

PRESIDENT'S LETTER



Heather M. Prendergast, MD, MPH, FACEP

Looking Ahead to 2013

ICEP Celebrates Past Year's Accomplishments, Plans for Future

As the calendar year comes to close, ICEP can celebrate many accomplishments. As an organization, our core mission is to support quality emergency medical care and to promote the interests of emergency physicians.

To this end, we had several educational and legislative initiatives:

We conducted a successful EM Days in Springfield with our members making their voices heard to the legislature at the state Capitol.

ICEP was able to influence the rule-making process for the SMART Act, which would have defined an emergency condition to determine whether a patient would be responsible for a modest co-payment. ICEP representatives were successful in limiting this to so-called "non-emergency cases", rather than a designated Level 2 ED payment code, by arguing that such a definition would be in violation of state Medicaid statute which contains the "prudent layperson" standard.

As of the writing of this article, another initiative, SB 3233, which was intended to study the economic effect of the "out-of-network" legislation passed last year, is still being considered.

We developed new alliances and joint ventures with the Illinois State Council of Emergency Nurses Association and the Illinois Academy of Physician Assistants.

We expanded our educational programs in response to the learning needs of the membership and saw increased numbers of participants across the board.

New and expanded course offerings for 2013 include a STEMI/stroke conference designed to satisfy Joint Commission requirements, as well as two Ultrasound-Guided Peripheral IV courses for nurses (set for January and March 2013), two new Ultrasound courses for physicians (tentatively scheduled for November/December 2013), and the Primary & Acute Care Collaborative Conference (PACC) held in conjunction with the Illinois Academy of Physician Assistants.

These are in addition to our signature board review courses, the Oral Board Review Courses and Emergency Medicine Board Review Intensive, plus other member favorites such as Spring Symposium (see Page 4 for details) and the popular Emergent Procedures Simulation Skills Lab.

In 2013, ICEP is exploring the possibility of offering the Emergent Procedures Simulation Skills Lab at the new simulation center opening at OSF St. Francis in Peoria as a third

course date to supplement the two courses to be held in conjunction with the NorthShore Center for Simulation and Innovation at Evanston Hospital.

Next on the agenda in 2013 is Emergency Medicine Update, returning to Peoria on Thursday, February 21 with a half-day program with clinical and public policy sessions that are appropriate for physicians as well as other emergency care providers. (See story on Page 4 for more.)

On a national level, most current activity is centered on the fiscal negotiations with the White House. While there appears to be consensus and a commitment among the Obama Administration, House Republicans, and Senate Democrats to enact a short-term "doc-fix," the prospect of permanent physician payment sustainable growth rate (SGR) reform remains more uncertain due to the tremendous budgetary cost of SGR repeal. The most recent Congressional Budget Office (CBO) estimates project that the 10-year cost of repealing the SGR cost-control mechanism is roughly \$271 billion.

With the election of 2012 behind us, the future of the Affordable Care Act is clear and implementation is certain. So what does this really mean for us as EM physicians and for our specialty as a whole? How will the Affordable Care Act impact the safety net?

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Looking Ahead to 2013 at ICEP *from Page 1*

The transition toward new value-based payment models likely will continue, as CMS expands the Hospital Value-Based Purchasing Program and targets both readmissions and hospital-acquired conditions in upcoming pay-for-performance programs.

We also expect CMS to focus on bundled payment options and Accountable Care Organization (ACO) models to improve Medicare's affordability, efficiency and quality.

Finally, providers are faced with the prospect of deeper payment reductions, emanating from the Independent Payment Advisory Board (IPAB) — which, if not repealed, can make recommendations to Congress for how to rein in Medicare spending beginning in 2014. Providers and services will likely be the main targets for finding savings. Hospitals are exempt from IPAB recommendations until 2020.

Medicaid Expansion

The June 2012 Supreme Court decision that upheld the constitutionality of the ACA also made Medicaid expansion optional for states. It is estimated that another 1.8 million patients will be enrolled in Medicaid in the state of Illinois. This expansion will be paid for by the federal government with decreasing proportions going forward.

While CMS confirmed soon after the decision that there is no hard deadline for states to decide whether they will expand Medicaid eligibility, the agency also said that states will pay a price for delaying expansion because, under current law, the federal share of covering new Medicaid recipients declines each year starting in 2017.

Another question is whether the federal government still would pay the increased share of expansion costs if a state decides to cover individuals up to 100 percent of the federal poverty level, rather than 133 percent, as required by the

law, or at some level between 100 percent and 133 percent of the federal poverty level.

