

## EDPMA COMMEMORATIVE REPORT



## 2021 ANNUAL REPORT

Successes Year To Date and  
EDPMA 25th Anniversary

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# PETTIGREW

HEALTHCARE PROFITABILITY SOLUTIONS

**Congratulates EDPMA on its 25 years  
of advocating for emergency medicine**

EDPMA CELEBRATES

**EDPMA** | **25**  
YEARS

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# *Congratulations on 25 years!*

Thank you EDPMA for your enduring commitment to advocacy and education that helps ensure quality care in vital, community-based emergency departments across the nation.

TH

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## EDPMA CELEBRATES 25 YEARS OF SUCCESSES

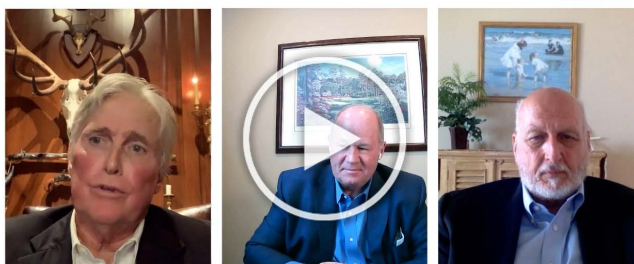
**“It’s not easy to start something –  
it’s easier to fail.”**

*said a skeptic during EDPMA’s early years.*

Yet, for Kip Schumacher, Bruce Moskow, Ed Gaines, Steve Dresnick, Jack Greenman, Mitch Cordover, Greg Hufstetler, Marty Gottlieb, Barry Alexander, Joyce Cowan, Tom Gibson, and others who fleshed out the concept of EDPMA on bar napkins 25 years ago at a Georgetown hotel—with cigars and Scotch—EDPMA’s founders ultimately proved the skeptics wrong.

The skeptics told them the idea of EDPMA was too big to succeed, that in six months, the organization would not be viable. Now, twenty-five years later, EDPMA is not only still here, but consists of a thriving membership that represents nearly half of emergency department visits annually in the U.S.

The bold vision of EDPMA founders and collaborators changed the course of business of emergency medicine. Throughout 2022, we celebrate the origins of EDPMA, 25 years of success, and a future of continued collaboration that began on the back of a napkin.



### Challenge Coins

While the exact origin of challenge coins is debatable, there is no debate as to their purpose. Challenge coins instill organizational pride, build morale, and reward hard work and excellence. In honor of EDPMA’s 25th Anniversary, we created a challenge coin to honor our leaders and the impact they make on the practice of emergency medicine.

We distributed almost 100 EDPMA Challenge Coins to our founders, early leaders, and those whose leadership, selfless service, and support shape our organization.

To these extraordinary leaders past and present, we thank you!



## CHAIR LETTER



EDPMA is founded on the principle business of emergency medicine, but is only successful because of its amazing individuals.

It's those individuals that saw a need and accomplished it. Against naysayers and critics, our founding leaders formed the first-of-its-kind emergency medicine trade association in 1997 focused on protecting our patients and the physicians who care for them.

To this day our members selflessly share best practices and information – even with their competitors — for the noble purpose of strengthening the practice of emergency medicine.

Each director of our 19 member Board has a single vote to guide EDPMA's priorities and strategies. Nineteen members representing the entirety of the business of emergency medicine has equal influence on our organization. This tenet is foundational to EDPMA's history and success.

Emergency medicine providers protect the profession of emergency medicine by ensuring that emergency medicine physicians are fairly compensated, and they practice in a robust environment.

In 2022, we reflect on the proud 25-year history of our organization. Because of our leaders, members, sponsors, supporters and stakeholders, our organization continues to thrive. And I'm proud to share the achievements of 2021 and beyond.

With continued unprecedented teamwork, and selfless leadership, EDPMA is poised for another 25 years of success and growth.

