

TO: Candidate for Federal Office

FROM: Jeanne Slade, ACEP Director of Political Affairs and NEMPAC

RE: NEMPAC Candidate Questionnaire for 2022 Election Cycle

The American College of Emergency Physicians (ACEP) is the national medical specialty society representing more than 38,000 emergency physicians and is dedicated to improving the quality of emergency medical care through continuing education, research, and public education.

Emergency physicians are specialists trained to provide emergency care to all patients who experience a variety of emergency conditions including, but not limited to, medical, surgical, trauma, cardiac, mental health, orthopedic, neurological, obstetric, infectious, pediatric, and many more. Our members provide evaluation and management for acute illness and injury for the entire spectrum of mental and physical health care issues.

Recognizing the growing importance of political action committees in the national political arena, ACEP established the National Emergency Medicine Political Action Committee in 1980. In the past 40 years, NEMPAC has steadily grown to become one of the largest and most effective medical specialty PACs today. NEMPAC solicits personal contributions from ACEP members and make expenditures in connection with the election of candidates for federal office.

Throughout each election cycle, the NEMPAC Board of Trustees develops and implements a contribution disbursement strategy. Each candidate requesting support from NEMPAC is carefully analyzed using criteria developed by the Board and staff with input from leaders within our national organization and its grassroots network and state chapters. We consider a candidate's views on health policy issues, ACEP's legislative priorities, past legislative experience, and relationships with local emergency physicians. NEMPAC is non-partisan, supporting Democrats, Republicans and other party groups who share our views and who will work to understand the issues that emergency physicians and their patients face daily, and will be sensitive to those concerns in Congress.

Attached is a candidate questionnaire which we urge you to complete and return to assist NEMPAC in formulating a decision on your race. Please return the survey to me by email at jslade@acep.org. Please feel free to attach any additional statements on health care policy and/or additional campaign information.

Additional information about ACEP can be found at www.acep.org.

NEMPAC Support Process for Non-Incumbent Candidates

STEP 1: Contact with NEMPAC staff and local ACEP members representing the state chapter
A candidate's relationship with local ACEP-member emergency physicians is of paramount importance. The NEMPAC Board of Trustees and staff consult closely with our leadership in ACEP state chapters and local ACEP members who have been active supporters of our PAC and grassroots advocacy programs. If possible, local physicians meet and interview candidates, either in person or virtually to ascertain the viability of the candidates' races and their position on emergency medicine's issues. The feedback is provided to our NEMPAC staff who also meet and interview all candidates under consideration for NEMPAC support.

STEP 2: NEMPAC Candidate Questionnaire

All non-incumbent candidates are asked to complete and return the NEMPAC Candidate Questionnaire prior to consideration by the NEMPAC Board of Trustees.

STEP 3: NEMPAC Board of Trustees Consideration and Approval

NEMPAC staff provides feedback to the NEMPAC Board of Trustees based on information compiled from local ACEP members, NEMPAC Candidate Questionnaire responses, and staff evaluation of race. The NEMPAC Board evaluates the staff and local ACEP members' recommendations and makes the final decision on financial support for a candidate's campaign and at what level. NEMPAC staff notifies candidates as appropriate, and the check delivery is arranged by mail or in person locally or in DC.

Emergency Physician/ACEP CONTACTS:

Please indicate the name(s) of any emergency physicians that are involved in your campaign or support your candidacy that we may contact.

Have you met with local representatives of ACEP/NEMPAC? If yes, please provide their name(s) and date of meeting.

NEMPAC Candidate Survey 2022

Background Information:

Name: _____

State: _____

(Please check the appropriate boxes below.)

U.S. Senate

Republican

U.S. House _____ District

Democrat

Independent

Campaign address:

FEC ID: _____

DC Fundraiser (if applicable): _____

Have you received the support of your state or national party committee?

Have you hired professional staff, outside of family?

What is your fundraising goal and what have you raised to date? Are you limiting PAC donations?

Are you a first-time candidate on the local, state, or federal level?

Yes _____ No _____

If not, what other races have you entered and what was the outcome?

Are you currently serving in an elective office? Please explain:

If you previously held a legislative office, on what committees do or did you serve or play a leadership role?

Do you recall voting on issues affecting emergency medicine, patient care, or health care delivery in the past? If so, please briefly detail.

