



News & Notes May 2020

Keeping Up To Date:

Final Decision on Resident and Medical Student Abstract Submissions from the Cancelled Residents Day/Medical Students Day for 2020:

When the COVID 19 pandemic arrived in the state of Michigan the Michigan Chapter was in the middle of the process of reviewing over 500 resident abstracts and over 100 medical student abstract submissions by attending physicians (2 attending physicians reviewing each abstract). Since the rapid rise of COVID cases throughout our state, especially in southeast Michigan, all reviewers were called to the front line fighting this rapidly spreading virus. The Chapter did not press any attending physicians to complete the review process they could not give any thought or time to.

As the weeks have progressed, it was hoped that the review process could be completed so that we would be able to, at the very least, publish an accepted list. However, although there has been steady progress in keeping up with COVID, physicians remain incredibly busy within their practices and medical centers. Therefore, the program directors have decided that this year, the resident abstract and medical student abstract submissions review process will NOT be completed. There will be no accepted abstract list published.

The Michigan Chapter is making steady progress in planning the Annual Fall Chapter Meeting which will be held October. 15 – October 19, at the Grand Traverse Resort and Spa. Abstract submission for this meeting will open mid-May and we encourage you to resubmit your abstracts for this meeting or any new abstracts you might have.

You will be notified when abstract submission is open for the Fall Chapter Meeting.



Thank You

FROM YOUR GOVERNOR:



All of you have now been 'on call' 24/7 since we Internists are the leaders in this new COVID19 disease and treatment. Our Infectious Disease colleagues sort and maneuver through all the clinical and nonclinical bottlenecks towards the goal to stop the spread of this disease and prevent new cases. New testing and all the testing parameters matter. Starting from scratch with some data seems frustratingly slow but Internists are used to chaos, just not this much all at once! Internists need to protect and treat both ourselves and our patients along with our healthcare team members.

Thank you for all of your energy and efforts. We look to Infectious Disease Physician leaders to prioritize the new topics and data and offer us a step by step approach forward. We listen carefully to science while keeping in mind the emotional impact on everyone, even our colleagues; some whom have fallen from this disease.

I am proud of National ACP's leadership in providing fast new educational resources. ACP Advocacy sped up its support in clinical, billing, and technology especially in use of telemedicine. As an Independent Internist in outpatient primary care practice I am personally grateful for guidance in CMS billing changes.

No matter where Internists see patients we need to continue to care for them in a safe manner while ensuring that our staff are protected physically and emotionally. Fear is real but Internists know how to compartmentalize and prioritize. Deferring self-care is typical for physicians so be sure to remind yourself to seek out the solace and support you need to get through the long days.

ACP Governors have met via web with the ACP Board of Regents in order to ask questions and identify clinical areas of need like Personal Protective Equipment. Anyone who has not been paying attention these last few weeks would be astounded at the pace of change in Internal Medicine.

Looking ahead we have hopes that Internists will continue to lead patient care with a better balance of time and resources especially in public health while improving care for uninsured and under-represented patients.

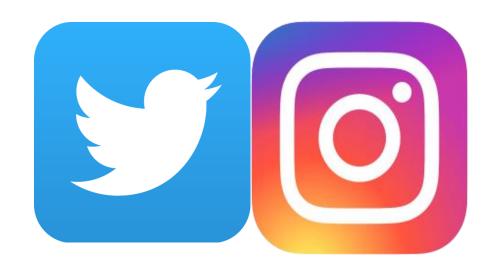
Perhaps some of the new technology helping patients and new Public Health efforts will live on as Internists reshape what matters in health care. Let us know what our Michigan Chapter can do for you. Any novel ideas or any new thoughts are welcome. Please be careful and stay well. Your patients and your family need you and your promise of a better future for all of us who are blessed by your endless efforts.

Martha Gray

Governor, Michigan Chapter, American College of Physicians



YOUR CHAPTER NOW ON SOCJAL MEDJA!



Here a Tweet, there a Tweet:

Your Chapter is so easily accessible, and we are live on:

TWITTER - @MIChapterACP - FOLLOW TODAY!

INSTAGRAM – @acp.michigan or Search ACP at Michigan and start FOLLOWING TODAY!

OPEN when you see monthly News & Notes in your email!

Michigan Chapter Scientific Meeting



October 15-18, 2020

Grand Traverse Resort & Spa Acme, Michigan

Fostering Excellence in Internal Medicine





News you can use FROM NATJONAL ACP:

ACP has developed the following educational content that is freely available to the healthcare community as a public service of ACP in response to the Coronavirus outbreak.

- Novel Coronavirus: A Physician's Guide This online learning activity can be easily accessed on handheld devices and provides a clinical overview of infection control and patient care guidance.
- Coronavirus: What the Clinician Needs to Know
 This podcast was
 produced by Core IM in collaboration with ACP, and includes an
 interview with Dr. Christina Fiske, infectious diseases subspecialist at
 Vanderbilt University Medical Center.

For these coronavirus education activities, ACP members may report their learning time for CME credit without charge. Please feel free to share these resources with others in the health care community.