Taking these questions into account, governors will have to decide whether it would be politically palatable in their states to forgo federal money to cover more citizens and also whether their budget forecasts will permit them to bear the small — but increasing — share of the cost of coverage expansion in 2017 and beyond.

It also is possible that Congress could propose to dial back the federal share of the expansion cost in order to save federal dollars.

Exchanges

State-Based Exchanges, or marketplaces, are a key component of the Affordable Care Act (ACA). States have the option of operating their own exchanges or partnering with the federal government to run an exchange. States choosing neither option will default to a federally facilitated exchange. All exchanges, regardless of how they are administered, must be fully operational by January 1, 2014. Illinois has chosen to implement its exchange by partnering with the federal government. So what does a State-Federal Partnership Exchange mean for Illinois?

The State-Federal Partnership Exchange allows for the combined management of exchange functions and for an easier transition to a fully state-based exchange in the future. States opting for a partnership exchange can choose to operate various plan management functions, consumer assistance functions, or both. In addition, a partnership state can elect to conduct Medicaid and Children's Health Insurance Program (CHIP) eligibility determinations or allow the federal government to perform this service.

In all partnership states, HHS will perform the remaining exchange functions and ensure the exchange meets ACA standards. States are required to submit blueprint plans for approval

by February 15, 2013. Approvals will be announced on a rolling basis beginning in March 2013.

It will be important for state organizations such as ours to remain vigilant in the implementation and development of these new programs to ensure access for our patients and fair payment for our services.

It is increasingly clear that in order to provide the best care for our patients and provide optimal practice environments, we have to be our greatest advocates. No one can speak for us better than we can speak for ourselves.

To that end, on March 13, 2013, I encourage all ICEP members to join us for a new program, "Get on the Bus: Mobilization and Advocacy in One." We will host a single-day bus trip from the ICEP offices to Springfield during the legislative session to meet with our elected officials and talk about those issues germane to our practice as EM physicians.

Prior to meeting with selected legislator, ICEP members will have a private informational session by our chief lobbyist with distribution of key talking points. There are no prerequisites for attending this event except that you care about the future of our specialty. So save the date as we look forward to 2013.

I wish everyone a safe and happy holiday season, and the very best for the New Year.



— Heather M. Prendergast, MD, MPH,
FACEP, ICEP President



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House Task Force on EMS Funding Delivers Recommendations Report

The Illinois House Task Force on EMS Funding delivered its final report of recommendations to the legislature on November 20.

The report, spearheaded by Task Force co-chairs Rep. Don Moffitt and Rep. Lisa Dugan, is the result of testimony and data on EMS issues gathered at 17 different hearings held around the state of Illinois in late 2011. (The task force's first hearing was held September 20, 2011 at the ICEP headquarters.)

Six of the challenges identified through the hearings have already seen resolution from the legislature. Among the changes already implemented are:

- House Resolution 872 provides that Emergency Medical Services (EMS) should be formally be declared an essential service.
- House Bill 5672 called for changes to IDPH staffing requirements for emergency vehicle transportation, requesting an alternate staffing model that allows for staffing of an ambulance by one EMT and one first responder. It also requested a distinguishment between periods of time traveling to the scene of an emergency and periods of time transporting a patient from the scene of an emergency. IDPH has agreed to make these changes through administrative rule.
- The Department of Healthcare and Family Services (HFS) has published criteria for non-emergency transportation. Discussions with HFS are taking place about the process of the new prior approval forms and a formal appeal process.
- Public Act 97-0784 adds public or private ambulance vehicles that are plainly marked to the list of vehicles not required to pay a toll to use a toll highway.

The Report outlined ten additional sets of challenges that need to be addressed moving forward. The largest common issue is a sustained funding source for maintaining and increasing emergency medical services. Many providers throughout the state offered testimony on facets of this issue, such as the capability to recover adequate reimbursement for services rendered to patients, additional funding through tax incentives, consideration of specialized tax districts, allowance for fuel tax credits, the ability to pay EMS personnel better salaries, and the need to identify funding sources to assist EMS



Dozens of EMS professionals were in attendance at a press conference held at the Illinois State Capitol in Springfield to show their support for the recommendations of the Illinois House EMS Task Force.

system resource hospitals to offset their cost of providing EMS oversight. Other areas of concern included governmental inter-fund borrowing, which affects the availability of EMS assistance grants and hospital trauma funds to the EMS and Trauma community; hiring incentives; and the need for funding to support 911 call centers.

