

The Best In Emergency Medicine



EMP
Emergency Medicine Physicians

our mission

Emergency Medicine Physicians,
Ltd. is committed to using
emergency medicine residency
trained, board certified physicians
to provide the highest quality
emergency care in a cost effective
manner, with the satisfaction of our
patients as a primary concern.





A study by the Josiah Macy Foundation stressed that the quality of hospital emergency care is directly linked to the caliber of physicians providing emergency services. The panel of 32 experts suggested that the best way to improve Emergency Department (ED) care depends on ensuring an adequate pool of qualified ED physicians.

Why Hospitals Should Choose EMP



quality

According to the American College of Emergency Physicians (ACEP), there are approximately 19,000 physicians certified in emergency medicine, and a nationwide need for approximately 32,000. In addition, of the 19,000 physicians certified in emergency medicine, only about 12,500 are residency trained in emergency medicine.

Does Your Hospital Have an ED Problem?

To ensure that patients receive optimal care at hospital EDs, hospital administrators must be “conscientious about how their emergency departments are organized,” said L. Thompson Bowles, MD, past president of the National Board of Medical Examiners and former chairman of the Macy Foundation panel.

The Macy Foundation study and others have criticized the qualifications of many “part-time” non-emergency medicine trained physicians working in EDs, with little or no training in lifesaving procedures. The report found that many EDs are staffed by:

- Other types of specialists
- Doctors barely a year out of medical school

And, contrary to common perception, the Macy Foundation report found that few U.S. medical schools adequately train their students in the fundamentals of emergency care and life support. In fact, less than 20% require courses in emergency medicine.

Since emergency physicians are critically important medical specialists, who not only provide emergency medical care, but also are providers of primary care to indigent patients or those without access to primary care physicians, the shortage of residency trained and board certified emergency physicians creates a significant problem for many hospitals.

The Macy Foundation report also challenged ACEP, the Society of Academic Emergency Medicine, and the Joint Commission on Accreditation of Healthcare Organizations to revise the classification of EDs to reflect the level of care available for patients. A logical classification system would be:

Level I: Physicians residency trained and board certified in emergency medicine.

Level II: Physicians residency trained in a different specialty but board certified in emergency medicine.

Level III: Physicians residency trained in a different specialty and not board certified in emergency medicine.

Level IV: Physicians not residency trained and not board certified in emergency medicine.

If your hospital ED is not meeting the Level I requirements outlined above, then you need to consider the management services of Emergency Medicine Physicians, Ltd., (EMP). EMP supplies emergency medicine residency trained and board certified physicians to staff and manage hospital Emergency Departments – providing higher levels of quality patient care, decreased medical liability claims, increased ED visits, hospital admissions, and improved collections.

Is Your ED Problem Worth Fixing?

If your hospital ED is not currently staffed with emergency medicine residency trained, board certified physicians, you should consider a change.

EDs are critical to the operation of a community hospital. In fact, EDs typically generate:

- Approximately 40-60% of a hospital's admissions
- 40-50% of a hospital's revenue
- 40% of a hospital's profits

If your ED suffers from substandard levels of patient care and satisfaction, inefficient service, poor ED/attending physician relationships, or negative word-of-mouth advertising from pre-hospital care providers, such as paramedics, these factors are negatively impacting your revenues, profitability, and patient referrals. In other words, an effective, high quality ED will increase hospital revenues, profits and referrals.

Consider the possible ramifications of not addressing your ED shortcomings, such as:

- The potential outcomes of substandard care and dissatisfied patients.
- The cost of medical malpractice claims as a result of misdiagnoses and improper care from non-emergency trained physicians.
- The loss of appropriate urgent and emergency care patient visits as a result of a lack of confidence from pre-hospital care providers in hospital ED physicians.
- The lost volume in admissions and ancillary service referrals resulting from non-emergency medicine residency trained physicians or physicians not board certified in emergency medicine.

When you consider the positive financial and patient care outcomes, and the potential negative outcomes of ignoring your ED problem, it seems prudent to better understand the problem and consider the alternatives.

How Can You Solve Your ED Problem?

