







## **EDPMA 2022**

## **Fiscal Year Annual Report**

Emergency Department Practice Management Association 1660 International Drive, Suite 600 McLean, VA

EDPMA.org

## EDPMA'S MISSION

The mission of the Emergency Department Practice Management Association is to advocate for emergency department physician groups and their business partners to enhance quality patient care through operational excellence and financial stability.



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We get things done for the business of emergency medicine.

## About EDPMA

The Emergency Department Practice Management Association (EDPMA) is a trade association representing emergency physician groups, billing companies, and supporting organizations.

As a member-centric trade association, EDPMA focuses on advocacy, education, and facilitating core connections allowing our members to quickly adapt to shifts in the emergency medicine landscape.

As EDPMA has concluded its 25th anniversary, its Board of Directors approved an ambitious strategic plan for 2023 and beyond. Driven by member input, four key tenants were established to summarize who we are and what we do.









# **EDPMA ADVOCATES**

EDPMA amplifies your voice to influence legislative and regulatory decision makers to actively support the delivery of high-quality, cost-effective care in the emergency department.

Led by our Federal Health Policy, State Regulatory and Insurance, the Quality, Coding and Documentation and the Practice Management <u>Committees</u> and supported by EDPMA staff and our consultants, we focus on legislative and regulatory strategies to combat flawed implementation of the No Surprises Act, bad payer behavior and cuts in Medicare reimbursement.

## "If it's important to you, it's important to EDPMA."

- Cathey Wise, CAE, Executive Director, EDPMA

## **EDPMA 2022 Advocacy By The Numbers**

- **48** meetings with members of Congress and staffers from 21 states, including 8 meetings with Committee leadership on EDPMA Lobby Day.
- **19** Letters To CMS/CCIIO bringing attention to and recommending solutions for the unlawful and detrimental implementation of the No Surprises Act.
- **12** Letters To Congress on issues ranging from the prevention of proposed Medicare Physician Fee Schedule cuts to supporting the Telehealth Extension Act.
- 8 Letters to State Regulators addressing down coding, balance billing and ED leveling policy.
- 2 **Grassroots Campaigns** to revise the Medicare Physician Fee Schedule and to prevent deep Medicare cuts.
- 2 Amicus Briefs successfully supporting litigation led by the Texas Medical Association.

## **EDPMA Advocates Using Data**

Based on your experiences, input, and concerns, EDPMA commissioned a study in 2022 looking at out-of-network payments before and after the implementation of the NSA. EDPMA's study reveals:

**91% of claims surveyed did NOT include an identified QPA as required by law.** There is no known enforcement of this pervasive health plan non-compliance.

Post-NSA Out-of-Network payments decreased 92% of the time (compared to Pre-NSA rates) resulting in an average revenue decrease of 32% per ER visit. This abrupt, dramatic reduction risks how emergency departments are staffed and how patients receive emergency care.

The Independent Dispute Resolution volumes are driven by artificially low QPAs, payer intransigence, failure of Open Negotiation, health plan termination of in-network agreements, and CMS' refusal to implement common-sense recommendations. The QPA survey results suggest artificially low QPA calculations that are not reflective of a market-based payment rate. These unsustainably low initial payments have created significant volumes of IDR initiations. Significant delays in dispute resolutions (up to 6 months) drive substantial negative cash flow for emergency physician groups and result in additional threats to patient access to care.

## When reported, the QPA consistently equals the allowed amount for provider payments meaning that health plans are regularly using a problematic QPA amount when the NSA clearly indicates that the QPA should not be the sole payment standard.

**Emergency Department staffing is in jeopardy.** If the current NSA implementation goes unchecked, emergency medicine practices are expected to lose almost \$1 billion each year.

EDPMA is committed to a viable and sustainable No Surprises Act implementation. We continue to offer solutions, input, and data to the Department of Health and Human Services, the Department of Labor, and the Department of Treasury to promote:

- Rapid and effective enforcement of NSA provisions
- Required use of RARC codes for claims processed under no surprise billing regulations
- Creation of specific RARC codes to identify if claims were processed under either federal or state regulations
- Accurate QPA calculation
- Continued Congressional Involvement
- Sustain patient protections under EMTALA

#### **Continued Congressional Involvement**

Congress should ensure that the bipartisan No Surprises Act not only keeps patients out of the middle of payment disputes but is implemented as intended. This includes aligned implementation policies for health plans and providers, efficient and cost-effective dispute resolution, appropriate transparency, and effective enforcement processes. Congress' continued assistance and involvement is key to achieving the agreed-upon goals of this landmark legislation, while also preventing the NSA from becoming a landmark failure due to its undermining the viability of emergency medicine physician groups—the heart of our national emergency safety net system.

See the study summary here.

