



American College of
Emergency Physicians®

SUPPORTING THE EMERGENCY PHYSICIAN

ADVANCING EMERGENCY CARE 



state of emergency
for COVID-19
Coronavirus

FACEP for you

2020 ANNUAL REPORT

**LOOKING TO THE FUTURE
SEE PAGE 19**

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2020

As we hope for an end to the COVID-19 pandemic in 2021, ACEP looks back on an extraordinary year and documents the history that showcased the specialty of emergency medicine.

No matter how long this pandemic lasts, ACEP is committed to working for you, with you and beside you.



The Best of Times, The Worst of Times

Charles Dickens must have seen 2020 when he wrote the opening to *A Tale of Two Cities*.

Between the challenges already facing emergency medicine and the impact of a pandemic, this year has been a tremendous opportunity to rediscover the value of emergency medicine. With that in mind, I would like to reverse Dickens' classic lines.

"It was the worst of times" – we've seen breakdowns in our fragile health systems at many levels. We have seen widespread disease without access to sufficient mitigation and protection. The results have been more suffering and death than we could have imagined. Add the social isolation many of us have experienced, and we are all affected in countless ways.

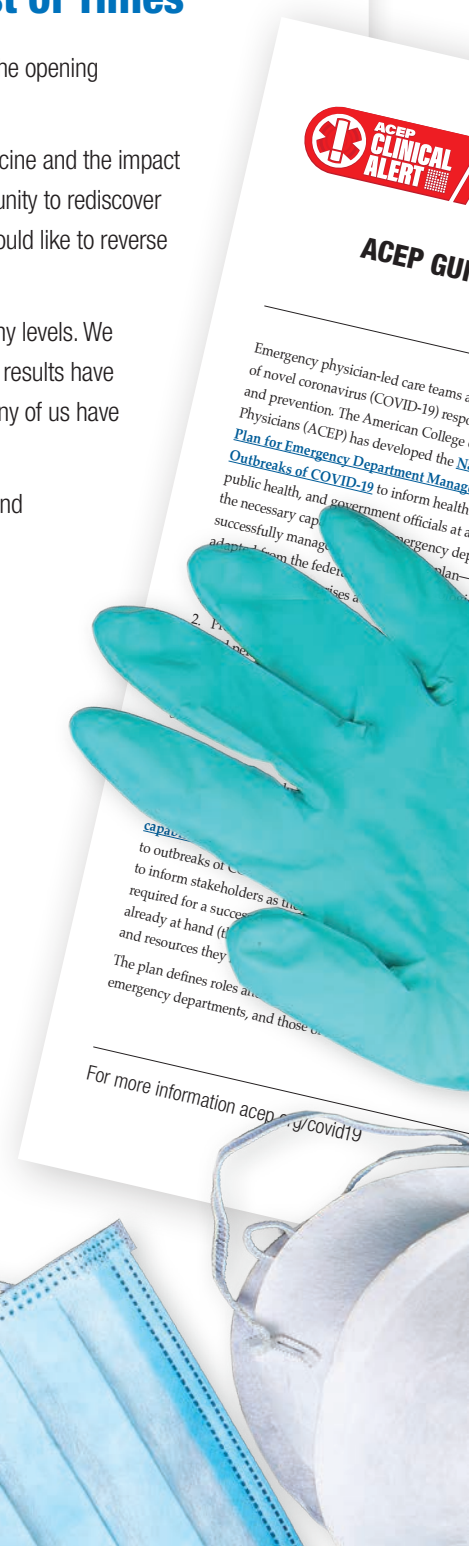
"It was the best of times" – emergency physicians showed our strength of commitment and purpose. We are doing what we do. To paraphrase Theodore Roosevelt, we are in the arena, striving to do the deeds, spending ourselves in a worthy cause, and our place will never be with those timid souls who neither know victory nor defeat.

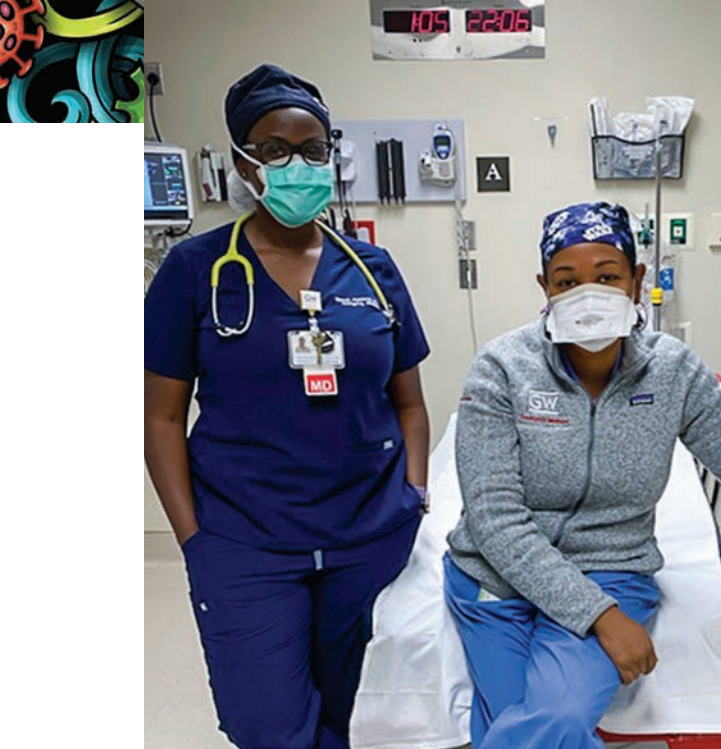
"It was the age of foolishness" – our communities have never been more divided, and scientists' voices have too often been challenged or ignored. Despite the continued worldwide pandemic, the politics of our efforts as a country have overshadowed the practice. This divisiveness also simply prolongs the ability to recover from this year.

"It was the age of wisdom" – and it still is. I've not seen a time when so many have come together to work on solutions. Though I would not wish to go through this type of crisis again, it's highly likely that we will. And as emergency physicians, this is when we need to be at our best.

Thank you for being at your best every day. There has never been a time when I've been more proud to be part of the emergency medicine community.