There are two basic options to solving your ED problem:

1. The hospital takes responsibility for recruiting, training, staffing, and compensating emergency medicine residency trained and board certified physicians and managing the ED including billing and collections.
2. The hospital enters into a management services contract with an experienced group of emergency medicine physicians to provide residency trained and board certified emergency physicians, and to coordinate and manage the ED, including billing and collections.

While the first option may appear simple, the shortage of trained emergency physicians makes it extremely difficult for hospitals to effectively recruit qualified physicians. The second option is attractive to hospital administrators, patient care directors and medical staff members. In fact, more hospitals are entering into management services contracts for specific areas of the hospital. Currently, over 50% of hospitals in the U.S. use contract management services.

Emergency Medicine Physicians (EMP) can solve your ED problem by providing qualified emergency medicine, residency trained and board certified physicians, expert patient care and quality assurance, personalized, and administrative efficiency in claim management.

For more information on how EMP can help you solve your ED problem, call us. We'll take the time to carefully evaluate your ED needs and requirements, and develop a "turnkey" program to improve the quality of care at your ED and the revenue and profitability of your hospital.

Common Questions

Q: What makes EMP better than other Emergency Department contract service providers?

A: We can fully staff your hospital ED with emergency medicine residency trained and board certified physicians. Based on our commitment to our physicians, we are more effective in hiring top quality, emergency trained physicians than other contract service providers, or even hospitals. EMP is a locally managed company, owned by emergency medicine board certified physicians. You'll interact with the owners of EMP, not mid-level non-physician managers of other staffing organizations.

Q: How do you screen and select physicians?

A: We recruit only emergency medicine residency trained and board certified physicians. Physicians are selected based on personal experience and affiliation with quality emergency medicine residency programs. We evaluate physicians based on quality of training, interpersonal skills, dependability, and efficiency, along with references and recommendations from residency directors.

Q: How many of your physicians will be Board Certified in Emergency Medicine?

A: 100%. EMP recruits only emergency medicine residency trained, board certified physicians.

Q: How many physicians would comprise the normal rotation during a monthly schedule?

A: Full-time staff are determined based on patient volume in the ED using staffing guidelines developed in the past by EMP and the American College of Emergency Physicians.

Q: What schedule do your physicians normally work? What is the maximum hours you schedule a physician during one continuous shift?

A: EMP physicians work approximately 120-160 hours per month. We prefer to staff EDs with 8 hour shifts, to provide physician overlap and keep physicians from becoming fatigued at the end of their shift.

Q: How is the Medical Director scheduled into staffing to assure an awareness of patient flow and staff concerns?

A: The EMP Medical Director works 75-110 clinical hours a month. This allows the Director ample time for administrative duties, while keeping close supervision of the clinical practice in the ED. Directors are paid a monthly stipend to perform administrative duties.

Q: How do you respond to patient complaints and criticism regarding emergency room physician services?

A: Every patient complaint is reviewed by the Medical Director for action and is discussed at monthly department meetings. Records are kept for each physician. Any physician receiving complaints will be aware of such complaints. Educational materials, literature, CME conferences, etc. will be used to help improve the physician's performance. EMP will not tolerate any physician who continues to have poor physician-patient relations.

Q: Do you require any of your Staff Physicians or Medical Director to live in the community served or to participate in Medical Staff affairs?

A: EMP physicians are required to live in the same community as the hospital they serve. EMP physicians are required to take an active role in medical staff affairs, serving on committees and attending medical staff meetings.

Q: How do you evaluate the clinical performance of your physicians?

A: Charts are reviewed for quality assurance at each contract EMP operates. This allows day-to-day evaluation of physicians, documentation, clinical effectiveness and treatment protocols.

Q: What control would the hospital have over which physicians would be assigned to it's ED?

A: Physicians are recruited and hired by EMP, although we encourage interviews by hospital administrators. In the event any physician employed by EMP is not satisfactory to the hospital staff or administration, EMP will evaluate and aggressively work to improve physician performance.

Q: Will you agree to participate as a provider in any insurance, PPO, or Managed Care program in which the hospital elects to participate?

A: EMP will negotiate with all programs in which the hospital participates and sign all contracts the hospital has providing financial or legal terms are reasonable.

