

EPIC



COLORADO CHAPTER
**American College of
Emergency Physicians**
ADVANCING EMERGENCY CARE

A Challenge-Filled 2020



by Nathaniel Hibbs, DO, MS, FACEP

In the *Long Walk to Freedom*, Nelson Mandela wrote “After climbing a great hill, one only finds that there are many more hills to climb. I can rest only for a moment, for with freedom come responsibilities, and I dare not linger, for my long walk is not yet ended.” I find

these words to be quite profound when reflecting on the state of Emergency Medicine today. We have faced so many challenges this year and continue to face new challenges almost on a daily basis.

COVID-19 has been a defining challenge for our profession. I want to first thank each and every one of you for putting your lives on the line to care for the people in each of your communities. From PPE shortages to the lack of viable treatment options to bed shortages, the members of COACEP have cared for our patients admirably. When the COVID-19 outbreak first hit CO, we at COACEP initiated frequent conference calls of medical directors from virtually all areas of CO. We identified issues our members were facing and advocated these concerns to both state and federal legislators, including: additional PPE availability, funding to maintain financial viability of large and small physician groups, increasing bed capacity

to handle surges in disease, as well as many other issues. Our pledge to you is to support and fight for our members and our communities no matter how long it takes.

We have also faced unprecedented economic challenges as a result of COVID-19. Many of you have seen friends and colleagues furrowed or laid off and we have all seen significant reductions in our group incomes. While we continue to adjust to these new (hopefully temporary) realities, we will continue to advocate for our members and their families financial stability.

Lastly, we are facing a time of significant partisan political divide. I want to encourage each and everyone one of you continue to support those policies and beliefs that you hold dear. Know that COACEP will fight for the betterment of Emergency Medicine no matter the political dynamic of the moment. We will be aggressively pursuing strategies to reduce the negative impact of prior balanced billing legislation, maintaining one of the premier medico-legal environments in the country, fight for appropriate and confidential care of physician health needs, fight against barriers to access to care for our patients, improve the mental health care environment in CO, and many other issues that impact your ability to take care of the patients you see every day.

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**American College of
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“The mission of the Colorado Chapter, American College of Emergency Physicians is to serve as the primary organization in the State of Colorado representing the specialty of Emergency Medicine, promoting the interests and values of emergency physicians and patients by giving physicians the tools to support the highest quality of emergency medical care.”

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Despite all of these challenges, I know that the members of COACEP will hold steadfast in their dedication and commitment to the patients that walk through our doors. Together we will weather the many challenges we know of and those that have yet to present themselves for our long walk has not yet ended.

Thank you for all you do.
Sincerely,

Nathaniel Hibbs, DO, MS, FACEP
President, COACEP **E**



Together we will weather the many challenges we know of and those that have yet to present themselves for our long walk has not yet ended.



The Colorado ACEP Annual Meeting

will be held virtually on January 20, 2021 from 12 noon to 2:00 PM. Sue Sedory, Executive Director, national ACEP will be addressing the Colorado ACEP members and sharing her vision for the direction of ACEP. Please mark your calendar and plan to join us.



Colorado ACEP Board of Directors will have three openings effective January 20, 2021. If you are interested in serving please contact Suzanne Hamilton at Suzanne.hamilton@comcast.net.

The Board has been meeting virtually, thereby making it more convenient members to participate, from 12 Noon to 2:00 PM. Below is the 2021 meeting schedule.

- January 20, Annual Meeting
- March 24
- May 26
- July 28
- September 22
- November 17



There is an opening for a **2021 Fellow**. If you are interested, please see the application on our website (coacep.org). Forward the application and your CV to Suzanne.hamilton@comcast.net.

Colorado Election Update

In 2018 Colorado turned blue when Democrats took control of the Governor's office, Senate, and House. Democrats held those gains in the state House and are building on those gains in the Senate. On statewide ballot measures, Colorado's electorate showed its purple roots by passing a government run paid family leave program along with a reduction in personal income tax and putting restrictions on the legislature's ability to create new fees.