William P. Jaquis, MD, FACEP
ACEP President, October 2019 - October 2020



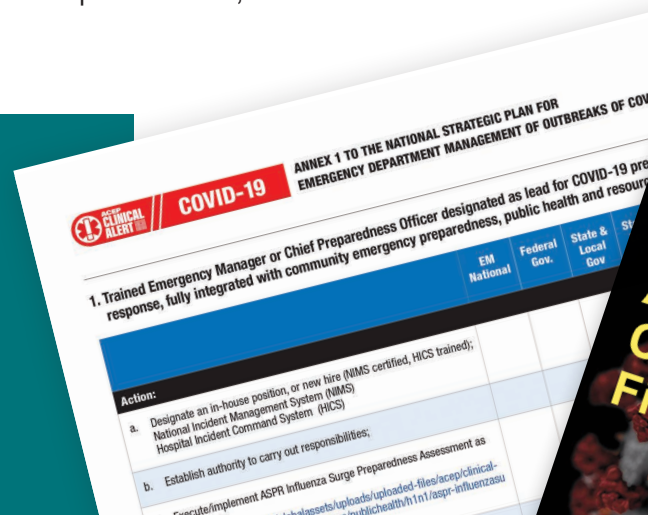


For Your Practice

With the first coronavirus clinical alert sent in January, ACEP began a critical mission to collect, vet and disseminate information you needed as quickly as possible. Our rapid response showed ACEP as a leader not only in emergency medicine, but in patient care, as well.

Acting with Urgency

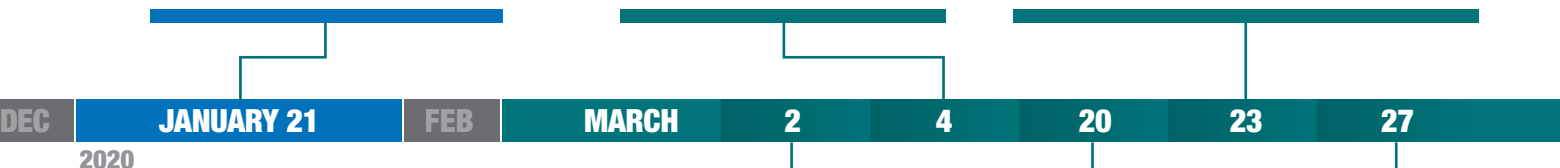
Upon its arrival, the novel coronavirus was, well, novel. Clinicians across the world shared anecdotes, research and lessons from the trenches in rapid pace. There was a lot to learn, and it needed to happen quickly.



ACEP sends an all-member email issuing a Clinical Alert about the novel coronavirus and creates a simple webpage with ongoing updates.

COVID-19 discussion forum launches on ACEP's members-only engagED platform.

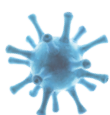
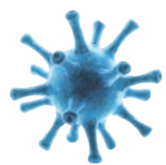
The engagED forum opens to the American Academy of Family Physicians Emergency Medicine/Urgent Care Member Interest Group, many of whom staff rural EDs. Access extends to all ABEM diplomates.



ACEP members in Washington ask for a platform to share early experiences with fellow EPs and ACEP develops a forum dedicated to COVID-19.

Then-ACEP President Dr. William Jaquis outlines the concerns of EPs on the front lines during a COVID-19 briefing with top White House officials, including the President and Vice President.

ACEP creates a resource of the COVID-19 guidance based on the daily summaries of the clinical content shared in the engagED platform.



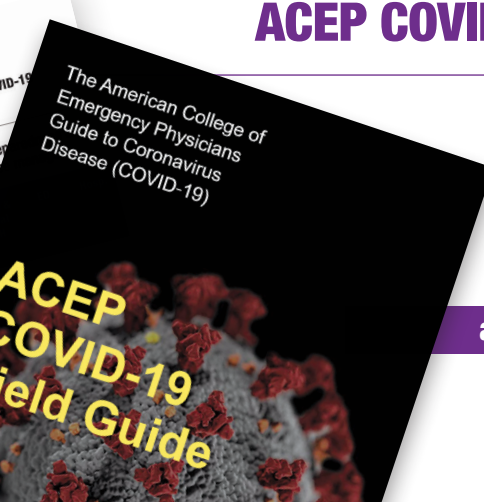
Staying on the Pulse

You were able to get COVID-19 content regularly in your preferred communication vehicle, with updates delivered at an unprecedented pace.

Webinars	19
Podcasts	25
Articles in <i>Annals of Emergency Medicine</i> , <i>JACEP Open</i> and <i>ACEP Now</i>	166
Courses during ACEP20 Unconventional	14



ACEP COVID-19 Field Guide Updated Regularly



12 DAYS to write, design and build the first edition of the *Field Guide to COVID-19 Care in the ED*.

acep.org/covid19fieldguide

200,000+ VIEWS

LINKED TO
BY MORE THAN
170

LEADING HEALTHCARE AGENCIES
including the CDC, NIH and COVID-19 Health Care Coalition

60,000 UNIQUE USERS

TRANSLATED INTO
Urdu
Hindi
Spanish
Japanese
Chinese
5 LANGUAGES

ACEP publishes the *Field Guide to COVID-19 Care in the Emergency Department*, and it instantly becomes our most popular COVID-19 resource.

APRIL 8

MAY 14

JUNE 24

JUL

AUGUST 17

SEP

A redesign of the COVID-19 webpage features 400+ curated resources for medical professionals. By October, ACEP's COVID-19 Center accumulates than a million views.

ACEP partners with Elemeno Health on the content for Elemeno Express for COVID, an internet-based platform with ACEP-approved, point-of-care content and best practices.

ACEP and Evidence Care create the COVID-19 Severity Classification Tool, a seven-step triage process to better classify COVID-19 patients that can integrate into many EHR systems.



For Your **Protection**

You deserve to feel safe when you go to work. You have the right to proper protective equipment to protect yourself and your family. And, you should be protected from unfair legal challenges that could derail your hard-earned career.

120,000 letters

sent to Congress, urging them to prioritize PPE for front line personnel and to release PPE from the Strategic National Stockpile



Pushing for PPE

You told us hospitals were sanctioning staff for wearing donated or self-purchased PPE. We shared this with The Joint Commission (TJC). Soon after, TJC issued a **statement of support for allowing staff to bring their own standard face masks or respirators to wear at work.**

ACEP addressed the PPE problem with the American Hospital Association (**AHA**), the Centers for Disease Control and Prevention (**CDC**), the Occupational Safety and Health Administration (**OSHA**), and the Food and Drug Administration (**FDA**).

ACEP connected with #GetUsPPE, Project N95 and other groups to vet new technology.

As supply chain delays caused shortages of essential household supplies such as hand sanitizers and antibacterial wipes, ACEP partnered with Amazon to get you institution-level access.



Taking a Stance to Support You

As new issues arose, ACEP issued official statements in support of your protection and well-being. View the statements at www.acep.org/covid19-physician-protections.

Personal Protective Equipment (PPE) During the Pandemic

Position Statement on the Use of Donated or Self-Purchased PPE

ACEP's Position on Family Visitation During the COVID-19 Pandemic

Joint Statement: Supporting Clinician Mental Health in the Post COVID-19 Era

Joint Statement on Mask Excuses in the ED

In the **Personnel** section of the **COVID-19 Center**, we gathered nearly **40** of the most helpful **PPE and clinician safety resources** to keep you informed as we learned more about the spread of the virus and the **efficacy of various PPE options**.