Q: How will EMP work with the hospital team?

A: Initially, EMP will provide day-to-day observation and reports for evaluation of the emergency department. We will work cooperatively with you to keep you informed of all activities and actions, and provide timely management reports.

Q: Is the transition to using EMP complicated?

A: No. EMP will handle the details, and involve the hospital staff as much or as little as desired.

Q: How do we get started?

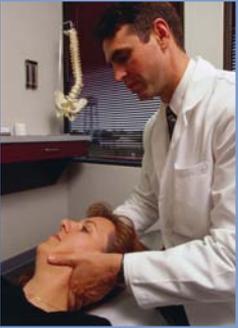
A: Call EMP today at 800-828-0898 to set up a meeting to discuss your situation. We'll help you improve the quality and responsiveness of care in your Emergency Department by providing emergency medicine residency trained, board certified physicians, and help you increase ED volume, hospital admissions, revenues, and profitability.



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Emergency Medicine Physicians, Ltd. is committed to using emergency medicine residency trained, board certified physicians to provide the highest quality emergency care in a cost effective manner, with the satisfaction of our patients as a primary concern.

Why Hospitals Should Choose EMP and their physicians



equity

EMP is only as good as its physicians. We are aware there are plenty of job opportunities available to emergency medicine residency trained physicians, but none as good as ours. All physicians who join EMP share equally in the equity of the company. If you are looking for a company that partners with quality physicians, then the following information will be of great value to you.

How is EMP different from other options the hospital has?

- EMP was founded by three emergency medicine residency trained, board certified physicians.
- EMP offers equal equity with no “buy in” requirements.
- EMP offers physician-friendly scheduling.
- EMP concentrates on emergency medicine, not other specialties.
- EMP has a proven record of success as one of the fastest growing companies in emergency medicine.

Common Questions

Q: How is EMP different than other staffing groups?

A: We recruit only residency trained, board certified emergency medicine physicians.

Q: Why does EMP concentrate on Emergency Medicine?

A: The reason is focus. Today we operate in a far more competitive environment than even a few years ago and the best companies devote all their energy to what they do best. Emergency medicine is what we do best.

Q: Is profit sharing available?

A: Profit sharing bonuses are available to every physician after completing 1,900 clinical hours. Bonuses at each local facility are split based on the hours worked.

Q: Who receives equity?

A: EMP offers physicians equity two years after profit sharing eligibility. The physician then has an equal equity ownership with the physicians who started the company and all other physicians.

Q: How are shifts distributed among physicians?

A: Shifts are evenly distributed among the physicians. Due to the director’s administrative responsibilities, his/her schedule is tailored to meet those needs. Individual scheduling requests are accommodated to the maximum extent possible.

Q: With regard to the direction of EMP, how are the decisions made and who makes them?

A: The equity assets of EMP are held in an Equity Trust, managed by trustees who are advised by a trust advisory board elected by the physician equity members. All decisions regarding the direction of EMP are made by the Board of Directors. The Board receives its direction from the equity trust and the medical directors at each facility. The medical directors receive direction from the physicians at their location. Through this process each physician at EMP contributes to the direction EMP takes.

Q: What staffing parameters are used?

A: EMP's goals include staffing emergency departments between 2.3 and 2.5 patients per hour. Physician extenders may be used in order to increase the efficiency of the department.

Q: What are the qualifications for an ED Director and how are they chosen?

A: All ED Directors for EMP have either previous directorship experience or go through the EMP Scholars Program in which physicians are offered administrative experience and attend administrative courses to prepare for directorship responsibilities. Following completion of the Scholars Program they enter into an assistant directorship position, followed by a directorship.

Q: Is there opportunity for advancement within the EMP organization?

A: EMP is growing at such a rapid rate, there are plenty of opportunities for advancement. EMP focuses on hiring and advancing all physicians from within the organization into leadership roles, rather than hiring outside physicians into those roles. This allows EMP to recruit the best of the best.

Q: Has EMP ever lost a hospital contract?

A: Never. We are "The Best in Emergency Medicine" and are committed to the success of our partner hospitals and our physicians.