*Don Powell, DO, FACEP  
EDPMA Chair of the Board*

## ABOUT EDPMA

### EDPMA Mission

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

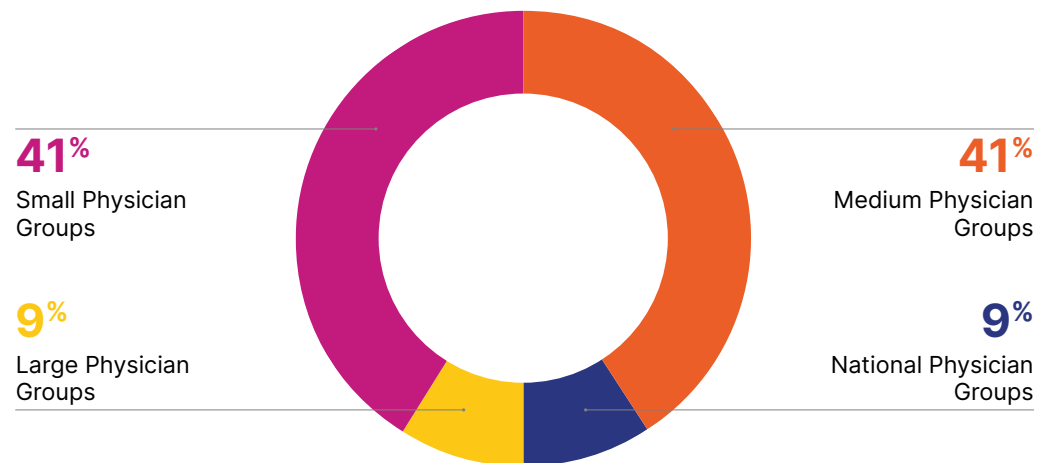
### Who We Are

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

Leaders from our member companies and organizations unite with one voice to make the emergency medicine specialty stronger.

Almost half of our member organizations represent physician groups, 19% represent revenue cycle management companies and 34% represent supporting and affiliate organizations.

Physician Employment Group Members By ED Volume



In 2021, we saw a 9% increase in membership from 2020. During the height of the COVID-19 pandemic, EDPMA kept our members informed in real-time about COVID-related benefits available to emergency medicine providers. We provided virtual, digital and in-person education to make sure our members have *what* they need and *when* they need it to ensure they manage a profitable and effective physician group practice. And our advocacy efforts continued to be front-and-center for our organization.

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

## ABOUT EDPMA CONT'D



### What We Do

As a member-centric association, EDPMA has a laser focus on advocacy, education and resources so our members can quickly adapt as the emergency medicine landscape shifts. EDPMA will always have your back.

### We Evolve

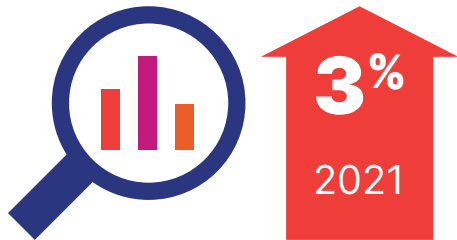
Responding to the trends in emergency medicine and the needs of our members, the Practice Management Committee was formed in 2020. This committee absorbed the Provider Enrollment Committee with a focus on gathering data to support our advocacy efforts, and addressing emerging issues in provider enrollment, rural health, legal compliance and more.

### We Advocate

EDPMA continues to advocate for you. Led by our Federal Health Policy, State Regulatory and Insurance, the Quality, Coding and Documentation and Practice Management Committees and supported by EDPMA staff and our consultants, we focus on legislative strategies to combat bad health insurance payor behavior like downcoding, non-compliance of the No Surprises Act and cuts in Medicare reimbursement.

## EDPMA ACTIONS 2021

Despite the global pandemic and the related financial challenges facing current and prospective members, EDPMA:



Experienced a 3% growth in its 2021 revenue from 2020. This was achieved through diligent stewardship of its resources and expenses.



Sent 125 letters regarding downcoding, No Surprises Act implementation, Medicare and Medicaid reimbursement, COVID Provider Relief and State-Level Surprise Billing. That's a 203% increase from 2020!



Held 25+ meetings with decision makers, sent 7 Action Alerts and filed one amicus brief supporting a lawsuit challenging the problematic Surprise Billing rule



### EDPMA Invests In Its Members

As our country continued to navigate the COVID-19 pandemic and its impact on our association and events, EDPMA continued to be a mindful and intentional steward of our resources. In 2021, we invested more than \$1.26 million in our members.

## WE SUCCEED

Because of the influence and laser focus of EDPMA and others, EDPMA is proud to report the following legislative and regulatory wins in 2021.

## MEDICARE

- The **2% Medicare Sequestration Cut** was **delayed** through December 31, 2021, as requested by EDPMA and others.
- The 2022 Medicare Physician Fee Schedule (MPFS) final rule maintains the ED E/M codes set on the **List of Medicare Approved Telehealth Services** through the end of 2023.
- The 2022 MPFS final rule:
  - modifies the proposal in line with EDPMA's comments to allow for performance of Medical Decision Making to identify the practitioner who provided the “substantive portion” of a visit for purposes of determining the billing practitioner of a **split (or shared) E/M service**.
  - reverses course on its proposal to bundle all **critical care services** into surgical global periods (if the case is in a global period).
  - reverses course on its proposal to ban billing separate **E/Ms on the same day as critical care services**.
  - continues to delay **Advanced Imaging Appropriate Use Criteria requirements**.
  - **delays requirements mandating subgroup reporting** under a TIN as part of its package of policies regarding the new MIPS Value Pathways (MVPs).
- The 2022 Outpatient Prospective Payment System (OPPS) Final Rule halts the elimination of the **Inpatient Only (IPO) List** and proceeds more cautiously.
- In December 2021, Congress passed legislation **delaying most of the 9.75% cut that was scheduled to take effect in 2022**. Instead, there will be a 0.75% cut for the first 3 months of 2022, a 1.75% cut for the next three months, and a 2.75% cut for the last six months of 2022.