Liability Concerns

Securing liability immunity has been an advocacy priority from the crisis' onset. ACEP worked with state chapters to advocate for increased liability protections during the pandemic. Federally, ACEP and its coalition partners helped to secure a law that expands Good Samaritan lawsuit protections for licensed healthcare providers who volunteer during a federally-declared disaster.

EMTALA Temporary Waivers

ACEP advocated for EMTALA changes that improved practice flow and increased your ability to safely care for your patients. We pushed for the ability to perform EMTALA-required medical screening exams (MSEs) via telehealth to help protect you from unnecessary exposure to the virus and help preserve your limited supply of PPE. Once CMS formally made that change, ACEP organized a webinar so you could speak directly with CMS officials about the changes.



For Your Workplace

The ups and downs of the corona-coaster affected you in different ways and at different paces. While some emergency physicians were experiencing surges, others were seeing ED visits dip to record lows.



Advocating for Monetary Support

ACEP consistently pressed Congress and federal agencies to prioritize emergency physicians during the distribution of stimulus funding. We were persistent with the HHS Secretary that EPs receive funds to cover lost revenue and increased expenses due to COVID-19. We continue to advocate for the temporary COVID-19 policies and flexibilities to remain in place after this crisis subsides.

Achieving Policy Changes

ACEP successfully advocated on your behalf for important CMS policy changes approved in late March.

- Allowing EMTALA-mandated medical screening exams to be performed via telehealth;
- Adding the ED E/M codes to the list of approved Medicare telehealth services so emergency physicians can be appropriately reimbursed for providing them. CMS also decided, based on ACEP's ongoing advocacy, to continue to include these codes on list of approved Medicare telehealth services through the end of the calendar year in which the COVID-19 public health emergency ends (i.e. December 31, 2021 if the public health emergency ends in 2021).





Managing Financial Challenges

The *COVID-19 Financial Survival Guide: What You Need to Know*, published in May 2020, explains the government funding options available, and offers tips for avoiding and navigating legal challenges and income insecurity.

The Physician Wellness Hub, launched in early June, included a designated section with tips for navigating financial stress.

Supporting Small Groups

In April, the ACEP Democratic Group Practice Section published the *Democratic Group Practice Strategies to Financially Survive the COVID-19 Crisis* detailing loan forgiveness options within the CARES Act and launched a small group resource community.

Job Fairs JUNE AND OCTOBER

330
Job Seekers

23
Employers

5 total days of
one-on-one
employer
access

Ensuring Your Future

ACEP has fought too hard for the last 50 years and we refuse to lose ground in the workforce, especially as you provide life-saving care during a pandemic.

Statements were issued that condemn employers who cut your hours, and in support of your indispensability, even as we help you navigate a new horizon for the specialty's role.

Keeping You Safe

To help protect you from the growing amount of ED violence, ACEP worked closely with the Emergency Nurses Association to get the Workplace Violence Prevention for Healthcare and Social Services Workers Act of 2019 passed in the House of Representatives. ACEP also jointly participated and continues to engage in the No Violence in the ED campaign and supported ENA's impressive documentary, "In Case of Emergency."





For Your Profession

The pandemic highlighted the unique role of emergency medicine within the House of Medicine.



Leading from the Front Lines

ACEP led during this global crisis, collaborating with federal agencies and other medical societies to share insights, develop statements and create resources and education to support the medical community worldwide.

Your insights from the front lines were a very valued resource. ACEP was called into briefings and panels by Congress and the White House, by federal agencies including HHS, CDC, NIH, FEMA, FDA and more. Our team relayed your firsthand accounts to policy makers.

We heard your concerns about certification exam schedules and the shift away from 10-year high-stakes exams, and ACEP shared them with ABEM. While we can't always influence their decisions, ACEP can keep you informed of their changes, and ensure our education products help you meet all your CME needs.

And to help our members working with their EMS colleagues, ACEP worked with the American Society of Anesthesiology to release a joint statement on the safe use of ketamine in prehospital care

Condemning Systemic Racism

On May 30, ACEP issued a statement denouncing racism and all senseless acts of violence. "Racism is a social determinant of health. The structural racism we are witnessing nationwide undermines the health of individuals, families and communities we serve."

ACEP's mission includes promoting health equity within the communities we serve, and unfortunately COVID-19 has only illuminated the many health disparities that persist. ACEP's Diversity, Inclusion & Health Equity Section conducted a letter campaign to reach communities disproportionately affected by the virus through community and religious leaders.

Emergency Physicians: The Calm in the Chaos

Emergency medicine’s public profile has never been more visible. Media outlets featured emergency physicians as trusted experts able to cut through the confusing, contradictory reports being widely circulated on social media.

Our public-facing website emergencyphysicians.org put out numerous patient guides, including ones about COVID-19’s impact on underserved communities, raising awareness among local leaders, partners and individuals. We issued dozens of media statements and created and distributed two public safety announcements about the importance of staying home and wearing face masks.



For 2020, ACEP saw an approximate **220%** ↑

overall in **media coverage**, including an approximate

390% ↑ in coverage from January–June

compared to the previous year, and a **576%** ↑

in articles that mentioned **ACEP’s president**.

Our social media and acep.org website stats really show how, during the critical months of March through May, our audience increased, with **social impressions going up 118%** and **engagements rising 111%** compared to the same time in the prior year, and website use spiked with the release with of updated COVID-19 content.

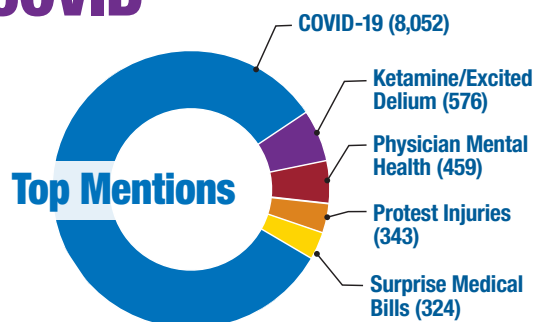
ARTICLES FEATURED IN

AARP
 ABC News
 Associated Press
 Becker’s Hospital Review
 Bloomberg News
 BuzzFeed News
 CBS News
 CBC News
 Chicago Tribune
 CNN
 Consumer Reports
 CSPAN
 Daily Mail UK
 Dallas Morning News
 FOX News
 Fierce Healthcare
 Forbes
 Health Affairs
 Headline News
 HealthDay
 Kaiser Health News
 Modern Healthcare
 MSNBC
 NBC News
 National Public Radio
 Physician’s Weekly
 Reuters Health
 The New York Times
 The Wall Street Journal
 The Washington Post
 United Press International
 USA Today
 VOX
 Yahoo! News

Looking Beyond COVID

In addition to COVID-19, ACEP’s Public Relations team worked to keep up the focus on other issues important to emergency medicine such as surprise billing and physician mental health. Our 2020 news media mentions also included ketamine/excited delirium and protest injuries.