EMP
Emergency Medicine Physicians

EMP's Risk Management and Benchmarking programs interact closely so that many Quality Assurance issues may be identified and properly addressed prior to litigation. This guarantees that EMP's Risk Management program is, like the rest of EMP, "The Best in Emergency Medicine."

EMP Offers Value-Added



services

EMP continues to offer value-added services to hospitals, patients and physicians. Our staff includes experts that have implemented programs in Patient Satisfaction, Risk Management, Compliance and HIPAA, CQI, Quality Assurance, Fast Track Development, Documentation Guidelines, Cost Containment and Utilization, Clinical Pathways/Practice Guidelines, and many others that make us "The Best in Emergency Medicine".

Compliance and HIPAA

EMP has a complete and effective corporate compliance plan managed by our Legal Department. An integral component of the compliance plan is EMP's ongoing commitment to protecting and maintaining patient confidentiality. EMP's Code of Conduct provides that it is the legal and ethical obligation of EMP employees "... to do everything we can to preserve and safeguard patient confidentiality." This corporate-wide mission is accomplished through initial and continuing education for all our physicians and staff, appropriate use of status boards in the Emergency Department, and internal safeguards in the coding and billing process that prevent the release of confidential medical and billing information.

EMP's Legal Department closely monitors the status of the HIPAA privacy regulations. Our comprehensive privacy policies and procedures mirror the final HIPAA privacy regulations.

EMP's Management and Legal Department are committing the necessary time and resources to ensure the organization is in full and timely compliance with the HIPAA regulations. This includes ensuring that all EMP employees understand the importance of HIPAA and have the necessary information and tools to achieve corporate-wide compliance.



EMP's own fast track system provides high-quality patient-friendly care for the non-urgent patients that present to your emergency department. EMP's commitment of using only residency-trained board certified emergency physicians in the fast track and providing dedicated physician staffing to those areas has been very successful across the country. While other companies attempt to run fast tracks staffing physicians in the other parts of the emergency department as well, or refuse to place physicians in dedicated fast tracks, EMP's commitment to provide the highest quality care in all areas of your hospital's emergency department stands alone. EMP's commitment to have average turn around times of 60 minutes or less of all fast track patients can be easily achieved with the hospital's commitment to EMP's fast track services.

Emergency Medical Services

For many of our patients, emergency medical care is needed well before the patient enters the emergency department. Quality Emergency Medical Services can often lead to better emergency care once inside the emergency department. EMP recognizes the importance of EMS and therefore commits significant resources to its management and development.

Risk Management

Since even the best risk management programs and the most compliant risk management behaviors may not be able to prevent all lawsuits, EMP's Risk Management program is prepared to manage lawsuits against its physician employees. This system assures that EMP physicians receive support and guidance if they become the target of a lawsuit. To ensure the opportunities for a successful outcome are maximized and that physicians' defenses are vigorously pursued, EMP works closely with malpractice insurance carriers to assure EMP physicians are provided with the services of experienced defense attorneys.

EMP recognizes medicolegal risk in the emergency department translates into risk for both the hospital and the emergency physician. EMP's Risk Management Department therefore works proactively as a partner with contract hospitals to identify system risks, including COBRA and HIPAA compliance, documentation problems, staffing issues, and customer satisfaction.

Benchmarking

EMP defines high quality emergency medical care as doing the right thing (clinical decision making) at the right time (resource utilization) in the right way (customer service). The cornerstone to our success is the emergency physician. Recruiting only emergency medicine residency trained and board certified physicians assures us that each physician's clinical skills are solid. Building on that base, we provide our physicians with education and feedback to ensure they are equally successful from a customer service aspect.

We are so strongly committed to these guiding principles that we have implemented an incentive based compensation plan for our partner physicians. A substantial portion of the base salary of participating physicians forms an incentive pool that is unique to each site. Corporate wide performance metrics in productivity, patient satisfaction, citizenship and documentation determine the final salary.

EMP has a wealth of expertise and experience in working with partner hospitals to identify and process problems as well as support the necessary changes. From multi-disciplinary teamwork to data management, our physician directors are enthusiastic and capable of ensuring the ED works in the most clinically efficient manner possible.