Education and licensure was another primary issue identified at the hearings. Many EMS providers voiced concerns about the impact additional educational hours and the existing renewal hours have on their ability to recruit and retain ambulance staff. There is a national trend to move educational requirements to a more competency-based model versus an hour-based model.

The existing Scopes of Practice as currently recognized in the EMS Act and Administrative Rules were also scrutinized at the hearings. Many providers would like to see the EMS Scope of Practice expanded to allow EMTs and paramedics to broaden their ability to utilize their education and skills in the pre-hospital setting as well as in the hospital setting.

Additional recommendations were also made in the areas of EMS system issues, trauma system issues, and disaster planning and response.

The Task Force Report concluded that to work toward resolving these large-scale issues, the General Assembly should form a combined Fire and EMS Caucus consisting of bipartisan members from both the House of Representatives and Senate. The caucus should include a wide representation of both rural and urban legislators from across the state. This Fire and EMS Caucus can continue to meet on a regular basis with EMS representatives to study the community's needs and advance a legislative agenda that supported by the EMS community.

The Report also emphasized that county or municipal governments must assist in establishing resolutions at a local level.

"Implementing changes and solutions to these critical issues will be vital to improve access to, and sustainability of these emergency medical services systems of care," the Report stated. "A key element to the future success of EMS throughout communities within the State will be to recognize Emergency Medical Services as essential services at a county/municipal level equivalent to its counterparts of police and fire."

In response to the release of the report, a coalition of EMS providers and stakeholders is forming to support legislative efforts to turn those recommendations into realities.

EMERGENCY MEDICINE *Update*



February 21, 2013
Peoria, Illinois

"Clinical Care of Unique Patient Populations"

Emergency Medicine Update Program Set for Feb. 21 in Peoria

ICEP's winter CME conference is returning to Peoria in 2013 and is scheduled for Thursday, February 21 at the Par-A-Dice Hotel.

The 2013 conference is a multifaceted half-day program with a focus on clinical emergency medicine and public policy topics. The program also provides specialized pediatric and trauma continuing education hours.

The program is targeted to physicians, residents and medical students as well as physician assistants and other advanced practitioners, all levels of nurses, and EMS providers.

Derek J. Robinson, MD, MBA, FACEP will open the educational program with a session on value-driven health care. He will demonstrate the impact of health care on the U.S. economy and the need for transformation of health care delivery. He will illustrate specific opportunities for EM physicians to improve quality and reduce costs.

Gene Couri, MD, FAAP, will discuss the difficult pediatric asthma patient, evaluating treatment options and defining the common pitfalls in the first hours of the critical asthma patient. His session will also assess early ventilator management for this patient population.

James Brown, MD, will focus on geriatric trauma and the unique challenges this spe-

cial population presents for stabilization and management. His session will review traumatic mechanisms and the unique responses of the geriatric patient. He will also summarize current literature and evaluate recommendations regarding the stabilization of the geriatric patient presenting to rural or tertiary care facilities.

Rose Haisler, DO, will examine pediatric trauma patients presenting to the emergency department. Her session will compare the anatomic and physiologic differences in pediatric patients; review the initial stabilization and assessment of the pediatric trauma patient; identify pediatric head, chest and abdominal injuries and their diagnosis and treatment; and analyze indications for transfer and transport considerations.

ICEP President Heather M. Prendergast, MD, MPH, FACEP, will give an ICEP update, describing the current issues and challenges facing the Illinois College of Emergency Physicians, and discussing ICEP's programs for patient and physician advocacy.

Emergency Medicine Update provides 4.5 *AMA PRA Category 1 Credits™*. The cost for ICEP members is \$109. Residents can attend for \$25, and there is no charge for medical students.

Register online now at ICEP.org or call ICEP staff at 630.495.6400, ext. 200. The full brochure will be available next week!

Save the Date for EM Day on March 13 in Springfield

ICEP has confirmed the date for its advocacy day in Springfield for Wednesday, March 13, 2013. The General Assembly has released its schedule for 2013, and both chambers will be in session that day.

Members from the Chicago area will leave the ICEP office in Downers Grove early in the morning by coach to travel to Springfield and return that evening to the office. (Downstate members will meet with the group in Springfield.)

All of the details will be announced in the coming months. ICEP is spreading the word to its members now so that you can block the date and plan to attend this special event.