Other relevant political experience (*participation in campaigns, party activity, etc.*):

Your Background and Campaign:

Are you or an immediate family member currently employed in the health care system (providers, administrators, insurance industry, pharmaceutical industry, for example)?

What is your motivation for running for Congress?

Emergency Physicians' Role and Responsibility in our Health Care Delivery System

The American College of Emergency Physicians promotes the highest quality of emergency care and is the leading advocate for emergency physicians, their patients, and the public. ACEP promotes health care coverage that ensures access to emergency services and legally mandated health care services are fully funded.

Since 1986, emergency physicians and hospital emergency departments have been mandated by federal law, the *Emergency Medical Treatment and Labor Act (EMTALA)* to stabilize and treat anyone coming to an emergency department, regardless of their insurance status or ability to pay. But since its enactment in 1986, EMTALA has remained an unfunded mandate.

- The burden of uncompensated care is growing, closing many emergency departments, decreasing resources for everyone, and threatening the ability of emergency departments to care for all patients.
- Emergency physicians provide the most charity care of all physicians (AMA 2003).

All information is confidential. Completed surveys will only be shared with the NEMPAC Board and staff.

Some health insurance plans deny claims for legitimate emergency departments visits, based on a patient's final diagnosis, rather than the presenting symptoms (e.g., when chest pain turns out not to be a heart attack). Some also attempt to require preauthorization before a patient can seek emergency medical care, resulting in denied payment. These managed care practices endanger the health of patients and threaten to undermine the emergency care system by failing to financially support America's health care safety net.

ACEP supports and advocates for the federal "prudent layperson" emergency care standard that provides coverage based on a patient's presenting symptoms, rather than the final diagnosis. In addition, we believe that health insurers should cover EMTALA-related services up to the point an emergency medical condition can be ruled out or resolved. **There have been attempts by insurance providers to curtail patient access to emergency department care in violation of "prudent layperson" standard.**

Do you support the federal mandate that requires all patients receive emergency medical care regardless of their ability to pay or their insurance status?

Yes _____ No _____

Do you agree that the Prudent Layperson Standard should remain a federal protection extended to all patients?

Yes _____ No _____

Do you agree that uncompensated care should be recognized as a legitimate practice expense for emergency physicians?

Yes _____ No _____

Would you support limited federal liability protections for physicians who provide care under the EMTALA mandate?

Yes _____ No _____

Would you push back against insurer attempts to retroactively deny coverage of emergency care for patients?

Yes _____ No _____

Comments:

Physician-Led Medical Team Model of Care

ACEP agrees that more physicians and other health care professionals are needed across the country, especially in rural areas. But real gains in improving access to and coordination of patient care will come largely from solidifying and expanding the use of physician-led teams. Team-based care is critical in the emergency department setting and capitalizes on the efficiencies of having the right professional providing the right services to the right patient at the right time with overall direction and coordination managed by physicians. Although physician assistants (PAs) and advanced practice registered nurses (APRNs) provide valuable services in various roles in emergency departments (EDs), including out-of-hospital patient care, patient triage, patient care in the ED, and administrative functions, PAs and APRNs do not replace the medical expertise and patient care provided by emergency physicians. Multiple staffing models utilizing PAs and APRNs exist, and it is the responsibility of the ED medical director to identify the most appropriate staffing model to achieve operational efficiency, while maintaining clinical quality. Without physician direction, supervision, and management, medical care will become even more fractured, leading to less effective and duplicative services, lower quality patient care, and higher costs.

Do you agree with the physician-led medical team model of care in the emergency department?

Yes _____ No _____

Would you support legislation that allows advanced practice registered nurses or physician assistants to provide unsupervised emergency department care?

Yes _____ No _____

Would you support legislation that incentivizes and increases opportunities within the federal government, Indian Health Services, Veterans Affairs, for example to hire emergency physicians to practice in rural and underserved areas?

Yes _____ No _____

Ensuring High Quality Care for Patients

Nearly one in five Americans each year will require a trip to the emergency department (ED), and the American College of Emergency Physicians wants to ensure that the 38,000 emergency physicians we represent are able to provide these patients with the high-quality care they need and deserve. Our members work in a broad range of employment models—whether directly employed by an academic medical center, in a suburban hospital staffed by a local and independent practice group of emergency physicians, or at a small, rural hospital staffed by a large, national physician group.

