

A Newsletter for the Members of the Colorado Chapter - Summer 2021



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Working Together for Colorado ACEP

by Ramnik Dhaliwal, MD, JD
President, Colorado ACEP

Since the beginning of COVID there has been an upheaval within delivery of care and our EM practices both in Colorado and across the country. The initial rise in virtual care and severe drop in volume has been supplanted by a shortage of nursing and a rapid increase in volumes in the first part of 2021. This has created stressors in all our departments with boarding in the ED which has led to slow throughput and large numbers in the waiting room. We are now dealing with surges in COVID in many parts of our country and state, specifically amongst those who are unvaccinated. Through all of this, the emergency department has continued to show our role as being there for our patients 24x7x365. Through all of this, CO ACEP has continued to work to provide value to all our members while continuing to bring more of our colleagues on Board, so our voice grows larger in the state.

- To that end, our BOD now has representation from multiple groups in the front range, academia, and multiple groups on the western slope.
- Since COVID has been upon us, we have also brought together a large group of medical directors and other leaders within the EM community across the state. This group succeeded in its goal of exchange of ideas while at the same time creating a venue for the public to come to ask questions and become informed, including legislators.
- For newer grads we are interested in addressing issues that are specific to them. To that end, we have created a task force that is specifically looking at scope of practice and identifying those issues that are more specific to newer grads such as job stability, scope of practice, financial stability, loan repayment, and other areas.
- We are working to expand our educational opportunities in the state by putting together our first CME program which we will hold later this year both virtually and in person with the topic being “Abuse and Human Trafficking”, something which we deal with daily in our ED’s, many times unknowingly.
- CO ACEP is one of the founding partner organizations of the CO Naloxone Project which we hope will help us to reach our goal of providing lifesaving naloxone to our high-risk populations for use as OP so as to decrease the mortality and morbidity of opioid use.

While these are just a few examples, what we can do as an organization in the state is only possible with those willing to participate and volunteer in these activities or who are willing to bring new ideas to the table. I ask that if you have an interest in legislation, education, clinical care, event planning, or any other interest you would like to bring to the table, please join us. Even if you don’t have a specific area of interest yet, you can join one of our meetings:

- All of our BOD meetings can be joined virtually.
- Participate in a CO ACEP committee which include, education, membership, legislative, opioid, and young physicians.
- If you are going to be in Boston for Scientific Assembly, please let us know.
- We will have our annual CO ACEP meeting in January of 2022 and will do this in conjunction with our first ever ED Med Directors Symposium. We hope to have our mountain venue identified in the near future with the dates being the 19th-22nd of January tentatively.

We can all agree that it has been a difficult year and half in all aspects of our lives, one thing which I have learned is that we are resilient and when we work together, we are stronger and our practice, our well-being, and our patient’s will all benefit. CO ACEP is here for you and we will continue to be here to protect our profession and our patients here in CO. Please feel free to reach out to me (rdhaliwal.md@gmail.com) or Suzanne Hamilton (suzanne.hamilton@comcast.net) our Executive Director, if you have any questions or if you want to get involved.



Colorado ACEP Goes to Washington DC

This was another successful year of lobbying at the Leadership and Advocacy Conference sponsored by National ACEP. This year's offering was a hybrid course of both in-person and virtual attendance. Lectures were exciting and informative with a world-class slate of speakers. I highly recommend this conference as a great way to introduce yourself to lobbying and advocacy if you are interested in getting more involved.

Unfortunately, I was unable to attend in person, but enjoyed the virtual platform which allowed us to connect with our state representatives. We had the opportunity to meet with representatives for all Senate and House offices from the state of Colorado. We spent time lobbying for improved access to mental health care for healthcare professionals and urged our representatives to sign on to the Lorna Breen Act. Another important topic of focus was relieving the barriers to medication assisted treatment for opiate use disorders by removing the requirement for physicians to have an X-waiver to prescribe buprenorphine. Our Colorado representatives seemed receptive to these initiatives. Additionally, we were able to offer ourselves up as a resource for our political colleagues to reach out for advice and information as medicine adjacent bills come up throughout the legislature. Establishing that line of connection is so important to our efforts in advocacy!

We had many great participants from Colorado this year, each with their own highlights and perspectives!