### Medicare Physician Fee Schedule

EDPMA will continue to lead advocacy efforts to ensure the Medicare Physician Fee Schedule provides fair reimbursement rates to emergency medicine physicians.

## EDPMA WIN

**CMS proposed to accept the values for ED evaluation and management services as recommended by the AMA RUC for CPT 99281, 99282, 99283, and 99285. However, CMS rejected the RUC recommendation of work RVU of 2.60 for CPT 99284 and instead proposed to maintain the current work RVU of 2.74. While it appears the CPT 99284 remained flat, it actually is a win for EDPMA and our members.**

## NO SURPRISES ACT

You would think a statute requiring health plans to provide specific information to providers would be easy for them to follow?

Nope!

Non-compliance by health plans continues to be a systemic issue that undermines the delivery of emergency care in the U.S. EDPMA is leading the way to ensure the No Surprises Act is implemented as intended and that health plans fulfill their requirements under law.

### 2021

- More than **120 Members of Congress** sent a **letter to the agencies opposing the problematic interim final rule** implementing the No Surprises Act.
- First Interim Final Rule:
  - reiterates **Prudent Layperson Standard Prohibition** against denying emergency claims based on diagnosis after we raised concerns.
  - provides that **state law does not apply unless it applies to the item or service at issue** as we requested.
- Second Interim Final Rule: While the first interim final rule did not contain any exceptionally concerning guidelines, the second interim final rule certainly did. The guidelines indicated, during the IDR process, the QPA should be considered as the correct out-of-network payment amount. This guidance runs contrary to the language in the Act, which specifies no particular factor should be weighted higher than other factors during the IDR process. This guidance resulted in numerous lawsuits, including one filed by the Texas Medical Association and supported by EDPMA through filing of an amicus brief. Summary judgment was granted in favor of TMA, but that ruling was appealed by the Biden administration. That appeal, along with several other lawsuits, is currently in abeyance while waiting on the publishing of the final rule in late summer or early fall of 2022. Meanwhile, the No Surprises Act is in effect with many issues of non-compliance by the insurance companies.



## NO SURPRISES ACT CONT'D

### 2022

EDPMA collaborated with the American College of Emergency Physicians (ACEP) to bring attention to insurer non-compliance with the provisions of the No Surprises Act.

- We sent a letter to the Tri-Agencies of HHS, Labor and Treasury (the Departments) highlighting how **health plans have not supplied basic information required by the NSA** when paying for patient care services.
- We met with CCIIO to bring their **attention to consistent non-compliance issues**.
- We sent a joint letter to the Tri-Agencies asking for action to ensure patients are taken out of the middle of payment disputes with health plans. We asked them to **release FAQs (which they did!)**, hold providers harmless for mistakenly billing patients incorrectly, increase transparency about non-compliance cases, provide follow-up for concerned parties, and ensure states have the recently-provided checklist and distribute it directly to health plans.
- We met with Office of Management & Budget Office's of Information and Regulatory Affairs and the Tri-Agencies to strongly urge them to:
  - codify the most recent IDR language related to the certified IDR entity's evaluation of the factors and **not revert back to the presumptive QPA policy** that was included in the second Interim Final Rule.

- ensure that **health plans provide all the necessary information for providers** so they can accurately bill patients. This includes mandating the RARC codes and requiring that health plans disclose the plan type at the same time as the initial payment or notice of denial.
- **require plans to provide the plan type and the name of the employer for self-funded plans** to help resolve issues with batching. We reiterated that batching should NOT be limited to individual insurance products offered by a group health plan.
- **modify how the QPA is calculated to ensure that it is not artificially low and that it reflects the actual market rates** to provide more stability in the marketplace and decrease the number of providers being pushed out of network.

## EDPMA WIN

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

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# EPOWERdoc

HEALTHCARE SOFTWARE SOLUTIONS

**EPOWERdoc**  
congratulates **EDPMA**  
on its **25th anniversary**

EDPMA CELEBRATES

**ED**PMA | **25**  
YEARS

## INDEPENDENT DISPUTE RESOLUTION (IDR)

### Federal Independent Dispute Resolution (IDR)

is top of mind as our members navigate the not so clear path of securing fair out of network rates for emergency medicine physicians.

The Center for Consumer Information and Insurance Oversight (CCIIO) hosted an EDPMA/ACEP specific webinar about the IDR process. Before the webinar, we forwarded questions crowdsourced from the NSA Joint Task Force for inclusion in the session. After the webinar, we sent unanswered questions to CCIIO asking for answers that will be shared with our respective memberships.