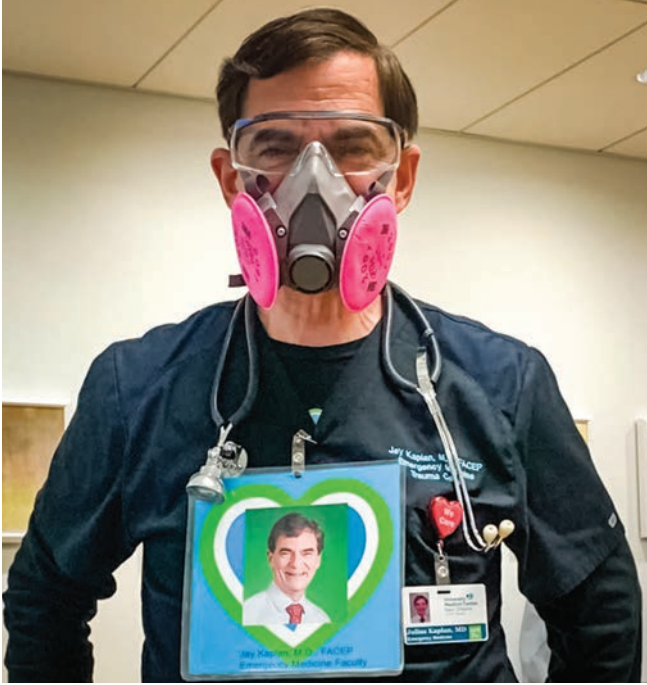
Our national televised PSA “Standing in the Gap,” created with support from the Emergency Medicine Policy Institute (EMPI), demonstrated the value of emergency medicine and the vital role EPs play in catching those who fall through the cracks of the healthcare system.



News Media Coverage

Number of Articles

ACEP	18,200
Annals/JACEP Open	881
Members	5,803
ACEP President	2,712



For Your **Life**

COVID-19 disrupted life on all levels, not just the workplace. It brought increased isolation, worry, exhaustion and stress. Everyday life was more difficult, from parenting to finances and even litigation stress. ACEP devoted ourselves to alleviating your burdens any way we could.

Prioritizing Physician Mental Health

Early May:

New resources/webinars related to physician wellness and mental health during COVID-19 offered in a collaboration with the American Association of Emergency Psychiatry.

On May 12, after meeting with ACEP, The Joint Commission releases a statement that supports “the removal of any barriers that inhibit clinicians and healthcare staff from accessing mental health care services, including eliminating policies that reinforce stigma and fear about the professional consequences of seeking mental health treatment.”

Free Virtual Grand Rounds courses offered on second victim syndrome, emergency mindfulness, overcoming self-judgment, and how to support your team during times of crisis.

ACEP’s Ethics Committee conducts all-member survey designed to identify symptoms of work-related stress and PTSD to help ACEP support member needs.



Three free counseling or wellness coaching sessions are promoted as an ACEP member benefit in an partnership with Mines & Co.

ACEP and the Coalition on Psychiatric Emergencies spearhead development of a joint statement, signed by more than 40 groups, to ensure a clinician’s history of mental illness or SUD treatment should not be used as an indicator of the ability to competently practice medicine.

ACEP’s COVID-19 Physician Wellness Hub makes it simple for members to find support they need, including peer support and crisis counseling. Members can find resources for stress by source, from patient care, workplace, legal, financial or personal, and topical libraries for burnout, PTSD, physician suicide and more.

To help tell your story to lawmakers and advocate for solutions you need, ACEP’s advocacy team collects personal stories of barriers to mental healthcare to inform advocacy efforts.

ACEP receives grant funding from Genentech to fund development of a peer support program.

Through a partnership with Amazon Business,

we gave members unrestricted hospital-level access to supplies that support their personal safety, while providing ACEP members

\$50,000 for PPE,

home sanitation supplies, and other needs through grant support.

We worked with **GrubHub to provide over**

\$250,000 in free meals

to emergency physicians.

Life Made Easier

ACEP leveraged its resources to support you through monetary and in-kind donations from a wide net. We forged new relationships with consumer companies, and called upon existing healthcare partners to step up their support of emergency physicians in meaningful ways.

acep.org/covid19benefits

We formed relationships with many companies such as **McDonalds, Freshly, Sittercity and Rover** to provide generous COVID-19 relief discounts and freebies in support services through our **member discount platform.**

We led the *free rooms for emergency healthcare initiatives* with **Marriott, Hilton and American Express,** resulting in over

950,000 free rooms

being used as a safe quarantine space for front line healthcare workers.

acep.org/covid19wellness

ACEP-backed H.R. 7255, the "Coronavirus Health Care Worker Wellness Act," which provides grants to establish or expand mental health resources for EPs and other healthcare workers is developed.

ACEP joins Dr. Lorna Breen Heroes Foundation to work with legislators to draft the Dr. Lorna Breen Health Care Provider Protection Act introduced in the US Senate. Dr. Breen was a New York ACEP member who took her life in the height of treating COVID-19 patients.

ACEP20 includes course track dedicated to physician wellness and mental health.

ACEP hosts second Theater of War event.

JULY

AUG

SEPTEMBER

OCTOBER

NOV

DECEMBER

JAN

ACEP conducts extensive member and external campaigns in support of National Physician Suicide Awareness Day.

To help you grow as peer supporters while learning how to check on yourselves, too, ACEP launches the Peer Support Project, which includes development of individual and system-based resources to bolster the culture of peer support within EM.

ACEP hosts Theater of War, an innovative theatrical event that encourages group discussions and cathartic conversations.

Results from a national poll of EPs are released and used to help address barriers to mental healthcare.



Despite this bizarre year of social distancing and Zoom fatigue, emergency physicians consistently rallied together and remained connected, sharing helpful information and encouragement every step of the way. This year, your peer network was more vital than ever.

For Your **Network**

Rapid Information-Sharing

ACEP's engagED platform became the go-to place to exchange clinical information and protocols. In an unprecedented move, ACEP opened access to the platform to non-member emergency physicians (domestic and international) as well as family physicians and PAs to ensure rapidly developing knowledge was shared widely.

Information was curated into a daily summary, more than 500 pages long and backed by scientific evidence you provided. These summaries grew into the *COVID-19 Field Guide* (see page 5).

As the forum grew in popularity, a second, non-clinical space was launched to openly discuss the social, economic and political ramifications of the virus.