Emergency Department Case Studies

CORTLAND MEMORIAL HOSPITAL

134 Homer Avenue
Cortland, New York 13045
Phone: 607-756-3500

Situation/Problem:

Cortland Memorial Hospital faced a high dissatisfaction rate with many complaints fielded by the medical director. A recurring theme voiced by patients was the excessive waits spent in the lobby while rooms were open in the main ED.

Solution:

On April 15, 2000 patients were assigned to a bed and placed by the triage nurse if one was available without exception. With the new system, registration occurred at the bedside and the entire staff was challenged to see the patient within 20 minutes of arrival. Immediately, complaints decreased, satisfaction increased, and AMA rates dropped in half. One year later, the volume for the ED has risen as well as hospital revenue for the ED. As a result of EMP's commitment to quality and patient satisfaction, Cortland Memorial Hospital Emergency Department has received the prestigious Press Ganey Associates "2002 Compass Award" for outstanding performance improvement. This award recognizes health care facilities whose patient satisfaction scores have shown the greatest improvement over the past two years. CMH was one of just six emergency departments chosen for this award from over 1,250 nationwide.

Emergency Department Case Studies

BENEDICTINE HOSPITAL

105 Marys Avenue
Kingston, New York 12401
Phone: 845-338-2500

Situation/Problem:

Benedictine Hospital's emergency department was in a rut. Volume was not increasing as compared to competitive hospitals.

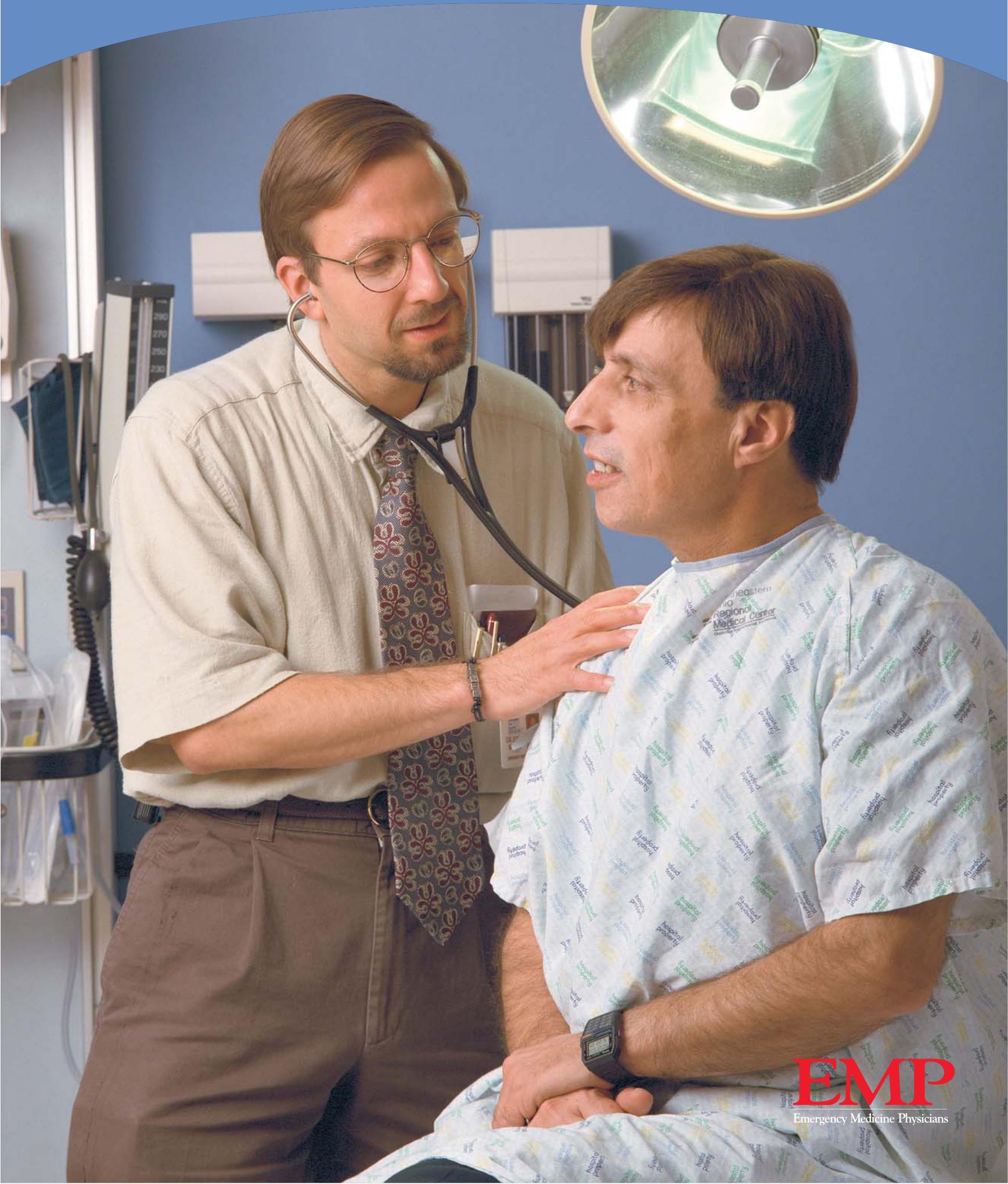
Solution:

