

October 27, 2023

Ernie W. Sadau, FACHE  
CEO  
CHRISTUS Health System  
919 Hidden Ridge  
Irving, TX 75038

Dominic Dominguez  
CEO  
CHRISTUS SPOHN Corpus  
600 Elizabeth Street  
Corpus Christi, TX 78404

Gregg Robertson  
Chair  
CHRISTUS Spohn Health System Foundation Board  
613 Elizabeth Street #605  
Corpus Christi, TX 78404

Dear Mr. Sadau, Mr. Dominguez, and Mr. Robertson:

HEADQUARTERS

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The American College of Emergency Physicians (ACEP) has long stood strong in voicing our concerns about the health care workforce and the need to advance training, career fulfillment, and diversity of emergency physicians to ensure that every person and community in America has access to quality emergency care.

In 2019, ACEP began working with other emergency medicine organizations to assess projections of the emergency medicine workforce for the future. A report on that work, published in 2021<sup>1</sup>, indicated a likely oversupply of emergency physicians in 10 years, based on modeled assumptions around both supply and demand variables. However, these variables are not static, and much needs to be considered when making decisions from the report. Notably,

- these projections were based on data from a pre-COVID-19 world;
- the 2021 research did not specifically model geographic distribution, but recognized that maldistribution currently exists and is likely to be amplified in the future; and
- despite a 28 percent increase in emergency medicine residency positions over the past 10 years, there has been no corresponding increase in emergency medicine residency-trained or emergency medicine board-certified physicians working in rural EDs.

Healthcare workforce shortages, overall, are especially pronounced in rural and underserved areas throughout the country, and numerous barriers to providing equitable care in these communities persist. Among these are the inability to recruit qualified and sufficiently experienced, educated, and trained physicians, nurses, ancillary support staff, and other health care providers. Further, it is common knowledge that when residents train in a residency program, many of them stay in that area to practice. Thus, while the report projected a likely oversupply of emergency physicians nationally, we believe rural and underserved areas, like the Coastal Bend area of Texas, would see benefits from having an emergency medicine residency program.

ACEP continues to monitor these workforce trends, including a growing attrition rate among emergency physicians that remains unusually high compared to other medical specialties. Emergency physician burnout leads all other specialties and is reported being at its highest-ever levels. ACEP, nationally, and together with our TCEP partners in Texas is working on many fronts to improve the working conditions of emergency physicians including extensive advocacy work tackling boarding in the emergency department, protecting physician autonomy from undue business interests, fighting for increased physician reimbursement, and preventing workplace violence.

Our public opinion research shows<sup>ii</sup> that nearly nine in ten (89 percent) U.S. adults say it is an essential or high priority to have 24/7 access to an emergency department, the highest of any utility or service that communities provide. Further, patients overwhelmingly trust a physician to lead their medical care while in the emergency department, especially if their condition or injury is more severe. More than nine in ten (93 percent) trust an emergency physician to provide medical care at the emergency department.

Emergency medicine residency training programs provide lasting benefits to an institution and the community it serves that are not captured on simple financial analysis. There are numerous studies describing how EM residencies drive improvements in the quality of care, care coordination, addressing social determinants of health, and preparation and response to disasters and large-scale events. It takes 10,000 hours to become an emergency physician.

In a crisis, there is no substitute for a licensed, residency-trained, board-certified emergency physician.

We strongly urge Corpus Christi stakeholders to consider all factors, not a single workforce projection report, when making decisions that impact your physicians and your community. If you have any questions, please contact Susan Sedory, ACEP's Executive Director at [ssedory@acep.org](mailto:ssedory@acep.org).

Sincerely,

Aisha T. Terry, MD, MPH, FACEP  
ACEP President

Cc: Sandra Williams, DO, MPH, FACEP, TCEP President; The Honorable Connie Scott,  
Nueces County Commissioner Court

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<sup>i</sup> [https://www.annemergmed.com/article/S0196-0644\(21\)00439-X/fulltext](https://www.annemergmed.com/article/S0196-0644(21)00439-X/fulltext)

<sup>ii</sup> <https://www.emergencyphysicians.org/article/access/poll-adults-view-247-access-to-the-er-essential--prefer-care-led-by-physicians-in-a-crisis>