American College of Emergency Physicians
engagED
Online Member Community

4,022 members

3,573 posts

8,037 discussion threads

223 items shared

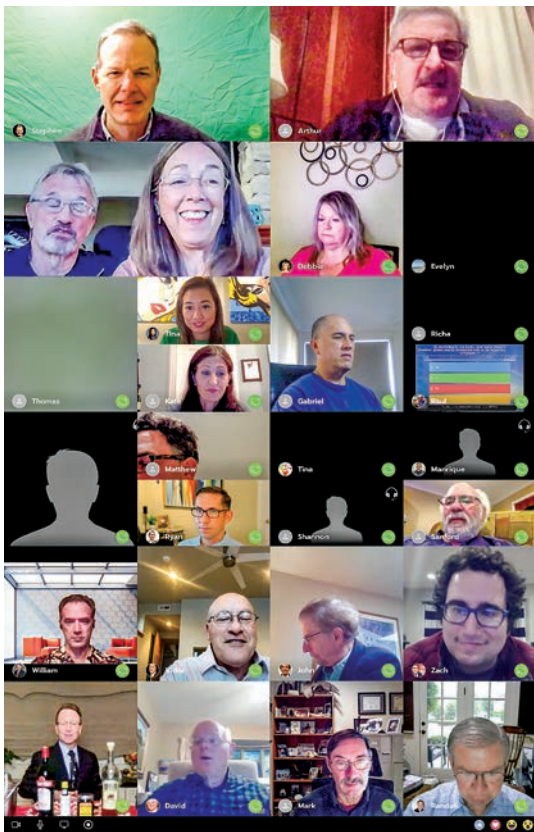
2.5+ million views

Going Global



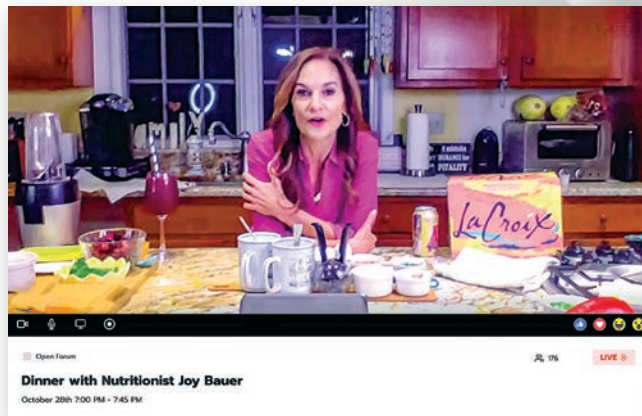
A major bright spot of 2020 was the ability to use technology to connect with emergency physicians around the globe as easily as talking to someone in a neighboring town.

ACEP20 ATTENDANCE SNAPSHOT



Creative Socializing

The pandemic robbed us of our in-person events in 2020, and we all missed being able to catch up with friends face-to-face. In true emergency physician fashion, we got resourceful, using technology and innovation to still have a blast together from afar.





For Your **Development**

Educators around the world had to pivot dramatically in 2020 as traditional learning models were turned upside down. ACEP reworked our in-person conferences to new formats that would flex with the ongoing uncertainty, while spinning up new online learning opportunities to meet your changing needs.

The pandemic was an unexpected catalyst, but ACEP already was investigating many digital education options and made a rapid transition. The experience gained in 2020 will help enhance our professional development offerings as virtual learning is here to stay.

COVID-19 Webinars

To accommodate you and your programs during this difficult time of physical distancing, ACEP's Academic Affairs and Education Committees designed the Virtual Grand Rounds program in April 2020.



2,679 Registrants for the monthly events that covered Critical Care/COVID-19, Physician Wellness, Airway, Ultrasound, Pediatrics, International Perspectives on COVID-19 and Neurology. acep.org/virtualgrandrounds



The Online Learning Collaborative (OLC), formerly ACEP eCME, improved its usability and responsiveness. It houses the virtual courses from the past three years of ACEP annual meetings, and PEER will soon live within the OLC, as well. Soon, the OLC be a one-stop-shop for all ACEP education.

ED X-Waiver Training Corps

Since May 2020, ACEP and Providers Clinical Support System (PCSS) hosted 3,000+ participants for Zoom-based MAT waiver trainings, including seven 8-hour trainings and seven 4-hour trainings developed by emergency physicians. The series continues into early 2021.



ACEP20 Gets Unconventional

In June 2020, the ACEP Board of Directors made the decision to transition the ACEP20 annual meeting to a virtual format. Incredible teamwork between the planning committee and ACEP staff led to an engaging, interactive meeting that received rave reviews.



ACEP20 By the Numbers

8,059 Registered Attendees

1,232 International Attendees

1,191,439
Total Events Viewed

64.54% Desktop
32.21% Mobile
3.15% Tablet

356 Total Courses
150 Faculty
33 Social Events

Most popular live courses

Opening General Session: NIAID Director Dr. Anthony Fauci and Lessons Learned: Global Response to COVID-19

Critical Update: Coronavirus (COVID-19)

Acute Decompensated Heart Failure: Time Critical Interventions

Racial Health Disparities and Inequities in America: Where Do We Go From Here? featuring Ibram X. Kendi

Most popular on-demand courses

Opening General Session: NIAID Director Dr. Anthony Fauci and Lessons Learned: Global Response to COVID-19

A Fistful of Fractures

ACLS Guidelines 2020: What's New and Why

How Will COVID-19 Affect Our Financial Future?
Presented by the Young Physicians Section

6,813
#ACEP20
posts on social media

32,779,175
#ACEP20
impressions



For Your Future

Living Through History

In June 2020, “Preparing for the Next Pandemic Summit” featured a series of hour-long sessions that took participants on deep dives into various aspects of COVID-19 response to analyze lessons learned that would advise future generations.

Additionally, “The Future of Emergency Medicine – The Pandemic Factor” brought together emergency medicine leaders from across the College to weigh in on workforce, practice, patients and payment.

The information collected during these events was organized into a “Toolkit for Preparing for the Next Wave/Pandemic.”

acep.org/NextPandemicPlaybook

PREPARING FOR THE NEXT PANDEMIC

- Communications
- Data and Analysis
- Deployment and Distribution of Physicians and Other Healthcare Workers
- Disparities and Vulnerable Populations
- Information Flow
- Research
- Supply Chain
- Workforce Support and Sustainability

Defending the Workforce

ACEP shares your concerns about the EM workforce landscape. The final report is expected in Spring 2021 from the multi-organizational EM Workforce Task Force, including ACEP, ABEM, ACOEP, AOBEM, CORD, EMRA, and SAEM.

We know that many of you are feeling the real impact of the job market today and want answers now, as well as for your future. We expect this report will call on us all to find innovative strategies for a path forward, which will require your input.

This is one of several high-impact projects coming together as ACEP continues to fight for emergency physicians and lead the specialty into the future.



Looking to the Future

The many diverse initiatives ACEP has been working on for years seem to be weaving together into a fabric right now to help emergency medicine move forward. Whether we're dealing with health equity or a pandemic response or staffing, all of these pieces seem to be coming to a head.