During EM Day, members will have meetings with legislators to educate and discuss issues of importance to the emergency medicine community.

Northwestern to Host Spring Symposium on May 2, 2013

ICEP has finalized the date for the 2013 Spring Symposium and Annual Business Meeting. All members are encouraged to save the date and make sure their schedules will allow them to attend.

The Spring Symposium will be held on Thursday, May 2, 2013 at Northwestern Memorial Hospital's Feinberg Pavilion in Chicago.

The Education Committee is at work confirming the speakers and agenda. The half-day program will include clinical and policy topics and will feature a presentation by an ACEP leader. A course brochure will be available in early 2013.





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Advocate Medical Group - Heart and Vascular of Illinois*

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ICEP Seeks Submissions for Research Showcase at '13 Spring Symposium

ICEP is seeking submissions for the annual Statewide Research Showcase held at the Spring Symposium. This is ICEP's only research presentation opportunity, so don't miss your chance to submit and present at a regional meeting!

The Statewide Research Showcase is open to both residents and attending physicians to present oral and poster presentations of emergency medicine research.

ICEP is currently calling for submissions of abstracts from those interested in presenting their research at this year's Symposium, to be held Thursday, May 2 at Northwestern Memorial Hospital in Chicago.

The Research Committee plans to select four oral presentations and up to ten poster presentations to be showcased.

The deadline to submit abstracts for consideration is Monday, March 4, 2013.

All abstracts must be submitted electronically to Lora Finucane at loraf@icep.org with the completed Abstract Submission Form. Please make sure abstracts conform to the guidelines listed in the form.

To download the Abstract Submission Form, visit ICEP.org/research.

Residency directors and coordinators are asked to spread the word to their residents and encourage them to submit proposals.

Notification of the Research Committee's decision will be made via email at the beginning of April to give presenters time to prepare their materials.

Open Call for Nominations for ICEP Board, Councillors

If you are interested in running for a position on the ICEP Board of Directors or as an ICEP councillor, the Awards and Nominations Committee is receiving suggestions until Tuesday, January 15.

Four members will be elected to the ICEP Board in 2013. One resident member will also be elected. All 13 councillor positions are also up for election. Board members are elected by the membership by electronic ballot. Ballots will go out March 18. Councillors will be elected by the Board of Directors at its meeting following the Spring Symposium on May 2.

If you would like to nominate a candidate or be considered for either a Board or councillor position (or both), send an email explaining your reasons for seeking nomination to ginnykp@icep.org by January 15.

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Redesigned ICEP.org to Be Unveiled in January

A new ICEP website is in the final stage of development now, with the completely rebuilt site to be launched in January.

An improved user experience and ease of finding information is the primary goal behind the redesigned site. ICEP has worked with developers to make the site streamlined and easy to use, based on feedback provided by members, committee chairs, and the Board of Directors.

The site will be mobile-optimized so that members and other users will be able to use the site equally effectively from their mobile devices. A recent ACEP study revealed that the majority of members access websites from their mobile devices, and ICEP is aiming to meet members' needs with this key upgrade. The responsive design technique that the new site will use ensures that content is appropri-

ately sized for either a smartphone or a tablet, depending on which device the user is employing.

The reorganized site has also been designed to optimize search engine results and drive more web traffic, with the goal of increasing registration at ICEP's educational programs.

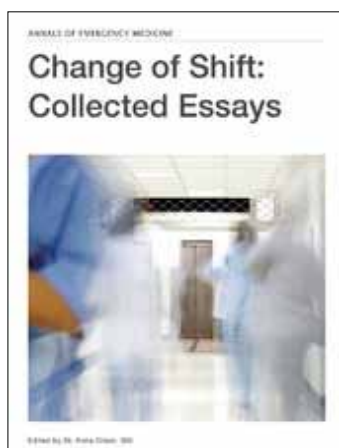
Other upgrades include full search functionality to find content by keyword or phrase; the elimination of the Members Only section so that publications and content are immediately accessible to all without a required login; and quick links to ICEP's social media pages and blog.

Check ICEP.org in mid-January and watch your email for a formal announcement of the launch.

ACEP Launches eBook Available Free for iPad

To celebrate the 40th anniversary of Annals of Emergency Medicine, ACEP has published a new eBook called *Change of Shift: Collected Essays*. The publication is free and can be downloaded from iTunes or iBooks.