COLORADO HOUSE

In the Colorado House of Representatives, there were few surprises. Democrats maintained their 41-24 majority. Each party lost one member while adding a new member. Without large gains, committee structures will remain with Democrats holding at least a three-seat majority.

With House seats decided, the focus will be on leadership elections. Current Majority Leader Alec Garnett is expected to become the next House Speaker. A three-way contest for Majority Leader will affect the caucuses' tone and posture heading into the 2021 session. Republicans face a significant crossroads. Former House Minority Leader Patrick Neville announced he would not run for re-election to his leadership post. Now, House Republicans must decide if they want more centrist leadership or to continue to hold-up the more conservative wing.

COLORADO SENATE

In the Senate, Democrats built on their majority to at least 20 members. There are

two incumbent Republican races that are tight. Less than 230 votes separate incumbent Sen. Bob Rankin (R) from his opponent, Karl Hanlon (D) with 90 percent of precincts reporting. If this margin remains it is within the .5% margin it would trigger an automatic recount. Incumbent Sen. Kevin Priola (R) is ahead of challenger Paula Dickerson (D) by just over 1100 votes. This is outside of the recount margin. If vote totals hold in this race, Democrats could request a recount but will have to pay the costs. If the current vote counts hold, the Senate split will be 20-15. This is likely to keep the same committee structure with Democrats keeping a one or two seat majority.

KEY BALLOT INITIATIVES

Proposition 116, reducing personal income tax, passed reducing the state's revenue. Proposition 118 passed and creates a state-run paid family leave program. Amendment B, which eliminates the imbalance between commercial and residential property taxes (known as the Gallagher Amendment), passed. Understanding how these initiatives work

together in Colorado's complex budget mechanics will be a critical aspect to the 2021 session especially given the unknown economic impact of COVID. Colorado has numerous taxing and spending limitations imbedded in the state constitution known as the Tax Payor Bill of Rights (TABOR). The Joint Budget Committee and the budget process casts a wide shadow on the session and each of these initiatives will create new circumstances to navigate.

2021 SESSION

With election day over and leadership election this week, there will be more focus on the future, and how COVID will impact the 2021 session. There are still hard feelings among Republicans and Democrats about the legislative process and COVID restrictions during the final three-weeks of the 2020 session. The Colorado Supreme Court has given the legislature the flexibility to start and stop the legislative clock due to the public health emergency. They must at least gavel in on January 13th. However, this does not address the complex issues of public participation in the process and access to the Capitol.

2021 EXPECTED LEGISLATION

In addition to COVID-19 related legislation, we are expecting legislative proposals that will impact CoACEP including, but not limited to, the use of ketamine by paramedics, peer health confidentiality and once again legislation that addresses out-of-network participation. **E**



Colorado ACEP COVID-19 Task Force Update

By Ramnik Dhaliwal, MD, JD • COACEP Treasurer • Chair, COVID-19 Task Force

As cases of COVID in the state have begun to rise again and the concern for a perfect storm of COVID and respiratory virus season mounts, COAEP has reconvened our statewide Medical Director meetings. With these meetings we continue to exchange information on trends, clinical practices, testing, and different system wide initiatives across the state. Further, as everyone knows, we are also facing capacity issues across the state which is further stressing our healthcare system in the state as well as our ability to care for our patients in the ED. Through these meetings our ED Directors are working together to come up with ways to ameliorate these issues.

Throughout the year this group has also spent time speaking with legislators both nationally and at the state level. The goal has been to inform legislators as to what is happening on the front lines in our communities in Colorado. The group has

pushed for increasing state PPE supplies, ensuring proper planning for continued responses to COVID and possible future infectious illnesses, discussing physician mental health issues, and other issues related to the practice of Emergency Medicine in our state.