After the Federal IDR portal launched, EDPMA hosted a timely webinar to share processes to ensure our members were “in the know.” The Federal IDR portal is used to facilitate claims through the federal IDR process under the No Surprises Act.

We sent a joint letter to the Tri-Agencies providing feedback when the IDR portal was newly launched.

*While it's a start, we will continue the pressure to ensure the No Surprises Act statute language and spirit of the statute are followed so patients are kept out of the middle of billing disputes and emergency medicine physicians are taken care of.*

# Congratulations



on

## 25 YEARS

*of Advocating for  
Emergency Medicine*



*THE POWER OF PARTNERSHIP*

## MORE ADVOCACY

### Downcoding Policies

In 2021, United Healthcare delayed its problematic downcoding policy (based on diagnosis) for a second time after EDPMA sent a letter and filed complaints with 50 insurance commissioners.

### Medicaid Reimbursement

In 2021, Wisconsin increased Medicaid emergency reimbursement by 15% after EDPMA worked with coalition partners on an action alert.

### Prompt Claims Processing by Veterans Administration

After EDPMA raised concerns in 2020 regarding processing delays, the Veterans Administration opened a portal to improve processing times for emergency claims in 2021.

### IF IT'S IMPORTANT TO YOU, IT'S IMPORTANT TO EDPMA...

In the first six months of 2022, EDPMA continues to advocate *for* you and *with* you.

Since January 1, 2022, EDPMA:

- Sent 9 letters
- Held meetings with CCIIO, OMB and the Tri-Agencies, Health & Human Services, Labor and Treasury
- Issued 2 press releases about the systemic denial and delay in payment by payers affecting the delivery of emergency Care & supporting TeamHealth's lawsuit against UnitedHealthcare and about our concern about health plans' threats to cut physician reimbursement up to 50%
- Supported legislative and regulatory efforts in Georgia, Washington and Indiana

### The EDPMA Rural Emergency Hospital Work Group

was created to review proposed rules about the newly-created Rural Emergency Hospital (REH) Medicare provider type. The REH comes as a response to ongoing hospital closures in rural communities and to the concerns of access to emergency services in rural areas. Policymakers believe the REH provider type will provide an option for communities that are perhaps too small to support a full-service hospital but need more than ambulatory care. When the rule was published in June 2022, EDPMA's REH Workgroup stood ready to review the proposed rules and draft a comment letters.

## MORE ADVOCACY CONT'D

### EDPMA WIN

EDPMA sent a letter to CMS requesting they revisit its calendar year (CY) 2023 policies regarding split (or shared) evaluation and management (E/M) visits as was finalized during CY 2022 rulemaking. As EDPMA requested, CMS has delayed the policy that would have based the determination of the billing practitioner solely on time. This policy is proposed for delay through January 1, 2024 while CMS collects additional input.

### COVID-19 Provider Relief Funds

In 2022, we asked the Department of Health & Human Services for a more topline accounting of remaining Provider Relief Funds so our membership can better understand how additional funds are distributed.

As always, EDPMA stands with you.



**Rev4ward**  
congratulates EDPMA  
on its 25th anniversary

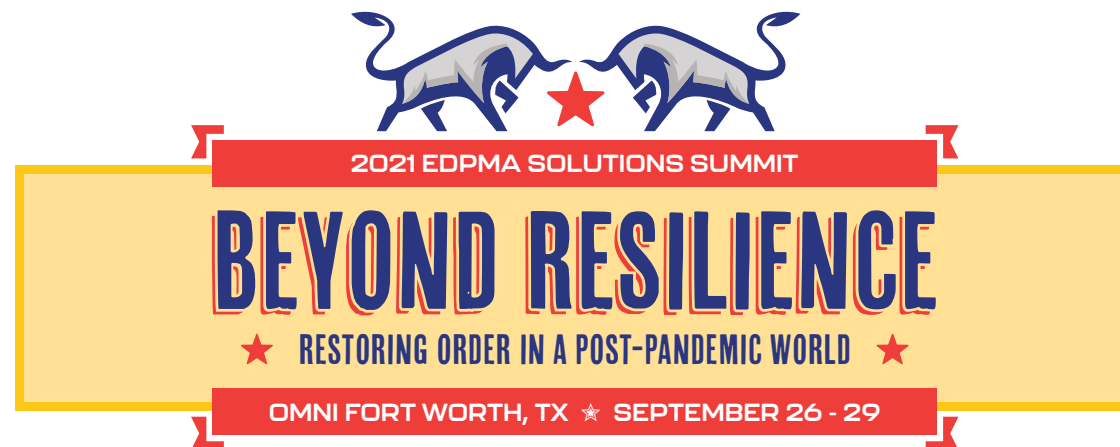


## SOLUTIONS SUMMIT

In 1997, EDPMA's founders knew its annual meeting needed to be distinctive and empowering. So, they created the Solutions Summit to ensure a focus on solutions impacting the business of emergency medicine. While the issues may have changed over the years, our focus on solving problems and uniting the industry remains the same. EDPMA's first Solutions Summit was in 1998 in Bethesda, Maryland followed by the second annual meeting in Miami, Florida.