This commemorative collection includes the top selections from over three decades of essays, poetry and personal perspectives published in Annals, the premier journal in emergency medicine. Some of these essays have been used as the basis of episodes of the former TV show "ER," and many have been written by ACEP members. The collection contains 260 pages of material.



"This year, we are celebrating 40 years of raising the bar in emergency medicine," said Michael Callahan, MD, FACEP, editor in chief for Annals. "We're very proud of *Change of Shift* and believe this electronic book is a great way to offer thanks to all of our readers, authors, reviewers and the editors who have made Annals the top journal in the specialty."

Dr. Callahan also thanked *Change of Shift* editor

Anna Olson, MD, for her work on the project.

The eBook can be downloaded onto your iPad through iBooks or your computer through iTunes.

ICEP Honors New Fellows Elected at SA 2012

Twenty-eight ICEP members have been elected to ACEP Fellow status and were honored at a ceremony at Scientific Assembly in October. Congratulations to our Chapter's newest fellows:

Stephanie R. Barlin, MD, MBA, FACEP

Christine Pabin Bishof, MD, FACEP

Daniel R. Butterbach, MD, FACEP

J. Eric Castro, MD, FACEP

Sarah M. Donlan, MD, FACEP

Aaron S. Epstein, MD, FACEP

Benjamin T. Flagel, MD, FACEP

James C. Harlan, II, MD, FACEP

Jason L. Konzelmann, MD, FACEP

Paul J. Krivickas, MD, FACEP

Mona P. Lala, MD, FACEP

Jason A. Layman, MD, FACEP

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Emilie S. Powell, MD, FACEP

Archana Reddy, MD, FACEP

David H. Salzman, MD, FACEP

Michael Schindlbeck, MD, FACEP

Connie Swickhamer, DO, FACEP

Hannah Watts, MD, FACEP

DeAndre R. Williams, MD, FACEP

Lisa Wu, MD, FACEP





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Call for Nominations for ICEP's Annual Awards to Be Presented at Symposium

ICEP is seeking nominees for its annual member awards that are presented at the Spring Symposium. The Awards and Nominations Committee is accepting nominations until Tuesday, January 15.

ICEP's awards include:

- **Bill B. Smiley Award**

The Bill B. Smiley Award is ICEP's highest honor and recognizes individuals who have made significant contributions to the advancement of emergency medicine in Illinois. Saif Nazir, MD, FACEP was presented with this award in 2012.

- **ICEP Meritorious Service Award**

The ICEP Meritorious Service Award honors significant contributions to the advancement of emergency medicine by exemplary service. Cai Glushak, MD, FACEP, was presented with this award in 2012.

- **Downstate Member Award**

The Downstate Member Award recognizes a physician who lives outside of the Chicago metropolitan area but continues to remain active in the organization despite having to travel great distances for most ICEP activities. Lisa

Barker, MD, FACEP, was presented with this award in 2012.

- **ICEP Advocacy Award**

The ICEP Advocacy Award honors significant contributions and efforts in the advocacy arena to advance the interests of the College and emergency medicine.

To nominate a candidate for one of ICEP's awards, send an email explaining your reasons for the nomination to Ginny Kennedy Palys at ginnykp@icep.org by January 15.

EMS Community Mourns Loss of Colleagues After Rockford Helicopter Crash

The greater EMS community throughout Illinois continues to mourn the loss of three fallen colleagues, victims of the medical helicopter crash that occurred the evening of December 10 on a flight from Rockford Memorial Hospital.

Pilot Andy Olsen, 65, and critical care flight nurses Karen Hollis, RN, 48, and Jim Dillow, RN, 40, were en route to pick up a patient from Mendota Community Hospital when the helicopter encountered bad weather and planned to turn back. Shortly after, the helicopter crashed in a field outside of Compton, Ill., killing all members aboard.

Both Hollis and Dillow had worked at Rockford Memorial Hospital's Regional Emergency Acute Care Transport (REACT) program for more than 10 years. Olsen was a veteran pilot who was just a week away from retirement.

Hospital president and CEO Gary Kaatz called the three crew members "heroes."

"Our hearts are with the families of Jim, Karen and Andy," he said. "We ask for the

community to join us in keeping them in our thoughts and prayers."

The REACT program ferries critically ill and injured patients from community hospitals to Rockford Memorial for treatment and had operated since 1987 "without an incident or an accident," said Dr. Dennis Uehara, chairman of emergency medicine at Rockford Memorial.