And it's so exciting because at the end of the day, through ACEP's support, we will have better solutions to help you and the specialty. ACEP's role and value proposition is bigger than it ever has been.

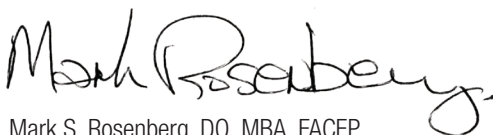
As the COVID-19 pandemic has illuminated, emergency medicine can't stick to what was status quo. There are evolving roles of emergency physicians - a complete change of how we managed things in the past.

Such as the role of emergency medicine in mitigating health disparity. I believe emergency departments can bring resources to their communities to help provide health equity by using strategies to improve the way we take care of people regardless of their ability to pay, regardless of color, regardless of religion.

Another opportunity for the specialty is the enhanced role of telemedicine. We can expand our footprint into nursing homes, rural America and even more locations. With the help of telemedicine, we can bring board-certified, residency-trained emergency physicians to every community to help usher the physician-led team in emergency medicine.

And, of course, pandemic readiness is now a major focus of emergency medicine. I saw the way we shifted our approach to pain and addiction when the pandemic exacerbated the problem with closed pain centers and doctors' offices. I saw the way emergency physicians provided palliative care as they held the hands of those actively dying and helped families communicate through technology. We did more than we ever thought was possible. And in many ways, COVID brought out the best in emergency medicine. We can take those parts forward as we improve the safety of the emergency physician in this pandemic or any in the future.

What emergency physicians all have is an inner drive to go toward danger, not away from it. To treat each and every person as someone we can help. And when we do, they know that we were the best thing they saw on their worst day. That's what makes emergency medicine – and each of you – so special.



Mark S. Rosenberg, DO, MBA, FACEP
ACEP President, October 2020 - October 2021

Continuing Important Non-Pandemic Initiatives

Though the pandemic required a lot of time and resources, ACEP's ongoing efforts continued:



Addressing Pain & Addiction Care

In January, ACEP hosted the **Stigma Summit** to discuss ways to overcome issues with individuals with substance use disorder who seek care.

We launched **Pain & Addiction Care in the ED (PACED)**, the nation's only specialty-specific accreditation program in Spring 2020 and awarded its first accreditation in October.



Raising Standards Through Accreditation

The **Geriatric ED Accreditation (GEDA)** Program grew to **183 accredited hospitals**, with **57 applications** in process and **256 sites** on the interest list.



The **Clinical Ultrasound Accreditation Program (CUAP)** expanded to **44 accredited sites** with 5 applications in process and 5 on interest list.



Enhancing Quality of Care

Despite the relaxing of MIPS rules for quality reporting, **Clinical Emergency Data Registry (CEDR)** outperformed predictions.

- **28 million+ visits**
- **1,000+ EDs**
- **20,000+ clinicians**



ACEP's **E-Qual Network** focused on quality improvements related to opioids, sepsis and stroke, and it successfully transitioned from CMS grant support to being supported by private grants.

Congressional Year-End Package: What You Need to Know

ACEP advocated tirelessly to prioritize and protect emergency medicine. Hanging in the balance were three issues of vital significance to emergency physicians:

Pushing Back Against Damaging Surprise Medical Billing Legislation

This final bill:

- Includes an accessible independent dispute resolution (IDR) to help you more fairly resolve out-of-network disputes with insurers
- Limits deductibles for out-of-network emergency care to be no higher than in-network
- Includes a reasonable payment standard
- Requires insurers to print a policyholder's deductibles on their insurance card, a concept ACEP conceived and requested of Congress

Urgent Action on Impending Medicare Cuts

- Eliminate two-thirds or more of anticipated reimbursement cuts
- Protected an additional 2 percent of your Medicare reimbursement for three months

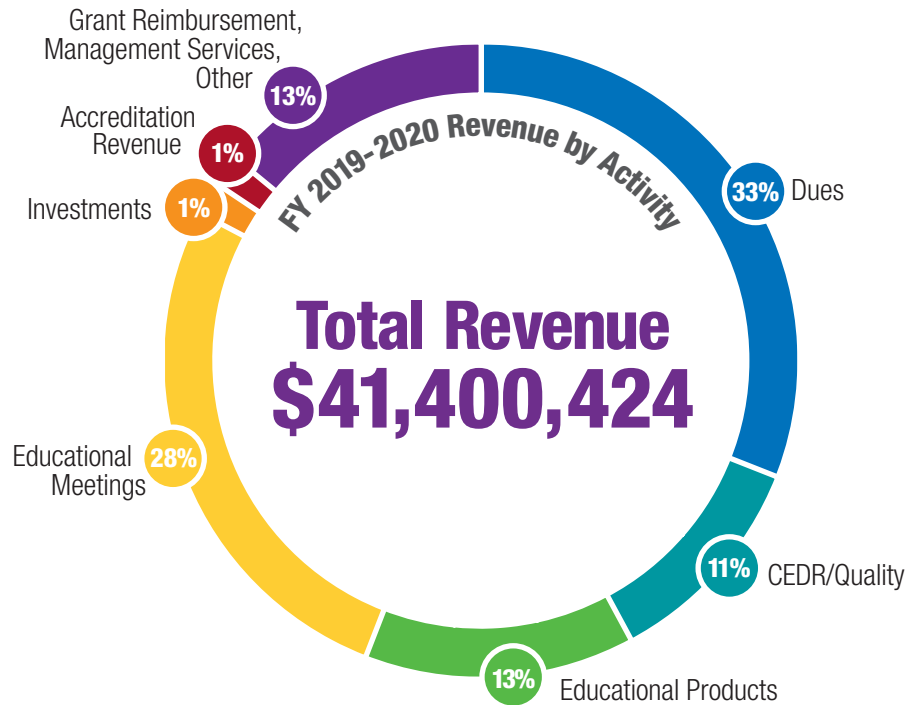
Enhancing COVID-19 Physician Protection

- An additional \$3 billion for the Provider Relief Fund
- Essential funding for vaccine procurement and distribution
- Funds sent directly to states for testing, tracing and COVID mitigation programs

Financial Overview

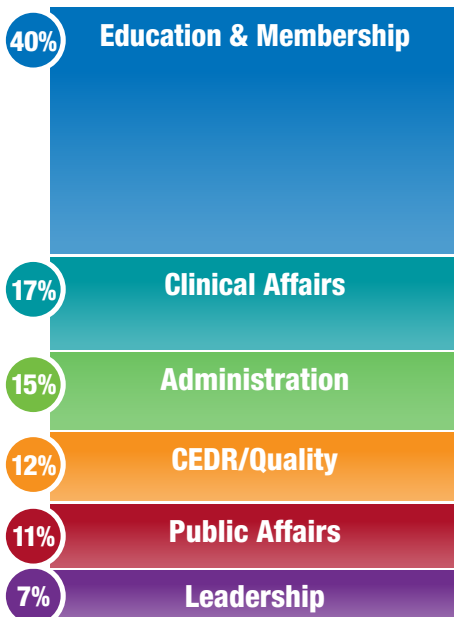
2019 - 2020

Membership dues are used to fund a variety of national programs, resources and initiatives that advance emergency medicine and assist emergency physicians in daily practice. Our standard national dues have not increased since 2014.