For additional information, contact <u>Laura Baldwin</u>

Notice to State Chapters on Scope of Practice Requirements During the COVID-19 Public Health Emergency

On March 24, 2020, Health and Human Services Secretary Alex Azar sent a letter to state governors with guidance on actions they could take to address the COVID-19 public health emergency. The letter includes a number of recommendations supported by ACP, including policies on telehealth, facilitating participation of inactive physicians, and medical liability protections. However, HHS also calls on states, territories, and the District of Columbia to take immediate action to "waive restrictions on licensure, scope of practice, certification, and recertification/relicensure consistent with the changes announced for federal programs." The letter encourages states to work with licensing

boards to place moratoria on enforcement of scope of practice and licensure issues "to ensure that health care professionals can quickly respond to COVID-19 emergency without fear of penalty or license revocation" and recommends that states take action to permit nurse practitioners, physician assistants and other health care professionals to "practice to the fullest extent of their license and without restrictive supervision requirements." If states do not make changes to scope of practice requirements, HHS encourages relaxation of geographic restrictions on physician supervision and temporary expansion of the number of health care professionals a physician may supervise. In addition to state-based changes, HHS is permitting temporary scope of practice changes to other federal programs. For example, Medicare is waiving certain physician supervision requirements and allowing non-physician clinicians to care for hospitalized patients in accordance with the state's emergency plan.

State chapters should note that HHS' recommended policy interventions are temporary measures to address health care workforce needs during the COVID-19 emergency. The Secretary's guidance recommends that states (emphasis added):

Temporarily suspend any requirements for written agreements to meet supervision or collaboration requirements, in order to avoid significant delays in the provision of services. States should also encourage their State Boards of Medicine, Nursing, and other health professions to put in place an enforcement moratorium, for the length of the public health emergency, for scope of practice violations to ensure all practitioners can deliver needed care during the crisis.

ACP policy strongly reaffirms the importance of patients having access to a personal physician who is trained in the care of the "whole person" and has leadership responsibilities for a team of health professionals, consistent with the Joint Principles of the Patient-Centered Medical Home. Patient care should be delivered in the context of a physician-led dynamic clinical care team.

In the context of the current public health emergency, and the immediate need to devote attention and resources to addressing COVID-19, ACP's Division of Governmental Affairs and Public Policy

recommends that state chapters not challenge a **temporary** easing of physician supervision and other state licensure restrictions that are consistent with Secretary Azar's request, **as long as they would be in effect only for the duration of the declared national emergency.** While we are aware that even a temporary easing of such restrictions may be viewed, and likely cited as precedent by non-physician professions to argue for longer-term or permanent changes, we don't think it will be effective to divert your chapter, or ACP's national advocacy resources, to opposing Secretary Azar's request and associated actions by your states, during this national emergency. ACP and the chapters can appropriate re-engage on such issues, based on national ACP policy, after the emergency declaration ends.

Chapters are encouraged to track any scope of practices changes that occur in their state. We also encourage chapter leaders to review HHS' guidance on addressing workforce needs during the COVID-19 emergency.

- Sec. Azar letter to state governors: https://www.nga.org/wp-content/uploads/2020/03/Governor-Letter-from-Azar-March-24.pdf
- HHS Guidance to States: Lifting Restrictions to Extend the Capacity of the Health Care Workforce during the COVID-19 National Emergency https://www.nga.org/wp-content/uploads/2020/03/Enclosure-in-March-24-Letter-from-Secretary-Azar-to-Governors-with-Recommendations-for-Maximizing-Healthcare-Workforce-for-COVID-19.pdf
- CMS: Physicians and Other Clinicians: CMS Flexibilities to Fight COVID-19 https://www.cms.gov/files/document/covid-19-physicians-and-practitioners.pdf

Other Resources

- ACP COVID-19-Related Advocacy:
 https://www.acponline.org/advocacy/where-we-stand/coronavirus-disease-2019
- National Governors Association: Coronavirus: What You Need to Know https://www.nga.org/coronavirus/#states

 ACP letter to CMS Administrator Verma regarding scope of practice <u>https://www.acponline.org/acp_policy/letters/acp_letter_to_cms_regarding_scope_of_practice_requirements_jan_2020.pdf</u>
 For more information, please contact <u>Shuan Tomlinson, Senior Analyst, State Health Policy and Grassroots Advocacy</u>

ACP's Comprehensive Coronavirus Resources, available at www.acponline.org/novel-coronavirus



From our Partners:



2020 Events

June TBD
Networking Event

Sept 17th Chapter Meeting

October 15-18 SHM/ACP Fall Meeting *Traverse City*

December TBD Networking Event





In Conclusion...for now...Spring is here! Remember:

- You can reach your Chapter Office at <u>tlockard@acpmichigan.org</u> or call 248-602-0235, Monday – Friday, 7:30am-4:00pm
- You can reach Governor Martha Gray at plgray@umich.edu
- Follow us on Twitter and Instagram!
- Your Chapter is working for you! Consider becoming involved! Still seeking interested members for:
 - Health & Public Policy Committee
 - Early Career Physicians Committee
 - Membership Committee
 - Communication & Social Media Committee