Rockford Health System held a memorial and tribute to their fallen colleagues on December 19, widely attended by EMS colleagues from all over the state. Emergency vehicles and uniformed EMS providers were in attendance to honor the victims.

In a tradition found within the fire and rescue community, the bodies of the REACT helicopter crew members were also returned to the hangar to complete their mission in a ceremony on December 14. Members of the regional community of fire, police and EMS personnel were part of a procession to escort the bodies of the crew members to the hangar to a moment of recognition before continuing the procession to funeral homes.

Registration Now Open for Ultrasound 2013 Courses

ICEP has scheduled two upcoming Ultrasound-Guided Peripheral IV courses for 2013. The half-day program will be held on Thursday, January 24 and Tuesday, March 19 at the ICEP Conference Center in Downers Grove.

Physicians who are looking for practice in emergency medicine ultrasound and peripheral IV placement are encouraged to attend one of ICEP's upcoming half-day workshops.

Although the course was originally developed for all levels of nurses and emergency providers, many physicians have expressed an interest in attending to refine or refresh their skills. All are invited to attend. Physicians should note that no CME hours are available for the workshops.

To register, go online to ICEP.org. The course of the course is \$95 for the 4-hour program. Registration is limited, and the last course date in November did sell out in advance of the course. If you are interested in attending one of these sessions, please register early.





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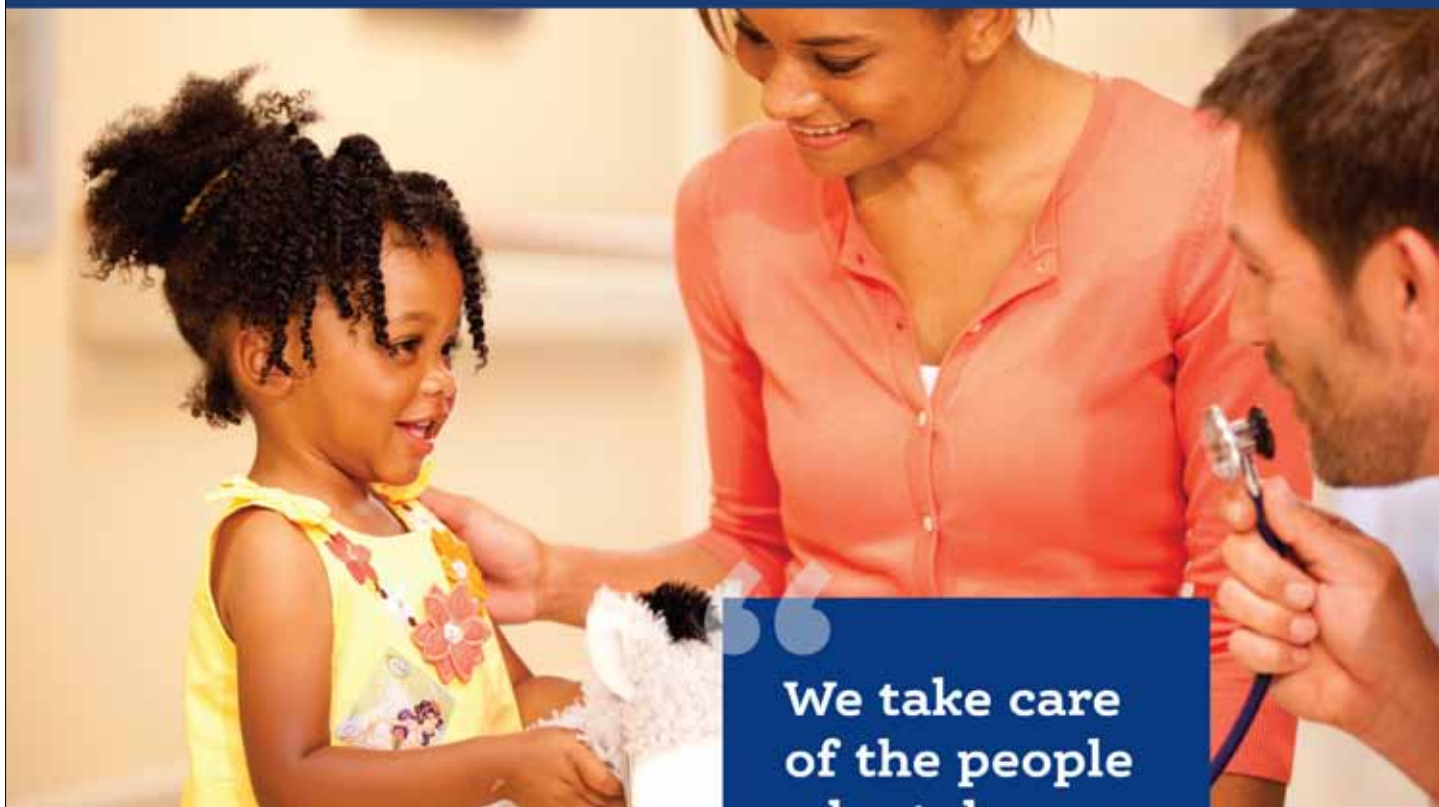
Malpractice Insurance is provided by ECPS.