EMP's stress on patient satisfaction helped to raise the ED volume 17% in the first 10 months of operation. There is great progress in the joint efforts of the Emergency Department nursing staff and EMP in 2002 in improving operations. The number of patients waiting less than 4 hours in the emergency room has increased from 59% in 2001 to 80% in 2002. The average throughput time is 2 hours and 7 minutes.

Also it is noted in 2002, that the number of registered patients who leave the ED without treatment continues to decline. Second, the unscheduled return visits within 72 hours have been dramatically reduced.

These results were achieved via a team approach. EMP and Benedictine Hospital can expect even more substantial improvements in the future as we recruit and retain emergency medicine residency trained, board certified physicians.

In ten short months, EMP made a significant impact in not only the ED operation, but the satisfaction of the ED patients, medical staff and hospital administration.





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Emergency Department Case Studies

MASSILLON COMMUNITY HOSPITAL

875 Eighth Street N.E.
Massillon, Ohio 44646
Phone: 330-832-8761

Situation/Problem:

Massillon Community Hospital's Emergency Department was referring only 16% of its 18,000 registered patients for in-patient care. Several EMS squads continually bypassed Massillon's ED and more than 100 patients annually declined further treatment against the advice of the emergency physicians, none of whom were residency trained in emergency medicine.

Solution:

In 1992, Massillon outsourced emergency care to Emergency Medicine Physicians. Within the first year of the contract, EMP hired five residency trained, board certified emergency physicians, and retained the only board certified emergency physician. After the restaffing, Massillon's reputation as a quality emergency care provider quickly improved. By 1995, Massillon was providing emergency treatment to 22,000 patients annually, about 4,000 more than the hospital treated before EMP. Approximately 20% of the patients were referred for in-patient care, which increased the revenue generated by the hospital's emergency department. In addition, EMS-delivered patients increased by 10%. The people of western Stark County now trust and depend on the emergency physicians at Massillon Community Hospital.

Emergency Department Case Studies

PARMA COMMUNITY GENERAL HOSPITAL

7007 Powers Drive
Parma, Oh 44129-5495
Phone: 440-743-3000

Situation/Problem:

Cuyahoga Emergency Physicians solicited the support of EMP during the malpractice crisis in Ohio in 2002. The group needed assistance implementing short and long-term risk management strategies as well as a solution for the emergency department's overcrowding and growing ambulance diversions.

Solution:

Through our partnership, the group gained a solid risk management plan in conjunction with EMP's expertise in E/M billing, coding and emergency department operational excellence.

The hospital administration was supportive of the group's request to partner with EMP. Furthermore, they were pleasantly surprised by the "Value Added" approach EMP brought to their emergency services. Within the first six months of the relationship, problematic quality indicators had been identified and successfully addressed. Diversion hours were dramatically reduced, overall length of stay was significantly shortened and a "Fast Track" was developed and implemented to more effectively address the needs of patients with minor emergencies.



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