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**President's Message**  
**Heather Heaton, MD, FACEP**

Colleagues:  
It's great to have the opportunity to connect with you again.

As I sat at my daughters' soccer games this weekend and contemplated when the third Minnesota winter would end, I thought about how lucky I am to have a community of colleagues that understand the importance of flexibility. While we all await spring (and I dare say it might be here...), we are a team of physicians well equipped to handle the late storms that challenge us, whether it be a never-ending winter, the most recent wave of COVID in our communities, or the ongoing challenges with behavioral health resources in our state.

Last quarter I shared my thoughts on the three main challenges facing Emergency Medicine in the future. With every challenge, there is an opportunity to problem solve and innovate—I shared some thoughts on human factors. Now, let's think about how we operate.

The ED cannot surge to another department. We have no overflow unit; we have no control over patient volumes or arrival patterns. COVID taught us that we must understand patient complexity when staffing, as volume is only a portion of the operational equation. We must embrace analytics with more intention and let it permeate all aspects of ED operations. Our models must factor in hospital capacity and resource constraints; these data will actively change the way we manage our department, allowing new insight into

staffing allocation and surge preparation. But how? What is your department doing? Is there something your department can share with mine?

What else? New models of care delivery, particularly those that are digitally driven, will transform the practice over the next ten years. Additionally, as reimbursement changes incentivize more home-based care and outpatient management of patients historically hospitalized, is there a new role for the EM physician in identification and connection with remotely monitored patients that are at risk for decompensating? Can we collectively get a seat at this table and help our inpatient and outpatient colleagues understand where we add value?

Flexibility is the name of the game with ED operations. Let's help each other. Join the MN ACEP Facebook group and share how you are handling, or struggling, operationally. Let's pool our collective experiences to improve the care we deliver in our EDs.

With gratitude for what you do,  
Heather

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## **Legislative Update**

### **Buck McAlpin, Legislative Consultant**

As I write this legislative update the Minnesota Legislature adjourned Sine Die for the 2022 legislative session on May 23rd. Again, for another year, the legislature adjourned without completing most of their work on time. All the major supplemental budget bills died for this session. Bonding, Health and Human Services, Public Safety and K-12 could not come to a compromise at the end of the day.

The House and Senate did compromise on the shortfall in the unemployment fund and replaced \$2.7 billion in that fund. They also passed a "hero pay" program that spends \$500 million to provide a check to MN residents like police, fire, EMS, and nursing. This program is currently being developed and information will be disseminated soon from the Department of Economic Development.

In the above deal, the House, Senate, and Governor also set aside \$190 million in a fund for any funding needed to combat the on-going issues around COVID-19.

During the last hour of the legislative session two bills passed independently that impact health care: The House and Senate conferees agreed on a "policy" only health bill. The bill includes waivers to staff ambulances and some policy changes around long-term care and substance abuse. The second bill was a very large Mental Health reform bill that MNACEP supported. This bill is bipartisan in nature and was worked on the last year by a group of legislators.

The bill provides:

1. 144 new mental health beds at the Bethesda site
2. Any hospital can expand mental health beds until 2027 and go around the bed moratorium

3. Child mental health funding and crisis stabilization residential facilities funded and expanded
4. Mental health rates adjusted
5. Mental health urgency rooms allowed
6. Numerous grants to support mental health care

On the health care front, the House and Senate have seemed to take differing views on what they feel are priorities for a supplemental budget. The Senate has focused on “sustaining” the safety net of providers that have been severely impacted by the past two years of the pandemic. These services have a large dependence on Medicaid payments and had a drastic impact to revenue during the last two years.

- PCA services
- Nursing homes
- Substance abuse
- Mental health
- Non-emergency medical transportation
- Day services
- Childcare and boarding services
- Waivers and some continuing flexibilities
- Workforce solutions
- Some bed moratorium exceptions around child mental health beds

The House has focused on some new opportunities and had a much larger bill than the Senate had released. As you look at the two health bills side by side, they have very little in common regarding priorities. The House seemed to prioritize their bill around:

- Surprise billing
- Nurse staffing ratios
- Workforce incentives
  - Loans
  - Loan forgiveness
  - Grants
- Long haul COVID patients work-group
- Public health
- Numerous Cannabis proposals
- Increased regulations on long-term care
- Health Care Affordability Board
- Medicaid reform-opt-out of managed care
- MNcare public option-expansion
- Pharmacy/drug reform
- Mental health for kids

As I look at the extreme differences in the House and Senate provisions of the health bill and other budget bills, if a special session is called it will require some lengthy negotiations.

The Governor initially drew a solid line in the sand on “no” special session. They did meet yesterday and discuss the possibility of a special session to finish these budget bills and big tax reform bill that primarily eliminates social security tax. The Governor said he will only call them back if they have a global deal on all the outstanding bills and a special session.

The legislature is in for an extreme turnover in the fall election and the start of the 2023 legislative session. The House and Senate will see nearly 100 legislators retire or not run again due mainly to redistricting this year. Also, the stage is set for the fall Governor's race as Governor Walz will face Republican endorsed candidate former Senator and doctor Scott Jensen.

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### Welcome New MN ACEP Members!