### Solutions Summit 2021

In 2021, as stay-at-home and quarantine restrictions eased, EDPMA members and colleagues reunited at the Solutions Summit in Fort Worth, Texas in September. We delayed the conference by five months to be mindful of COVID-related travel restrictions and to give us the best opportunity to convene in person. Solutions-oriented educational sessions grounded the conference, old friends reconnected, new friendships were formed, and some sense of normalcy was restored.

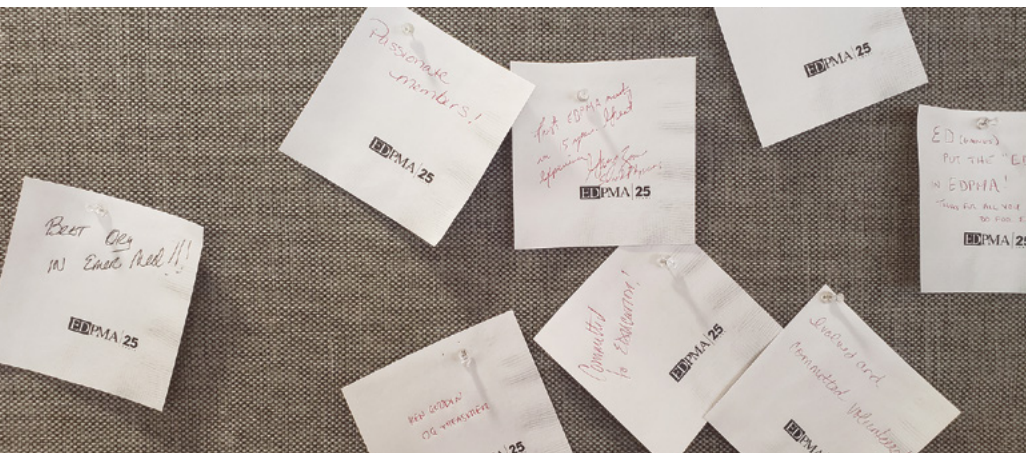


## SOLUTIONS SUMMIT CONT'D

### Solutions Summit 2022

Almost 400 attendees joined us for a successful Solutions Summit in Amelia Island, Florida. Comments describing the Summit include “informative, collaborative and beneficial, eye-opening, energizing, connections, networking and family.”

Not only did we learn and network together, we played golf and celebrated our 25th anniversary in grand style. Attendees contributed to an interactive “napkin wall” to share memories and well wishes for our organization. They also enjoyed a digital photo booth and several receptions.



## 2022 SOLUTIONS SUMMIT FEEDBACK

In 2022, we asked Solutions Summit attendees to tell us one word that quickly comes to mind describing their Solutions Summit experience. Here is what they said:



## TESTIMONIALS FROM THE 2022 SOLUTIONS SUMMIT

“The Solutions Summit is the best opportunity every year to learn about everything that is happening in the business of Emergency Medicine! Attendees have the opportunity to learn about the vendors that serve Emergency Medicine, and to see old and new friends in EM.”

*Steve Kearney, Concord Medical Group*

This was an amazing experience.

The EDPMA Solutions Summit annual conference is outstanding in its focus on the most pressing issues faced by the specialty of EM today. It is infused with a spirit of camaraderie, focused and tangibly useful information. The conference consistently lives up to its expressed mantra of ‘solutions.’

This is a great opportunity to get up close and personal with multiple companies, organizations and people that support the emergency medicine field.

*2022 Solutions Summit Attendees*

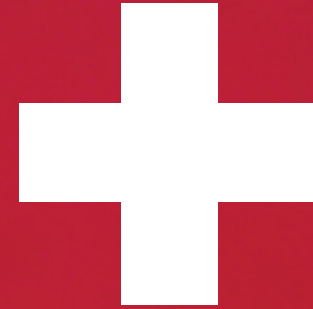


EDPMA | 25  
YEARS

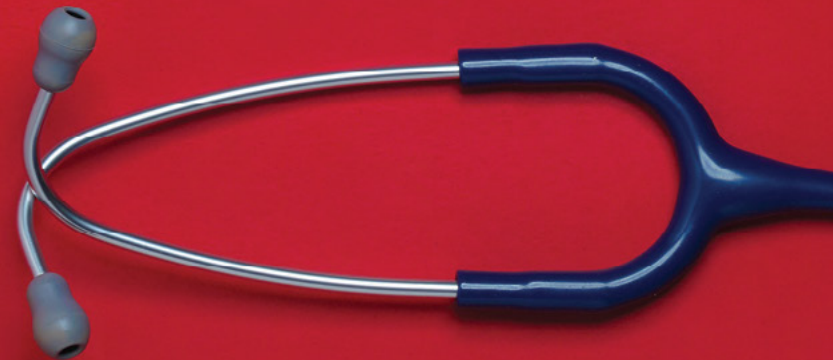
*Thank  
You for 25  
Years!*



Coding & Billing | Practice Management



Brault is a proud supporter of **EDPMA**  
and its mission of advocacy & education  
in emergency medicine.