Allison Trop, MD, FACEP

ACEP's Leadership and Advocacy conference took place from 7/25-7/28 in Washington, DC. Emergency physicians from across the country attended the conference and worked on behalf of our patients and specialty to advocate for

change. Though COVID-related policies certainly changed the dynamic of the conference, it was great to see members of our specialty together in the same place. One of the advocacy priorities for LAC attendees was the Dr. Lorna Breen Health Care Provider Protection Act. This first-of-its-kind legislation contains provisions that aim to prevent suicide and burnout among health care professionals and offer mental health treatment. It calls for a comprehensive study aimed at understanding the factors contributing to burnout and suicide, as well as the existing barriers to mental health care, including stigma and licensing issues. The US Senate passed the bill via voice vote on 8/6/21. I'd like to think that ACEP's advocacy played a role in enhancing bipartisan support for the bill. Likewise, as the bill now moves to the House, where ACEP's advocacy will hopefully push it to passage.

Jasmeet Dhaliwal, MD, MPH, MBA



Colorado Senator Hickenlooper with Alexis Garza

I would highly recommend any emergency medicine physician to attend this conference. I do not have a fellowship, a masters, or a separate doctorate in anything, let alone political advocacy: this left me feeling unequipped to attend a conference of this type or participate at a national level for legislative change. I could not have been more wrong. The conference starts with the basics and grows at a digestible pace. The culmination, meeting with congressmen and senator's aids and offices, needs Colorado emergency physicians from every district and every practice location. The voice of a medical expert from the congressional district of the representative is powerful. When meeting with Senator Hickenlooper, he expressed particular interests in small and rural hospitals: what an opportunity to get all our voices heard!

Alexis Garza, MD



Colorado Senator Hickenlooper with Rebecca Kornas

The ACEP Legislative and Advocacy Conference (LAC) is one of my all-time favorite conferences. The engagement and enthusiasm of the attendees and the advocacy associated with the conference are unmatched by any other conference I have attended.

This year, I went out a day early, to participate in the health policy primer, put on by the ACEP young physician section and EMRA. I found it incredibly helpful to join in this offering at LAC, where ACEP provides an introduction into the basics of health policy. I learned more specifics on taking policy from idea to implementation, developing equity through policy and why that is important, and gained perspective on the scope of practice discussion and why this matters to emergency medicine. If you are just beginning your advocacy journey, I highly recommend it and especially the health policy primer.

I had the opportunity to attend a dinner for Representative Raul Ruiz, a democratic congressman and emergency physician from California and while there conversed and shared ideas with some of our colleagues from California ACEP.

In the spirit of 2021 and zoom culture, for lobby day, Team Colorado ACEP

(Jasmeet Dhaliwal, Vidor Friedman, Alexis Garza, Allison Trop, Michael Wisniewski, Suzanne Hamilton and me) met with representatives for our Colorado congress members and senators, virtually for our advocacy discussions.

This year our focus was on gaining support for the mainstreaming addiction treatment (MAT) act, which would remove the mandated x-waiver imposed on physicians to prescribe buprenorphine by the Drug Addiction Treatment Act of 2000. This change in legislation would allow emergency physicians, and physicians in general, to treat opiate use disorder more effectively by decreasing the hurdles we must overcome to buprenorphine. Patients started on buprenorphine in the emergency department are twice as likely to remain in treatment for opiate use disorder than those not started on buprenorphine and in the setting of record 93,000 opiate overdose deaths in 2020, this issue is more important than ever.

We also advocated our representatives and senators to support legislation to enact the “Dr. Lorna Breen Healthcare Provider Protection Act” which would increase funding to providing for better mental health resources for health care professionals, along with suicide and burnout prevention programs, which were always present but were intensified during the COVID-19 pandemic.

As seems to be the case most years, we also brought up the perennial issue of the impending Medicare payment cliffs, where currently, as EMTALA bound providers we stand to potentially have a greater than 10% cut to our reimbursements across emergency medicine. ACEP is working to come up with a proactive plan to address this in future years, but it is not ready for primetime, yet.

We wrapped up the week with an event for Hickenlooper’s “Giddy Up” PAC, where the Colorado ACEP delegation was among the first constituents Senator Hickenlooper met with for an in-person event, since his election. We shared our thoughts on MAT, health care professional mental health and the Medicare cliff with him and his aides. His team members were particularly interested to learn more about the MAT legislation and helping our team to further this legislation. I call that a win.

Overall, I came back from Washington DC reinvigorated and hopeful to engage more of our Colorado ACEP members in advocacy. If you have any questions and wish to get involved with advocacy in general or the Colorado Young Physicians Section, please reach out to me at kornasre@gmail.com.

Rebecca Kornas, MD

Legislative Challenges and Opportunities

The Colorado legislature used 116 of their allowed 120 days in 2021 legislative session. There were 623 bills introduced and 502 passed. The pass rate was an astounding 83%. Only 121 bills did not pass. The major themes of the session were controlling health care costs, social justice, gun control, transportation, and regulating the marijuana industry. The progressive agenda had a great deal of success passing legislation in the areas of social justice, controlling health care costs, and tax reform. In addition to working with the legislators on bills, the Governor's office and his staff were highly active participants in all the major theme issues. Many negotiations were directly with the Governor's office.