Total Expense
\$39,525,979

Visit acep.org/membership for more information



FY 2019-2020 Expense By Activity

Education & Membership

includes all educational products and eCME, Member Services, Corporate Relations, Communications, Marketing, Educational Meetings (including ACEP20), Grants, etc.

Clinical Affairs

includes EM Practice Management, Chapter Services, etc.

Administration

includes Finance, Technology Services, Human Resources, Legal, Office Services, etc.

CEDR/Quality

includes CEDR, Quality-related grants (E-QUAL, etc.)

Public Affairs

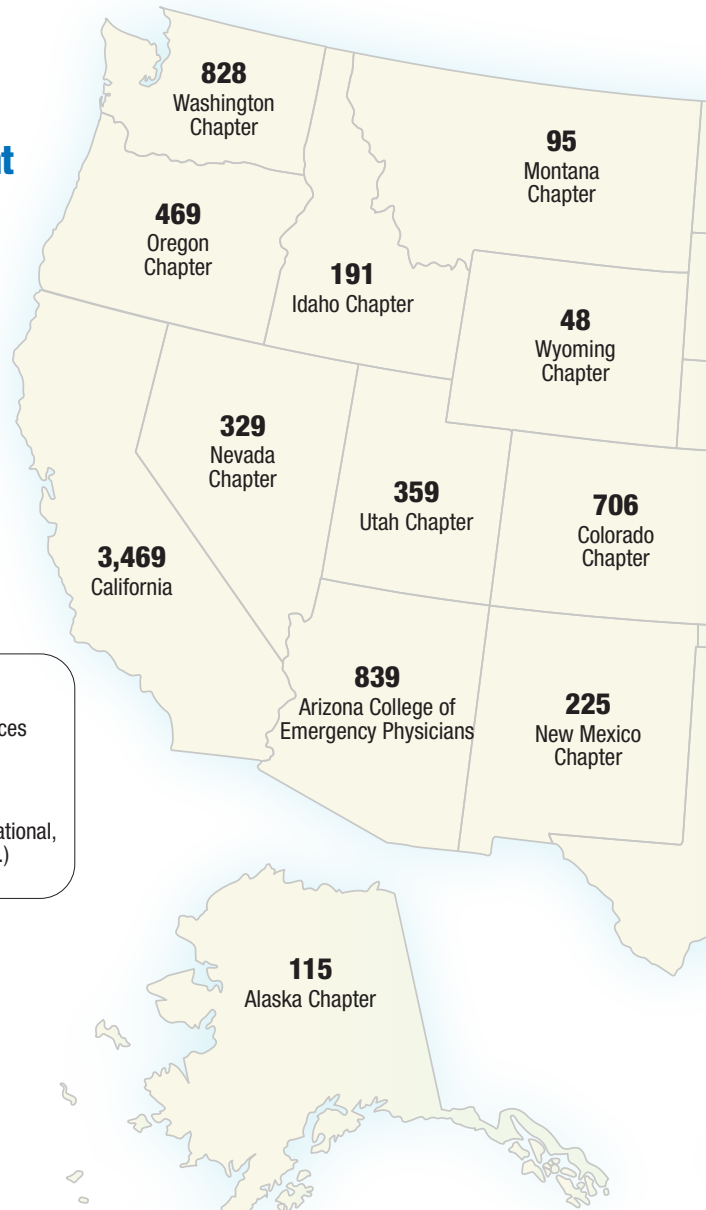
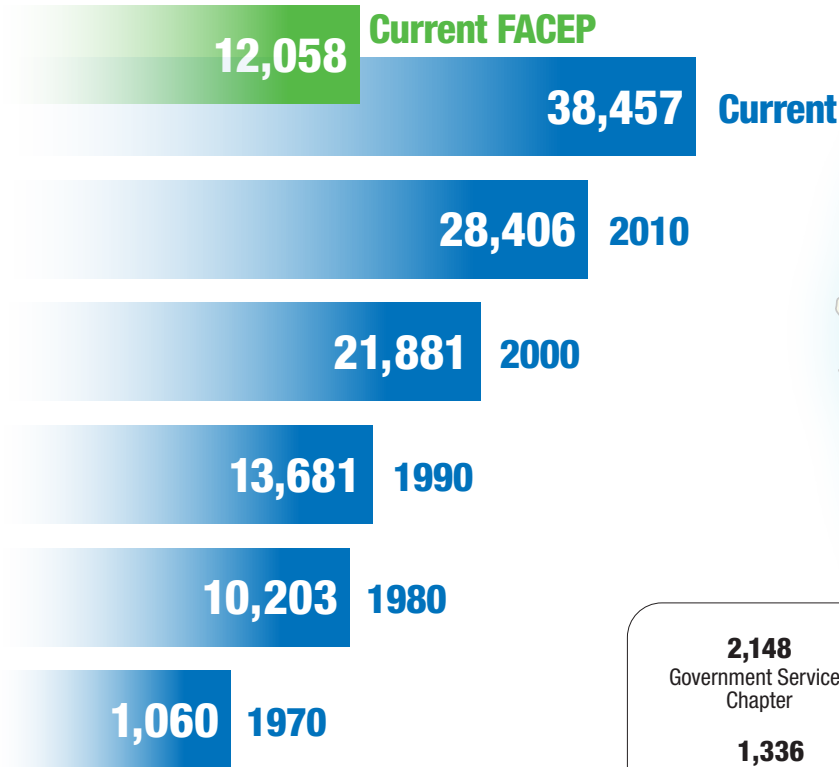
includes Congressional Affairs, Federal Affairs, Public Relations, etc.

Leadership

includes Board, Council, Committees, Executive Management, etc.

