



when minutes count

common SENSE

The Newsletter of the American Academy of Emergency Medicine — Volume 13, Issue 2— March/April 2006



PRESIDENT'S MESSAGE

by Tom Scaletta, MD FAAEM

Integrity without knowledge is weak and useless, and knowledge without integrity is dangerous and dreadful.
- Samuel Johnson (1709-1784)

This is my first President's Message and I would like to begin by expressing my gratitude to the founders of AAEM for their foresight in appreciating the need for organizational redesign in emergency medicine. I also wish to acknowledge the growing number of emergency physicians demonstrating the courage and commitment necessary to establish and thrive in equitable groups. Finally, I am pleased to hear that even some of the large national and regional contract groups are evolving to meet AAEM's published criteria defining workplace fairness. AAEM certainly has made the practice of emergency medicine better for many physicians and I am honored to serve as its president.

My commitment to AAEM was galvanized in the mid 1990's after I was threatened with a defamation lawsuit for exposing a local program director who financially exploited his residents by pressuring them to cover night shifts in his contracted EDs. I soon found that AAEM was the only professional organization willing to assist in my defense. Upon asking for help, then President Bob McNamara, reassuringly stated, "of course Tom, that's what AAEM is all about." Now, a decade later, AAEM remains steadfast in protecting the interests of board certified emergency physicians.

AAEM's growth remains strong and steady and there are fivefold more members than when I first joined. Most new members sign up after they learn about our bold actions to protect the rights of physicians against abusive corporations. In fact, the AAEM Foundation, a non-profit subsisting on donations, was recently established to facilitate such campaigns. Each year, AAEM becomes more powerful and far-reaching in accomplishing its mission and promoting its principles.

AAEM's values fall into three main categories. First, the community deserves access to physicians certified by ABEM, AOBEM, or the RCPS (Canada). Surprisingly, it continues into the new millennium that we must monitor state medical boards to protect our patients against wannabes. Second, AAEM is deeply concerned about the welfare of emergency physicians because fair practice environments foster high quality patient care. And third, AAEM promotes outstanding resident and graduate education. In each of these areas, AAEM is a successful advocate for its members.

AAEM Services, our management education subsidiary, links EPs to consultants that help them develop independent, fair practices. We offer a seminar called "The Business of Emergency Medicine Made Easy" in conjunction with our Scientific Assembly. Please remember that help from AAEM is only an email away at info@AAEM.org. We are always happy to link emergency physicians to all the tools and guidance they need to start-up and run successful practices.

AAEM is trying to encourage hospital CEOs to contract only with groups that emergency physicians prefer and to explain what that entails. Below is an example of a letter we have sent to encourage hospital administrators to seek an AAEM compliant group should a request for proposal (RFP) from various ED groups be initiated. Please let us know to whom you would like the next one addressed.

Dear Hospital CEO,

The American Academy of Emergency Medicine is a national professional society representing approximately 5,000 specialists in emergency medicine. Through one of our members, our executive board became aware that your hospital recently issued a RFP from various emergency medicine staffing groups. AAEM believes that emergency physicians working in a fair and supportive practice structure best serve the community, the hospital and its medical staff.

AAEM has serious concerns about the corporate ownership of an emergency department contract. In such practices, the physician is an agent of the group rather than an owner with a vested interest in top performance. Of greater concern is that these arrangements may violate state laws prohibiting the corporate practice of medicine, thereby placing the physician's licensure at risk. The American Medical Association has recently taken action to rein in the corporate practice of medicine and AAEM itself has recently been involved with legal challenges regarding the corporate practice of medicine. Recent dealings with such corporations include TeamHealth in California and EmCare in Minnesota. We also participated in a successful action related to the corporate practice of emergency medicine in California involving Catholic Healthcare West. We would be happy to provide you with documents related to these matters.

AAEM is also concerned that such corporate employment arrangements may involve prohibited fee-splitting activities under current state and federal statutes. We therefore caution our members about accepting employment with corporate groups and suggest that hospitals examine such an arrangement with due diligence. AAEM believes that emergency physicians must remain free of the profit concerns of a corporation in order to serve in the best interest of the patients.

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The Academy has delineated structural criteria for emergency physician groups as described in the attached Certificate of Compliance document on "Fairness in the Workplace." We suggest that the attached document be used in your evaluation process of any responses to the RFP. In it, AAEM defines the boundaries within which independent groups should practice in order to be considered truly fair.

AAEM is willing to assist you in securing a fair, physician-owned group or in guiding your current physicians into a physician partnership. Thank you for your time and attention to this important matter.

During my tenure as AAEM President, I would like to see alignment of emergency physicians and nurses, hospital

administrators, community leaders, healthcare agencies and professional organizations toward a unified definition of emergency care excellence. The recipe for success includes simple ingredients like qualified, adequately staffed physicians and nurses that appreciate their work environment and desire to make a long-term commitment to the hospital and community. The real challenge in achieving this goal is to develop a meaningful and extrapolatable evaluation methodology. Consequently, such a tool will motivate hospital decision makers to put key values, like those AAEM embraces, into practice. If you too are interested in working on this project, please let me know, at president@aaem.org.

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AAEM Mission Statement

The American Academy of Emergency Medicine (AAEM) is the specialty society of emergency medicine. AAEM is a democratic organization committed to the following principles:

1. Every individual should have unencumbered access to quality emergency care provided by a specialist in emergency medicine.
2. The practice of emergency medicine is best conducted by a specialist in emergency medicine.
3. A specialist in emergency medicine is a physician who has achieved, through personal dedication and sacrifice, certification by either the American Board of Emergency Medicine (ABEM) or the American Osteopathic Board of Emergency Medicine (AOBEM).
4. The personal and professional welfare of the individual specialist in emergency medicine is a primary concern to the AAEM.
5. The Academy supports fair and equitable practice environments necessary to allow the specialist in emergency medicine to deliver the highest quality of patient care. Such an environment includes provisions for due process and the absence of restrictive covenants.
6. The Academy supports residency programs and graduate medical education, which are essential to the continued enrichment of emergency medicine, and to ensure a high quality of care for the patient.
7. The Academy is committed to providing affordable high quality continuing medical education in emergency medicine for its members.

Membership Information

Fellow and Full Voting Member: \$345 (Must be ABEM or AOBEM certified in EM or Pediatric EM)
 Emeritus Member: \$250 (Must be 65 years old and a full voting member in good standing for 3 years)
 International Member: \$125

* Associate Member: \$250 (Non-voting status)
 AAEM/RSA Member: \$50 (Non-voting status)
 Student Member: \$50 (Non-voting status)

* Associate membership is limited to graduates of an ACGME or AOA approved Emergency Medicine program.

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