 848-3721 ext. 4348, or Fax (865) 291-3632 or email your CV to Karen-Marie.Johnson@teamhealth.com. Hanover, Pennsylvania, sits at the base of the rolling Pigeon Hills. As one of the largest retail areas in the state and one of the largest manufacturing regions. industrial and residential areas blend harmoniously, and the community is free from substandard living areas. Residents of Hanover celebrate the town's German and Dutch heritage during the annual Dutch Festival that features artists such as blacksmiths, quilters, and sculptors. Although Hanover is removed from the busy metropolitan bustle, it is not far from the sophisticated charm offered in Washington, D.C.; Baltimore, Delaware; and Philadelphia. In addition, just a short drive past Baltimore is Delaware's Rehoboth Beach. Spend a weekend at this hot vacation spot, which offers some of the nicest amenities and cleanest beaches the Mid-Atlantic coast has to offer.

### The PaACEP Board of Directors welcomes the following as members of the American College of Emergency Physicians and Pennsylvania ACEP

#### New Members:

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Eleanor Fernandez-Dunham, MD  
Mark A Hoffman, MD  
Karen Jill Lefrak, MD  
Lewis March, MD  
Mary Jane Pranievicz, MD  
Pranav Shetty  
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#### Moved into Chapter:

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