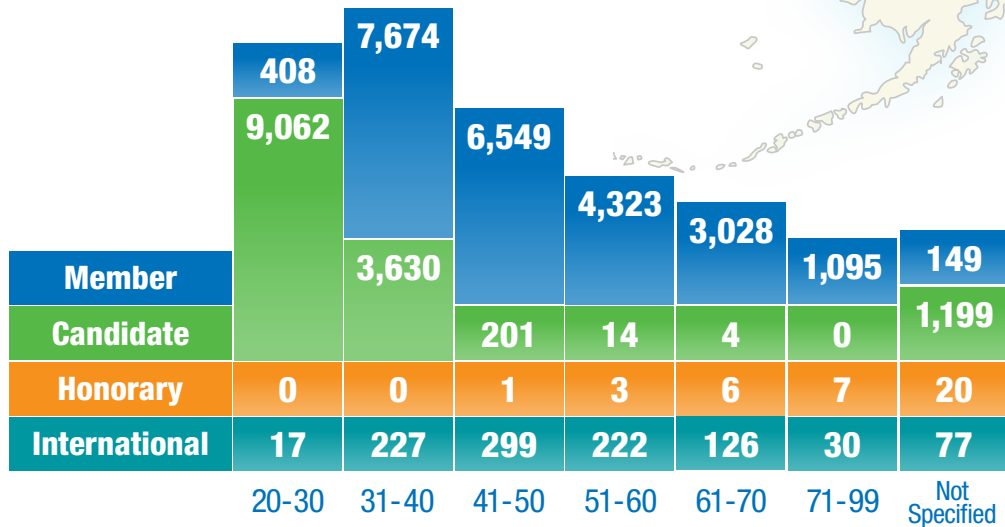
Your Peer Network is Growing

Membership Growth Through the Years



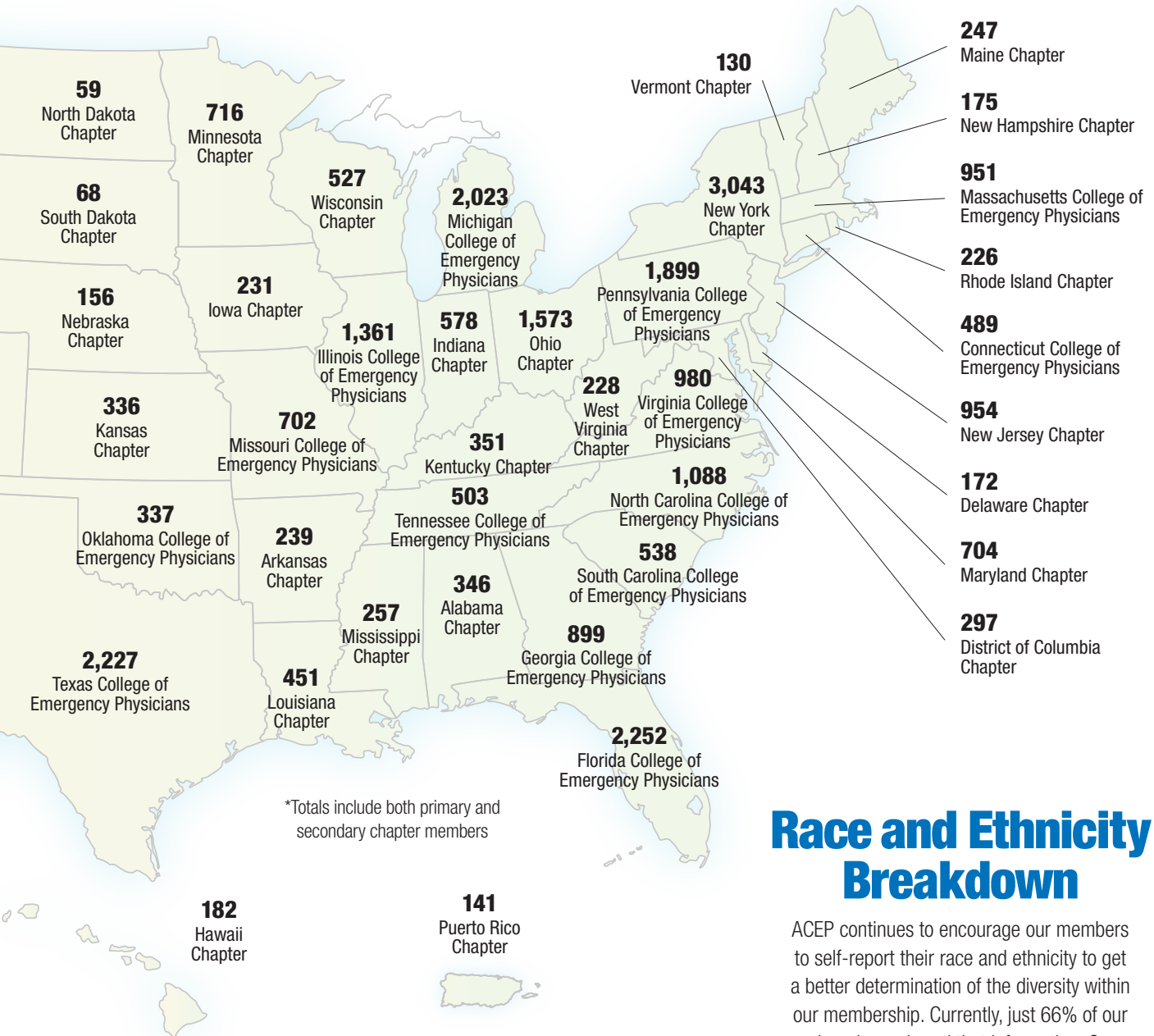
Age Breakdown

as of December 31, 2020



Chapter Breakdown

As of December 31, 2020



Race and Ethnicity Breakdown

ACEP continues to encourage our members to self-report their race and ethnicity to get a better determination of the diversity within our membership. Currently, just 66% of our members have shared that information. Once a larger percentage is reported, we will add that information in our annual report.

Gender Identity Breakdown

December 31, 2020





ACEP
for
you

Here for You

2020 was a year of massive changes – some welcomed, some forced upon us. As you adapted to the new reality in your emergency departments, ACEP adjusted to meet your evolving needs.

Educational events went completely virtual. Important issues were brought directly to legislators via phone, email and video chat. Social events with one another were hosted as safely as we could, sharing from our familiar Zoom boxes.

Defending the speciality and your role has never been more vital.

Who could have imagined how much this pandemic would alter our lives? And yet here we are – adapting, adjusting, resetting and reimagining.

You've changed. We've changed. But no matter what happens, one thing remains the same: ACEP is here for you

Executive Director Passes the Torch

As the next step in a career dedicated to improving healthcare, Susan Sedory, MA, CAE, assumed the role of ACEP's next Executive Director. Ms. Sedory will build on the foundation laid by Dean Wilkerson, JD, MBA, CAE, who retired after 16 years as ACEP's Executive Director on July 31, 2020.

Season of Change

Ms. Sedory was previously the Executive Director of the Society of Interventional Radiology since 2011, building on a career that included clinical care, healthcare research and strategic leadership, across corporate, non-profit and federal government sectors. Ms. Sedory is ACEP's fourth executive director—and first woman in this position—in the College's more-than-50-year history.



Under Mr. Wilkerson's tenure, ACEP saw growth in its media advocacy, legislative advocacy, and all parts of its operation. He helped make a difference in advancing emergency care and upon receiving ACEP Honorary Membership Award in October 2020, he said being part of the emergency medicine family has been the most enjoyable period of his 40-year career.