If you have any issues or concerns you would like the COVID task force to address, please feel free to email me at rdhaliwal.md@gmail.com. We want to hear from you as to anything COVID whether it is ideas on PPE, concerns, or any questions. Also, we are looking to increase the number of medical directors who are participating in the calls as they have been invaluable. If you are a medical director or assistant medical director and would like to be a part of these monthly and sometimes bimonthly calls, please email Suzanne Hamilton at: Suzanne.ACEP@comcast.net. **E**



ABEM Newsletter included the following message:

Changes to Continuing Certification

ABEM listened to suggestions from the Emergency Medicine community and is pleased to announce improvements in how ABEM-certified physicians can stay certified.

- Beginning in spring 2021, physicians will be able to use MyEMCert to stay certified instead of taking the ConCert Exam
- Starting in 2021, all ABEM-certified physicians will transition to a 5-year

certification period after their current certification expires

- Physicians will move to an annual fee structure when they begin a 5-year certification cycle rather than paying for each LLSA test or MyEMCert module

A few important things to note:

- Your current certification expiration date will not change

- No increase in fees - the annual fee is the same as the current (annualized) rate over 10 years
- The annual fee will be implemented in the same year your next certificate is issued
- The ConCert exam will no longer be offered after 2022. **E**

Emergency Physicians Urge Thanksgiving Precautions to Avoid Becoming a COVID Super Spreader Event

WASHINGTON, D.C.—This Thanksgiving, the American College of Emergency Physicians (ACEP) recommends that holiday hosts and guests prioritize efforts to prevent the spread of COVID-19 and take steps to protect the health and safety of friends and family.

Emergency physicians recommend everyone heed the Centers for Disease Control and Prevention (CDC)'s holiday safety recommendations this year.

Remember anyone can get or spread COVID-19. Close friends and family with whom you don't live with can still contract and spread the virus to you the same way a stranger could.

Trim the guest list. Rather than a specified "safe" number of guests, public health experts suggest that hosts determine the size of a gathering by how many guests from different households can remain at least six feet apart. Note that a "household" is made of people who live in the same house every day. Family members who are close but don't live at home, such as college students visiting for the holiday, are considered a separate household in public health terms.

Cover your face and maintain your distance. It may be difficult but try to avoid hugs and handshakes. People should also cover their face when they are not eating or drinking.

Stay outside and stay safer. If it is possible, hosting a small event outside instead of inside is preferable.

Encourage good hygiene. Hosts should make sure that bathrooms have plenty of soap so guests can frequently wash their hands and single-use towels.

While there are precautions you can take this holiday season, the safest option for some will be to stay home. Do not attend an in-person gathering if you or anyone in your household has been diagnosed with COVID-19 and has not met the CDC's criteria for when it is safe to be around others. Stay home if you show symptoms, if you are waiting for COVID-19 test results, or if you have been exposed to somebody with COVID-19 in the last 14 days.

Remember, emergency physicians work 24/7, even on holidays. Do not ignore your symptoms if you think you are having a medical emergency—if something is wrong call 911 or visit your closest emergency department. Emergency departments across the country are taking extensive precautions to adapt and protect patients. If holiday plans go awry, emergency departments are safe and ready for anything or anyone that comes their way.

Read more about COVID-19 and Thanksgiving safety at www.emergencyphysicians.org. **E**



"If you are planning to get together on Thanksgiving, it is a good idea to reduce the risks that invite COVID-19 into your home," said Mark Rosenberg, DO, MBA, FACEP, president of the American College of Emergency Physicians (ACEP). **"Even a small gathering of family or close friends can still contribute to the spread of the virus."**

"Unfortunately, the safest option for older individuals or people with weakened immune systems is to skip in-person gatherings this year," said Dr. Rosenberg. **"It may be disappointing to adjust traditions or modify plans in the short-term, but these decisions can save lives."**