Contact

Those interested in participating in a financially democratic EM physician group should contact **Eric Nussbaum, MD FACEP** at (708) 824-4880 or enussbaum@ecps.md



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Classified Ads

BARRINGTON, ILLINOIS. Tri-County Emergency Physicians, LTD seeks a full-time or part-time Emergency Department Physician at Good Shepherd Hospital in Barrington, Illinois. Must be board certified or board eligible in Emergency Medicine. Please send your CV to Dr. Joseph Giangrosso, 450 W. Highway 22, Barrington, IL, 60010, 847-842-4231 or email joe.giangrosso@advocatehealth.com. We offer flexible hours and a competitive salary with bonus.



ASSISTANT MEDICAL DIRECTOR: Franciscan St. Anthony Health is a 30,000 annual volume facility located 60 miles from Chicago, IL. Great opportunity for EM physician looking gain leadership experience! EPMG cares about allowing clinicians to live life and do the work they love. We care about providing exceptional compensation and benefits, including a brand new partnership program. To learn more contact Heather Smith at 734.686.6326 or hsmith@epmgpc.com. Visit us at www.epmgpc.com.



Due to expansion and growth, **Carle Physician Group** in Urbana, Illinois is recruiting additional **BE/BC Emergency Medicine** physicians to join our stable and experienced quality-oriented department. ● 18-member department and 10 PAs seeing ~65,000 patients per year ● All physicians are ABEM/AOBEM certified ● Emergency Department physicians are supported by a 18-physician Hospitalist Department and 24-hour in-house coverage provided by Anesthesiology, Hospitalists, OB-GYN, and Trauma Surgery ● Opportunity to teach medical students/residents through the **University of Illinois College of Medicine** ● **Superior compensation package, paid malpractice insurance with 100% tail coverage** ● Vacation, CME/meeting and holiday time with equitable distribution of holiday/weekend shifts ● Department has routinely scored in the 99th percentile in Press Ganey customer satisfaction among its peers and just received the prestigious 2012 Emergency Medicine Excellence Award by HealthGrades ● Home to the Big Ten University of Illinois, Champaign-Urbana is a diverse community of 195,000 offering cultural, sporting and entertainment options usually associated with much larger cities; centrally located two hours from Chicago/Indianapolis and three hours from St. Louis. **For more information, contact Karen Uden at (800) 436-3095, extension 4112, email your CV to karen.uden@carle.com or fax it to (217) 337-4181.**

Want to reach 1,275 Illinois emergency physicians?

ADVERTISE IN



Contact Kate Blackwelder at 630.495.6400 x 205 or kateb@iccp.org for an Illinois EPIC rate sheet and list of closing dates.

Targeted. Affordable. Effective.



Democratic Group Seeking BC/BE ED Physician Amazing Career Opportunity

70K ED at **Rush Copley Medical Center** in Aurora/Naperville Area

40 minutes southwest of downtown Chicago
10 minutes to Naperville Area with top ranking schools, housing, entertainment, dining
Staffing adjusted to maintain 2.0 patients per hour for main ED physicians
Efficient real-time Dragon based dictation, templated Electronic Medical Record & ordering
Award winning nursing staff with low patient to nurse ratios, 90th percentile Press Ganey
Complete backup coverage, supportive medical staff, efficient radiology service
Level II Trauma Center, 24/7 Cath Lab On Call, Certified Stroke Center
Dedicated Express Care separately staffed by physicians

Newly opened **Rush Copley** Freestanding Emergency Center in Yorkville, IL

Single Coverage, lower acuity
24 hour shifts available
Dedicated CT, radiology, lab, and EMS support
Backup specialty coverage via main campus
Admissions transferred directly to Rush Copley Medical Center

Outstanding compensation as independent contractor:

Competitive hourly rates with night differential
Paid malpractice & tail and Quarterly Performance Incentive Bonuses
Guaranteed hourly rates first year for full time contractors
RVU based reimbursement after 12 months full time service, sooner for high performers
Dedicated scheduler, coordinator
2 year partnership eligibility

We are seeking high performing 'A-team' members to join our democratic group of satisfied and motivated physicians to staff both of the above sites. Board Certification / Eligibility in Emergency Medicine is **required**. The ideal candidate will have excellent interpersonal skills, a clean record to be seamlessly credentialed, commit to 140+ hours per month. Part time candidates will be considered.