## **EDPMA 2022 Advocacy Wins and Resources**

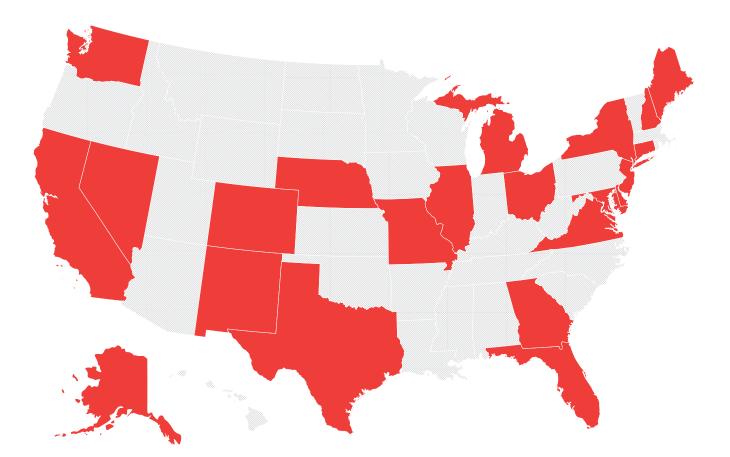
Based on our united efforts, CMS released an NSA Checklist of Payer Requirements. While this indicates CMS hears us, it is not enough.

EDPMA advocates for its members in the courtroom. We filed an amicus brief in support of the successful Texas Medical Association (TMA) lawsuit that challenged the QPA as the primary factor for consideration by the arbitrator in the Independent Dispute Resolution (IDR) process.

The federal court judge ruled in favor of the second TMA lawsuit clearly stating that the NSA was not ambiguous and required all the factors listed in the statute should be considered in determining the final payment amount. EDPMA's amicus brief contributed to this win.

#### No Surprises Act State Fact Sheets

To arm our members with the resources to determine NSA implementation on the state level, EDPMA created an interactive map featuring a summary of specified state laws that may apply to claims.



Members can access an overview of state laws and more in-depth fact sheet corresponding with the state's emergency services efforts. A Federal NSA Fact Sheet covers the federal NSA process.

## **EDPMA 2023 Advocacy Priorities**

#### Recommend solutions to the flawed implementation of the No Surprises Act

Advocacy surrounding the No Surprises Act (NSA) continues to be a laser-focus priority for EDPMA. Non-compliance by health plans continues to be a systemic issue that undermines the delivery of emergency care. While it appears the law itself achieved its goal to protect patients, the NSA's flawed implementation now substantially threatens how emergency departments are supported and jeopardizes the nation's safety net.

#### **I-Tact Task Force**

To address member issues associated with the implementation of No Surprises Act, EDPMA convened the No Surprises Act Implementation Tactical (I-Tact) Task Force and formed three Work Groups:

- NSA Compliance
- Independent Dispute Resolution (IDR) and IDR Entity Non-Compliance
- Legislative and Regulatory Fixes

These subject matter experts and boots-on-the-ground leaders identify membership concerns and work to resolve them so the No Surprises Act is implemented as intended.

#### **Medicare Physician Fee Schedule**

EDPMA continues to urge Congress to protect the healthcare safety net and avoid disruptions for Medicare beneficiaries by eliminating scheduled cuts to Medicare physician reimbursement and to advance long-term solutions to provide greater stability for physicians participating in the Medicare program and their patients.

#### **Down Coding Policies**

EDPMA continually confronts systemic payer policies that delay, deny, or reduce payments. This bad payer behavior undermines the prudent layperson standard and violates prompt payment regulations. EDPMA advocates on all levels to combat these practices on behalf of its members.

**Preserve patient access to care** through telemedicine, network adequacy and in underserved rural communities.



EDPMA transforms complex content into timely information to deliver on-point and actionable education.

## **In-Person Learning**

### **Solutions Summit 2022**



Nearly 400 attendees joined us in Florida for the inspiring 2022 <u>Solutions Summit</u> where we kicked off our 25th anniversary celebration. For those not present, we offered 17+ hours of virtual Solutions Summit education. Comments describing the Summit include "informative, collaborative and beneficial, eye-opening, energizing, connections, networking and family."



## **In-Person Learning continued**

#### In-Person Workshop: Staying Ahead of the Post Pandemic RCM Curve: Final Rule, PHE, NSA, Documentation Changes, and So Much More!

This record-breaking workshop gathered managers and coders in Las Vegas for laser-focused sessions to identify trends and share best practices to help our members manage effective and profitable practices.

During EDPMA's inaugural co-sponsorship of the ACEP Democratic Group Section meeting at the ACEP Scientific Assembly in San Francisco, FHPC Co-Chairs Dr. Andrea Brault and Dr. Randy Pilgrim provided an informative and engaging presentation of the No Surprises Act.