Coding & Billing | Practice Management

## EDPMA WORKSHOPS

### 2021 Spring Virtual Workshop: The Cinco de Mayo Sessions: Victory over COVID-19 & EMs Future State

Almost 100 people gathered virtually to learn about the Consolidated Appropriations Act, monoclonal antibodies and medication assisted therapy, community paramedicine and more. EDPMA met our members where they are by bringing relevant education directly to their homes and offices.

### 2021 In-Person Workshop: Back Together Live & Riding The EM Reimbursement Tsunami

Almost 50 people met in Las Vegas to learn about the No Surprises Act, changes in office visit codes, cyber security and more.

### 2022 Virtual Workshops

We will host two virtual workshops focused on the new ED documentation requirements that go into effect in January 2023. One workshop will be geared for coders and educators and will provide a roadmap for internal coder education. Clinicians will benefit from the second workshop and will learn how to accurately document their medical decision making that can lead to risk reduction.



### 2022 In-Person Workshop: Staying Ahead of the Post Pandemic RCM Curve: Final Rule, PHE, NSA, Documentation Changes, and So Much More!

Managers and coders will gather in Las Vegas in December for laser-focused sessions to identify trends and share best practices to help our members manage effective and profitable practices.

## WEBINARS

### 2021

More than 650 people enjoyed seven EDPMA webinars with topics including: Surprise Medical Billing, Medicare & COVID-19 relief, strategies for avoiding downcodes and denials, and using ED volume comparative data to execute precision demand capacity management. As the world continued to struggle with the COVID-19 pandemic and its impact on our members and their companies, EDPMA provided relevant and just-in-time information so our members' businesses could thrive.

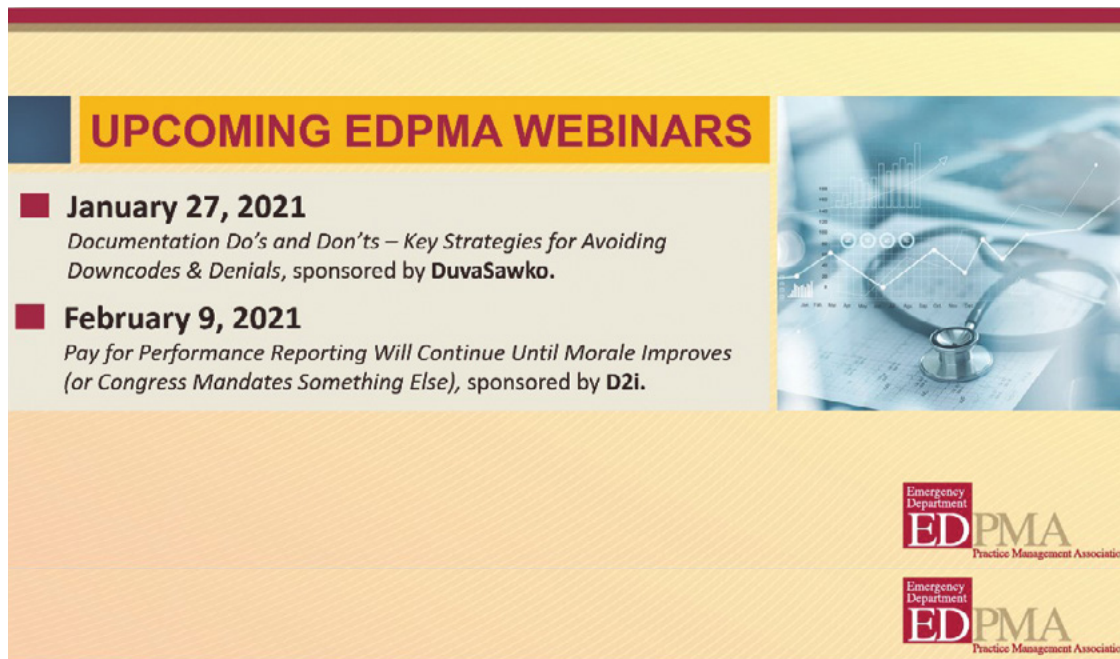
### 2022 (as of August 2022)

Members continue to value EDPMA education. In early 2022, we offered three webinars:

- QPA Data Collection Project Webinar for Skeptics & Analysts
- The Federal IDR Portal Launched: Now What?
- Presumptive Charitable Screening, Hardship, Prompt Pay Discounts and Other Compliance Conundrums

### Roundtables and Networking

In 2021, EDPMA offered a Meet The Candidates forum so our members could be informed and interact with those vying for a position on the EDPMA Board of Directors. We look forward to offering a similar program in 2022.