So, what should you expect in the 2022 legislative session which begins in January. The short answer is "more of the same," but that begs the question "what does more of the same look like?" The players will not change. In an off-election year, Colorado will have the same Governor, the same legislators and the same legislative leadership. Additionally, there will be a focus on the same issues: a focus on getting health care cost down. Quickest ways possible; more and better mental and behavioral health services but at lower costs; looking at all business tax advantages; and more attacks from our trial lawyer friends (not just medical malpractice caps any more).

Looking forward, we must take into account the redistricting that is currently underway. Redistricting occurs every ten years and is intended to adjust legislative districts based in the census. New maps for redistricting will be out later this year. The district maps often change the voter registration numbers in each district and can pit two incumbent legislators against each other as districts merge or give the opposing party an advantage. The maps will also dictate the legislative agenda. Typically, legislative agendas in an election year are the least volatile. Incumbent legislators do not like to take divisive votes when up for reelection. If it looks like the maps will advantage the republicans, as the current drafts does, we will see a more volatile session. The democratic majority will push a more aggressive agenda while they have control of all three chambers. 2022 is shaping up to be a tumultuous legislative session.

For the reasons noted above, it is more important than ever that Colorado ACEP's members engage in the process. Colorado ACEP members will be hosting meet and greets with local legislators. These will provide you with the opportunity to meet your local legislators and establish a relationship with them such that when a piece of health care related legislation is introduced, your legislator contacts you for your opinion and guidance. Take the opportunity when you are invited to attend one of these events. Legislators are not health care experts – you are.

To become more involved please contact suzanne.acep@comcast.net.

SAVE THE DATE
Virtual CME Event
Wednesday, November 3, 2021
Noon-4pm



Welcome New CO ACEP Members!

Amy Joanne Allen, MD
Ashley Barash
Joseph R Brown, MD
Eric J Bustos, MD
Fanni Barbara Cardenas, MD
Isabelle Chatroux
Shilpa Cyriac, MD
Thomas R Eckler, II, MD, FACEP
Ian Eisenhauer, MD
Morgan M Eutermoser
Cailin McKenna Frank, DO
Charles P Gillespie, MD
Annalise Grammerstorf
Christopher J Greenlee
Eliezer Alexander Hernandez-Linarte, MD
Christopher Johns, MD
Austin T Jones, MD
Spencer Knierim
David Langley
Nhu-Nguyen Le
Auna Otts Leatham, MD
Cynthia L Lonneman, MD, FACEP
David Maksimovich, DO
Rohn McCune, MD
Matthew John McDevitt, DO, FACEP
Kevin Edward McGlothlen, MD
Sean Morgan, FACEP, FACEP
Tanner Muggli, MD
Rachael Lee Muschalek, MS, MD
Robert Nolan, MD
Kevin Padrez, MD

Lesley C Pepin
William Tyler Prince, MD
Paul Pukurdpol, MD
Tehreem Rehman, MD
Maya Amanda Rhine, MD
Madeline E Ross
Marcus R Salmen, MD
Eytan Y Shtull-Leber
Michelle M Stone, DO, FACEP
James D Thompson, MD, FACEP
Freddi Huan Tran
Sara Van Horne
Stefan K Wheat, MD
Lauran Wirfs

FROM NATIONAL ACEP





Webinar: Rural Emergency Medicine: Where We Are and Where We Are Headed

Host: Rural Emergency Medicine Section

August 20, 2021 | 3:00 PM CT

[Register here](#)

Leaders of ACEPs Rural Section will be giving an update on current hot topics regarding rural emergency medicine. Many see rural America as the new frontier for EM workforce, and there is truth to that, but the issue is much more complex and nuanced than it may seem. Please join Drs. Scott Findley, Ashley Kochanek Weisman, and Stephen Jameson as they update ACEP sections and state chapters on rural EM workforce, Council resolutions to expand EM physician opportunities and improve rural ED patient care, rural health political initiatives, and the collaboration efforts that are underway with our NP, PA, and non-EM trained physician colleagues. There will be opportunity for Q&A during this 90-minute session as well.