## Virtual Learning

EDPMA offered an engaging virtual workshop to educate our members on the landmark change in documentation guidelines: *Full Reset: Keys to a Successful Transition to the 2023 Documentation Guidelines.* 

We also offered three webinars offering our members just-in-time education:

- Unpacking the NSA IDR Final Rule: What's In IT, What's Not and What's Next?
- The Federal IDR Portal Launched: Now What?
- Presumptive Charitable Screening and Other Compliance Conundrums

# **EDPMA CONNECTS**

EDPMA connects the business of emergency medicine through meaningful member experiences and by strengthening our value to the specialty.

### **EDPMA Develops Future Leaders**

In 2022, EDPMA launched the <u>EMerging Leaders Academy</u>. The Academy brings together leaders to learn about the business of emergency medicine and to fine-tune their leadership skills to equip them for the next chapter of their careers. Meet our Inaugural <u>Class of 2024 EMerging leaders!</u>

### EDPMA's seven committees do the heavy lifting for the organization.

Every month, members participate in one-hour meetings to stay abreast of the ever-changing world of emergency medicine. Learn more, join, and contribute to our <u>Committees</u>.

Conference Planning Committee led by Iva Lee Clement

Education Committee led by Paul Hudson and Iva Lee Clement

Federal Health Policy Committee led by Andrea Brault, MD, MMM, FACEP and Randy Pilgrim, MD, FACEP

## Membership & Marketing Committee

led by Courtney Franco and Juli Forde Smith

Practice Management Committee led by Douglas Brosnan, MD, JD, Alan Eisman and Mark R. Jones

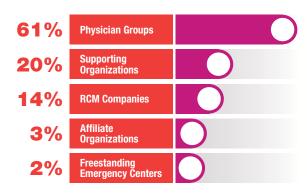
Quality, Coding, Documentation Committee led by Jason Adler, MD, FACEP, FAAEM and Casey Crane

State Regulatory & Insurance Committee led by David Friedenson, MD, FACEP and Shanna Howe



EDPMA thrives as an organization. As a trade association, EDPMA members are organizations representing physician groups of all sizes, revenue cycle management companies and supporting organizations.

## Membership Breakdown



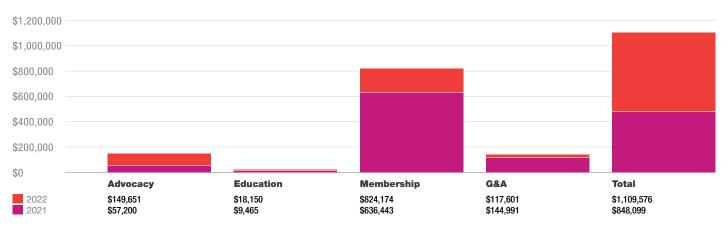
## Physician Employment Group Members By ED Volume



EDPMA members care for the patients in more than half of emergency department visits annually in the United States.



## FY 2021 & 2022 Revenue & Support



## **EDPMA** Celebrates



Throughout 2022, EDPMA celebrated its 25th Anniversary with reflections of our history, recognition of our leaders and a look to the future. Review our history and see the video from EDPMA's founders detailing our origin story <u>here</u>.

**EDPMA's 2022** Board of Directors provides the vision and strategy to ensure we continue to advocate, educate, connect, and thrive.

Paul Hudson, MBA, MHA, FACHE Acute Care, Inc. Andy McQueen

American Physician Partners

Andrea Brault, MD, FACEP - Chair Elect Brault

Jeff Bettinger, MD, FACEP\* BSA Healthcare

Andrea Halpern-Bryan CIPROMS Medical Billing, Inc.

**Don Powell, DO, FACEP\* - Chair** Emergency Care Specialists & Medical Management Specialists

Patrick Velliky Envision Healthcare Corporation

David Ernst, MD, FACEP\* EPOWERdoc, Inc.

Courtney Franco ImagineSoftware

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Aron Goldfeld, JD \* - Vice Chair TEAMHealth

John Mulligan, MD, FACEP US Acute Care Solutions, LLC

William Freudenthal, MD, FACEP Vituity

Shanna Howe\* Ventra Health

Ed Gaines, JD, CCP\* Zotec Partners, LLC

\*Indicates Executive Committee

**EDPMA's staff** turns vision into reality and strategy into execution to get things done in the business of emergency medicine.

Lisa DiBenedetto Director, Events

Ashley Dowling Director, Non-Profit Operations

Adrienne Frederick State Government Relations & Education Director

Kristie Hammill Accounting Manager

Amy Lotz, CAE MCI Executive Vice President and Chief of Staff Jemilah Senter VP, Marketing and Communications Joanne Tanner, MBA Membership, Sponsorship and Exhibits Coordinator Jeremy Uniszkiewicz Marketing Manager

Madison Williams Project Coordinator

Cathey B. Wise, CAE Executive Director