The graphic features a yellow background with a blue header bar at the top. Below the header, the text 'UPCOMING EDPMA WEBINARS' is displayed in bold, black, uppercase letters. To the right of the text is a blue-tinted image of a stethoscope resting on a document with a line graph. Below the header, there are two red square icons followed by the dates 'January 27, 2021' and 'February 9, 2021'. Each date is followed by a description of the webinar topic and the sponsor. At the bottom right, the EDPMA logo is repeated twice, with the text 'Emergency Department Practice Management Association' below it.

### UPCOMING EDPMA WEBINARS

- **January 27, 2021**  
*Documentation Do's and Don'ts – Key Strategies for Avoiding Downcodes & Denials*, sponsored by **DuvaSawko**.
- **February 9, 2021**  
*Pay for Performance Reporting Will Continue Until Morale Improves (or Congress Mandates Something Else)*, sponsored by **D2i**.

Emergency Department  
**EDPMA**  
Practice Management Association

Emergency Department  
**EDPMA**  
Practice Management Association

## COMMITTEES / EXECUTIVE DIRECTOR

### Committees: EDPMA's Foundation

Our seven Committees do the heavy lifting for the organization.

From guiding our federal and state advocacy strategies and execution to staying on top of quality and coding measures, to offering spot-on guidance on practice management issues, to creating a relevant and inspirational conference and educational programs, and ensuring a robust and thriving membership, EDPMA's Committee members learn, share and develop professionally together.

Every month, members join one-hour meetings to stay on top of the ever-changing world of emergency medicine practice management. Go to [edpma.org/committees/](http://edpma.org/committees/) to learn more, join and contribute to our Committees.

#### Federal Health Policy Committee

led by Andrea Brault, MD, MMM, FACEP and  
Randy Pilgrim, MD, FACEP

#### 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

#### Practice Management Committee

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

#### Conference Planning Committee

led by Iva Lee Clement

#### Membership & Marketing Committee

led by Courtney Franco and Juli Forde Smith

#### Education Committee

led by Paul Hudson and Iva Lee Clement

## COMMITTEES / EXECUTIVE DIRECTOR CONT'D

### With Gratitude

EDPMA gratefully acknowledges Nancy Dumas for her service as co-chair of the State Regulatory & Insurance Committee and Dr. Hamilton Lempert for his service as co-chair of the Quality, Coding, Documentation Committee. As both leaders "retire" from Committee service, we are grateful for the countless hours they contributed to EDPMA and their expertise they shared with us.

### EDPMA Welcomes a New Executive Director

In March 2022, EDPMA welcomed Cathey Wise, CAE as its new Executive Director. The organization is grateful for the nine years of leadership and service of Elizabeth Munding, JD and wish her well in her next chapter.

Cathey most recently served as executive director of the Emergency Medicine Residents' Association (EMRA) from 2014 to 2021 where she helped increase membership by 63%, member-centric events by 240%, and non-dues revenue by triple digits. Her skills and experience will help EDPMA to continue to thrive in membership and member value, education and resources, revenue, and advocacy.



# American Physician Partners congratulates EDPMA on **25 years of success!**

As a leader in emergency medicine management services, American Physician Partners is grateful for our membership in EDPMA. We appreciate your voice and advocacy for the specialty of Emergency Medicine over the past 25 years. We look forward to continue working with EDPMA and others in the field to further the clinical and business sides of Emergency Medicine on behalf of our patients, our emergency provider teams, and our hospital partners.



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## BOARD OF DIRECTORS

### EDPMA 2021 Board of Directors

**Acute Care Inc** - Paul Hudson

**Brault** - Andrea Brault, MD, MMM, FACEP\*- Immediate Past Chair

**BSA Healthcare** - Jeffrey Bettinger MD, FACEP\*

**CIPROMS, Inc** - Andrea Halpern Bryan

**Emergency Care Specialists** - Don Powell, DO, FACEP\* - Chair-Elect

**Envision Healthcare** - Patrick Velliky

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

**Gottlieb** - Shanna Howe

**Gryphon Healthcare** - Mark R. Jones

**LogixHealth** - Elijah Berg, MD

**R1 RCM** - Jackie Willett, CHBME\* - Treasurer

**Rev4ward, LLC** - Juli Forde Smith

**SCP Health** - Randy Pilgrim, MD, FACEP

**Sound Physicians** - Mike Presley, MD, FACEP

**St. Vincent Emergency Physicians Inc** - William Freudenthal, MD, FACEP\*

**TeamHealth** - Aron Goldfeld, JD\*

**US Acute Care Solutions** - L. Anthony Cirillo, MD, FACEP

**Vituity** - Bing Pao MD, FACEP\* - Chair

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

### In Memoriam

EDPMA honors the life and service of Dr. Michael Presley who passed away in 2021. We mourn with his family and are warmed by memories of his leadership and legacy. Rest In Peace.