Send CV to Steven Parkes:
SWParkes@empactphysicians.com
www.EMPactPhysicians.com



Looking for a locally owned, well-established democratic group where every doctor's voice can be heard?

Emergency Medical Associates of Palos (EMAP) is offering an exceptional career opportunity for one or more full-time Emergency Medicine Physicians to practice compassionate, high-quality emergency medicine in a rewarding and stable environment.

Our Emergency Department treats an average of 46,000 patients annually, has a Fast Track program, and a full and responsive on-call referral board. EMAP will offer qualified physicians top-tier professional pay, including night and holiday differentials, a generous CME/professional fund, productivity incentives, 401k profit-sharing, and paid healthcare and malpractice insurance. The monthly schedule process is both innovative and fair, providing for overlapping shifts, long term travel planning, and advance holiday assignments.

To ensure EMAP's long term success, we look to select the highest caliber of motivated, talented and team-oriented physicians to be members of our group. Physicians applying for this position must be ABEM/AOBEM Eligible/Certified Emergency Medicine Physicians. Highly regarded graduating residents are welcome. **If you think you are this candidate, please email your CV to Dr. Richard Wilson at rawilsondo@mindspring.com or Diane Wolf at dwolf@hbcmd.com.**





Illinois College of Emergency Physicians
3000 Woodcreek Drive, Suite 200
Downers Grove, IL 60515

ICEP Calendar *of* Events 2013

December 24-25, 2012

ICEP Office Closed
Christmas Holiday

January 1, 2013

ICEP Office Closed
New Year's Day

January 4, 2013

**ICEP Past Presidents
Financial Summit**
12:00 PM - 4:30 PM
ICEP Conference Center
Downers Grove

January 23, 2013

**ICEP EM Board Review
Intensive Committee**
10:00 AM - 12:00 PM
ICEP Board Room
Downers Grove

January 24, 2013

**Ultrasound-Guided Peripheral
IVs Hands-On Workshop**
8:30 AM - 1:00 PM
ICEP Conference Center
Downers Grove

January 25, 2013

**ICEP Awards and
Nominating Committee**
10:00 AM - 12:00 PM
ICEP Board Room
Downers Grove

February 19, 2013

**ICEP EM Board Review
Intensive Committee**
10:00 AM - 12:00 PM
ICEP Board Room
Downers Grove

February 21, 2013

**Emergency Medicine
Update**
Par-A-Dice Hotel
Peoria

February 25, 2013

**ICEP Practice Management
Committee**
10:00 AM - 12:00 PM
ICEP Board Room
Downers Grove

February 26, 2013

ICEP EMS Committee
11:00 AM - 1:00 PM
ICEP Board Room
Downers Grove

February 26, 2013

EMS Forum
1:00 PM - 3:00 PM
ICEP Conference Center
Downers Grove

March 4, 2013

**Research Abstract Submissions
for Spring Symposium Due**

March 11, 2013

**ICEP Educational Programs
Committee**
11:00 AM - 1:00 PM
ICEP Board Room
Downers Grove

March 13, 2013

**ICEP EM Day: Get on the Bus -
Mobilization and Advocacy in
One**
Bus departs Downers Grove early
A.M. - details coming soon.

March 14, 2013

**EM4LIFE 2010 LLSA Article
Review Course**
ICEP Conference Center
Downers Grove

March 18, 2013

ICEP Finance Committee
9:30 AM - 10:30 AM
ICEP Board Room
Downers Grove

March 18, 2013

ICEP Board of Directors
10:30 AM - 2:30 PM
ICEP Board Room
Downers Grove

March 19, 2013

**Ultrasound-Guided Peripheral
IVs Hands-On Workshop**
8:30 AM - 1:00 PM
ICEP Conference Center
Downers Grove

April 9-10, 2013

Oral Board Review Courses
Chicago O'Hare Marriott
Chicago

Register for all courses online at ICEP.org!