Zachary Stephen Affeldt, MD  
Dacotah Stephen Anderson  
Brian N Bartlett, MD  
Claire Elizabeth Baumgartner, MD  
Mark Michael Billingsley  
Jesse Brooks  
Samantha Cox, MD  
Anneliese Cuttle, MD  
Stella Duong, MD  
Kelsey Echols, MD  
Timothy Richard Greiner, DO  
Justin Groenewold, MD  
Sydney J Hansen, MD

Derick Jones, MD  
Laura Kuhlman, MD  
Junggu J Lee, MD  
William Lick, MD  
Adiba Matin, MD  
Christopher Obetz, MD, FACEP  
Christopher Peters, DO  
Tri Quoc V Pham, DO MA  
Mark Rockwell, MD  
Jurriaan T Strobos, MD  
James T Sturm, MD, FACEP  
Selina Sturman  
Tou Sue Thao, MD

## FROM NATIONAL ACEP



### ACEP Resources & Latest News

**ACEP President Dr. Gillian Schmitz [issued a statement on the Uvalde tragedy](#).**

"We offer support to all emergency physicians, who bear witness to this epidemic as we treat victims of firearms-related violence. We will continue our work to reduce gun violence through research, innovation and evidence-based practice."

**ACEP Calls for Stronger Protections for Emergency Physicians Who Raise Workplace Safety Concerns:** ACEP spoke directly to the Occupational Safety and Health Administration (OSHA) during a public meeting about whistleblower protections. ACEP Council Speaker Kelly Gray-Eurom, MD, MMM, FACEP, [raised the need for due process protections](#) for emergency physicians on the job.

ACEP Clinical Alert: [Shortages in Iodinated Contrast Media, Baby Formula](#)

## Workforce:

- **A new analysis of the EM physician resident workforce in [Annals of Emergency Medicine](#)** finds that while the number of residency programs is increasing, new programs are disproportionately located in urban areas in states with existing programs, rather than rural communities with limited access to emergency care. [Read more](#)
- **Building toward a better future, ACEP is moving forward on EM workforce initiatives.** [Watch an update](#) from ACEP President Dr. Gillian Schmitz on ACEP's progress during this April 28 town hall webinar hosted by the EM Workforce Section.
- **The Changing Role of Physician Assistants and Nurse Practitioners in the Emergency Department:** On May 26, ACEP's Democratic Group Practice Section is hosting a webinar with a panel discussion about best practices when using PAs and NPs in the emergency department. Topics will include ACEP's new policy on the role of PAs/NPs in the ED, economic considerations, workflow challenges, and how shared visits work. [Register for this free webinar.](#)

ACEP has launched a **public campaign ["Who Takes Care of You in an Emergency?"](#)** that includes a series of videos outlining unique aspects of the job and explaining the significant difference in training and education required for physicians. Here are [new scope of practice talking points](#).

**Problem solving: It's what we do.** [Take a look at the issues we're tackling](#) and how you can join the cause.

More than 100 leaders, members and staff worked together to create [ACEP's new strategic plan!](#) **It's an important roadmap for our future.** Together we'll build a better future for emergency physicians everywhere!

It's Mental Health Awareness Month and [EM Wellness Week](#). Check your physical and financial vitals. Did you know ACEP has a page with [EM-specific financial planning resources?](#)

The [May issue of ACEP Now](#) features **new articles focused on behavioral health**, including [The Importance of System-Level Wellness](#) and [How to Approach Psychiatric Patients who Wish to Refuse Treatment in the ED](#).

## Advocacy:

**Help Move the Workplace Violence Prevention Bill Forward!** Ask your U.S. Senators to co-sponsor and support the "Workplace Violence Prevention for Health Care and Social Service Workers Act" (S.4182). [Take Action!](#)

On May 4, ACEP and the Emergency Nurses Association hosted a press event at Capitol Hill to increase public awareness of workplace violence in the emergency department and to push for swift passage of the "Workplace Violence Prevention for Health Care and Social Service Workers Act." [Read the press release with more information about the bill.](#) Watch the [Facebook Live recording](#) of the press event.

### **No Surprises Act**

In the latest twist, the government requests Texas court place a “hold” on its surprise billing appeal. [What does this mean for ACEP's lawsuit?](#)  
[Dive deeper and learn more](#) about ACEP’s many years of advocacy on this issue that led up to this law.

### **Prioritize Physician Mental Health**

It's Mental Health Month and a good time to look at the recently-passed Dr. Lorna Breen Act. This vital legislation, named after an ACEP member who struggled and was tragically lost during the first surge of the pandemic, went from an idea to a law that will help protect the emotional health and wellbeing of emergency physicians. [See ACEP's Role.](#)

### **Regulatory Updates:**

- [Surgeon General Issues Advisory Addressing Health Worker Burnout: Gamechanger?](#) (5/26/22)
- [NEW BLOG SERIES: Value based Care in Emergency Medicine-- an Overview](#) (5/19/22)
- [CMS Finalizes New Network Adequacy Requirements for Certain Private Health Plans](#) (5/12/22)

### **Upcoming ACEP Events and Deadlines**

- **May 31:** Last day to utilize current [student loan rate discount for ACEP members](#)
- **May 31:** Last day to join the [ACEP22 QI Challenge](#)
- **June 1:** [Weird Baby Stuff: Managing Brief Resolved Unexplained Events](#) - Webinar hosted by the ACEP Pediatric Emergency Medicine Section
- **June 16:** [Breaking Down Barriers to ED Care for People with Sickle Cell Disease](#) - Webinar hosted by the CDC
- **June 16:** [EM Clinical Support Tool for Sickle Cell Disease](#)
- **June 17:** Last day to apply for the new [EMF health policy scholar grant](#)
- **June 20:** [Caring for our Heroes: Special Considerations for Treating Veterans in Emergency Departments](#) - Webinar hosted by ACEP
- **Aug. 23-25:** [Independent EM Group Master Class](#)
- **Nov. 11:** Last day to submit [ACEP23 course proposals](#)

### **Contact Us**

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