\*Indicates Executive Committee

## BOARD OF DIRECTORS CONT'D



### EDPMA 2022 Board of Directors

**Acute Care, Inc.** - Paul Hudson, MBA, MHA, FACHE

**American Physician Partners** - Andy McQueen

**Brault** - Andrea Brault, MD, FACEP\* – Chair Elect

**BSA Healthcare** - Jeff Bettinger, MD, FACEP\*

**CIPROMS Medical Billing, Inc.** - Andrea Halpern-Bryan

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

**Envision Healthcare Corporation** - Patrick Velliky

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

**Gryphon Healthcare** - Mark R. Jones

**Imagine Software** - Courtney Franco

**R1 RCM** - Jackie Willett CHBME\* – Treasurer

**Rev4ward, LLC** - Juli Forde-Smith

**SCP Health** - Randy Pilgrim, MD, FACEP

**Sound Physicians** - Nathan Ruch, MD, FACEP

**TEAMHealth** - Aron Goldfeld, JD\* – Vice-Chair

**US Acute Care Solutions, LLC** - L. Anthony Cirillo, MD, FACEP

**Vituity** - Bing Pao, MD, FACEP\* – Immediate Past Chair

**Ventra Health**- Shanna Howe\*

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

\*Indicates Executive Committee

## EDPMA STAFF

**Lisa DiBenedetto, CMP**

Director, Events

**Ashley Dowling**

Director, Non-Profit Operations

**Adrienne Frederick**

State Government Relations & Education Director

**Amy Lotz, CAE**

MCI Executive Vice President and Chief of Staff

**John Sekel**

Associate Vice President, Finance

**Jemilah Senter**

Vice President, Marketing and Communications

**Joanne Tanner, MBA**

Membership, Sponsorship and Exhibits Coordinator

**Jeremy Uniszkiewicz**

Marketing Coordinator

**Madison Williams**

Project Coordinator

**Cathey Wise, CAE**

Executive Director



## EDPMA'S HISTORY AND FUTURE

### EDPMA's History and Future

In 1996, an emerging issue about the ability of 1099 independent contractors to reassign Medicare payments threatened the fundamental business model of emergency medicine physician groups. An informal group of leaders created the ED Coalition to address this issue head-on and to focus on advocating for the business of emergency medicine.

#### A guy walks into a bar....



With a mindset focused on solutions and amplifying united voices, our founders met

at the ANA Hotel in Georgetown. Understanding that one issue was becoming many issues, the group organized their efforts and defined their mission. With a cigar in one hand and a glass of aged Scotch in the other, our founders outlined what EDPMA would look like.

With grit and determination, this unpretentious group of like-minded leaders founded the Emergency Department Practice Management Association (EDPMA) in 1997.

EDPMA's focus is steadfast today as it was in 1997: legislative and regulatory advocacy, education, collaboration and connecting those in the business of emergency medicine.

#### Twenty-five years later, EDPMA continues to thrive.

EDPMA's founders include:

Barry Alexander (general counsel)  
Mitch Cordover, MD  
Joyce Cowan, JD (general counsel)  
Steve Dresnick, MD  
Greg Hufstetler, CPA, MBA, FHFMA  
Jack Greenman  
Ed Gaines, JD, CCP  
Martin Gottlieb (deceased)  
William "Kip" Schumacher, MD  
Bruce Moskow, MD

Kip Schumaker, MD served as EDPMA's first Chair of the Board and Tom Gibson served as its first executive director.

**"We had to go to Washington a lot. We worked hard, burned up a lot of shoe leather, but had a good time."**

*Ed Gaines, JD, CCP*

EDPMA welcomes YOU to help lead and influence our present and tomorrow. Go to [edpma.org](http://edpma.org) to find your place in the business of emergency medicine.



**Zotec has been a proud partner  
for 25 years, and we look forward  
to the next 25 years!**



Thank you for your ongoing advocacy  
and support in the specialty.

A night-time photograph of the Bellagio Hotel & Casino in Las Vegas. The large, ornate building is illuminated with warm lights, and its reflection is visible in the water. In the foreground, the Bellagio Fountains are spraying water into the air, creating a dynamic and colorful display. The sky is dark blue, and the overall atmosphere is one of luxury and entertainment.

# Save the Date!

**APRIL 17-20, 2023**  
**SOLUTIONS SUMMIT 2023**

Las Vegas, Nevada • Bellagio Hotel & Casino

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