Featured News

Senate Passes Dr. Lorna Breen Health Care Provider Protection Act

ACEP is pleased to announce that early Friday morning, the Senate approved S. 610, the "Dr. Lorna Breen Health Care Provider Protection Act." This comes on the heels of hundreds of ACEP members joining together to lobby for this legislation during last month's Leadership & Advocacy Conference, conducting 287 meetings with legislators and staff from 44 states. [Read more details and view next steps.](#)

EM Physician Workforce of the Future:

- The EM Workforce Report Session from the recent Leadership & Advocacy Conference [is now available](#). Listen in as ACEP leaders discuss the data & next steps.
- The Young Physicians Section [hosted a Q&A session](#) with ACEP President Elect Dr. Gillian Schmitz and EMRA President Elect Dr. Angela Cai, asking workforce-related questions submitted by YPS members.
- "[The Emergency Medicine Physician Workforce: Projections for 2030](#)" was recently published in *Annals of Emergency Medicine*.
- **New ACEP Policy Statement:** [Emergency Medicine Workforce](#)
- Get the latest workforce updates at www.acep.org/workforce.

[Resident Voice: Where Medicine and Literature Meet](#) (ACEP Now, July 22)

New ACEP Policy Statement & Information Paper

- [Definition of Emergency Medicine Residency](#)
- [Medication Therapy for Psychiatric Crisis Events](#)

COVID-19

Press Releases:

- [ACEP Urges FDA to Prioritize Emergency Physicians for COVID-19 Booster](#) (August 13)
- [Emergency Physicians to Parents and Students: Prioritize COVID Safety in Back-to-School Plans](#) (August 13)
- [Emergency Physicians Increase their Calls for Concerns around COVID-19 Delta Variant and Support Mandate to Vaccinate Healthcare Workers](#) (July 28)

Do You Have a Vaccination Program in Your ED?

As new variants continue to emerge, there is more urgency to vaccinate as many people as possible against the virus. If you have set up a vaccination program in your ED, [please take a few minutes to complete our survey for national data gathering](#). If you haven't, please consider working with your institution to provide vaccines to appropriate patients who will be discharged from the ED. An [on-demand webinar features ACEP members](#) explaining how they set up vaccine administration programs in their EDs and their lessons learned. And [there are more resources online](#), including helpful tools for addressing vaccine hesitancy.

New Podcast: COVID-19 Myth Busting

ACEP members are all fielding questions and concerns from friends and family. ACEP Frontline host Dr. Ryan Stanton sits down with Dr. Howie Mell to dispel some ongoing myths around vaccines, variants and more. [Share this episode on social media to help us battle disinformation](#).

New: [COVID-19 Vaccination Smart Phrase](#)

Upcoming Webinars:

[White House Conversation: Health Systems, Providers and the COVID-19 Vaccination Effort](#) (8/18, 11am CT)

[COVID-19 Variants: What Emergency Physicians Need to Know](#) (8/20, 12pm CT) During this live, free webinar we will provide an overview of Coronaviruses and the SARS-CoV-2 variants and review their classifications. The presenters will also present on the clinical implications, relevance and trends based on variants of interest, concern, and high consequence, including prevention, presentation, treatment, and management. [Register here](#).

Get the Latest Tools in the [COVID-19 Clinical Alert Center](#)

ACEP Member Benefits

Get the Support You Need

Stress is high right now, on so many levels. Everyone has unique needs depending on personal circumstances, but the following free support services are available:

- [Crisis counseling/wellness sessions](#) available 24/7 and strictly confidential
- [Peer support line](#) for physicians and medical students, available 24/7
- [Let's Talk forum](#) for ACEP members, our only forum to allow anonymous posts

Upcoming ACEP Events and Deadlines

August 18: [White House Conversation: Health Systems, Providers and the COVID-19 Vaccination Effort](#) (11 am CT)

August 20: [COVID-19 Variants: What Emergency Physicians Need to Know](#)

August 25: [Medical School Loans and the CARES Act: What You Need to Know](#)

August 30: [Rural Emergency Medicine: Where We Are and Where We Are Headed](#)

September 23: [Dental 101 for ED Physicians \(Webinar\)](#)

October 25-28: ACEP21 in Boston — [REGISTRATION IS OPEN!](#) Use promo code ACEP21CHAP for \$100 off the in-person meeting price.

Improve the Quality of Acute Care to Patients with ACEP Accreditation

When you choose accreditation, you are choosing to pursue a commitment to excellence across the spectrum of care that will help attract more patients and elevate your institution— providing a competitive edge in the marketplace.

- Strengthen community confidence in the quality and safety of care, treatment, and services – achieving accreditation makes a strong statement

to the community about an organization's efforts to provide the highest quality services.

- Provide a framework for organizational structure and management – accreditation involves maintaining a high level of quality and compliance with the latest standards. Accreditation provides guidance to an organization's quality improvement efforts.
- Align emergency departments with one of the most respected names in emergency health care – being accredited by ACEP helps organizations position for the future of integrated care.

[Learn more about ACEP's Accreditation Programs](#)

Contact Us

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