Regardless of practice setting or employment model, ACEP believes the interests of patients are best served when emergency physicians practice in a stable, fair, equitable, and supportive environment. Today attacks on the medical profession are coming in the form of inappropriate expansions of non-physicians' scopes of practice (as noted above), decreasing the leverage physicians must negotiate with and be reimbursed by insurance carriers, unstable

reimbursements by federal health programs, and the absence of resources and processes to assist physicians on the frontlines to care for patients.

If elected to Congress, would you support any of these initiatives impacting the practice of emergency physicians:

Expanding the use of telehealth for some emergency medical services

Yes _____ No _____ Unsure _____

Ensuring due process protections are afforded once an emergency physician is granted medical staff privileges, irrespective of employment status

Yes _____ No _____ Unsure _____

Ensuring that a physician is not asked to waive his/her rights to a fair hearing regardless of the practice arrangement

Yes _____ No _____ Unsure _____

Ensuring that physicians and physician groups have a fair negotiation process when contracting with insurance carriers

Yes _____ No _____ Unsure _____

Supporting a balanced arbitration model if insurers and clinicians disagree on reimbursement

Yes _____ No _____ Unsure _____

Supporting long term solutions to stabilize the Medicare reimbursement system for providers

Yes _____ No _____ Unsure _____

Over the last several years, there has been a significant amount of growth in “provider consolidation.” With respect to physician practices, including emergency medicine practices, more and more are being acquired by hospitals, health systems, and corporate entities (such as private equity and health insurance companies) every year. Studies show that consolidation leads to higher health care prices.

Have you seen consolidation in your district and has it become an issue with voters? If so, what actions, if any, would you take to address this trend?

Supporting the Health and Well-Being of Healthcare Clinicians

The COVID-19 pandemic has placed an unprecedented burden on our nation’s emergency departments and the physicians who lead and manage patient care. Physicians are becoming burned out, are being threatened, harassed, and assaulted in the ED and many are leaving the profession. Some feel that their livelihood is threatened for fear of speaking out about their personal mental health and working conditions during the pandemic. One way to cope with the uncertainty of COVID-19 is to focus on creating safe, supportive workplaces that prioritize physician mental health. ACEP is working with other medical associations and groups to create a more supportive environment that breaks down barriers that prevents physicians from seeking support.

If elected to Congress, would you support any of these initiatives:

Prioritizing mental health services for physicians and other health care workers

Yes _____ No _____ Unsure _____

Improving measures to decrease workplace violence in the emergency department

Yes _____ No _____ Unsure _____

Mental Health and Substance Abuse

The COVID-19 pandemic is putting additional stressors on an already overwhelmed health care system. Nearly one in five American adults struggle with some form of mental illness, and emergency department visits for children who attempt suicide or had thoughts of suicide have almost doubled. The current health care system is failing too many of these patients, often leaving no other option for appropriate care. As a result, patients can remain in the emergency department for hours, sometimes days, as we locate and secure follow-up community care.

For years, community and inpatient resources for patients with mental health issues have been declining, despite ever growing needs. The noisy, hectic emergency department can be an upsetting and stressful place, especially for individuals in mental health crisis, who have nowhere else to go for care. Emergency physicians have established innovative solutions to help facilitate treatment for these patients, so they can get the most appropriate care in the most appropriate setting. Some of these programs include regional emergency psychiatric units, bed availability tracking and management tools, transfer protocols, improved transportation services, and use of tele-psychiatry, to name a few.

Do you think there are sufficient resources available for patients in your community/district suffering from mental illness and/or substance use disorders?

Yes _____ No _____

If no, what measures would you suggest?

Would you support federal legislation that would remove barriers and provide additional funding and resources for established innovative solutions to help facilitate treatment for these patients?

Yes _____ No _____

1. Please indicate below which issues you are hearing most about from the voters in your district. (Please check all that apply)
- Access to COVID-19 testing and vaccines
 - Healthcare costs
 - Access and choice of healthcare providers
 - Problems accessing Insurance coverage/surprise medical bills
 - Ensuring Medicare/Medicaid are available and solvent now and in future
 - Reducing the cost of prescription drugs
 - Other (please explain)

2. What would be your top one to three priorities for the U.S. government to accomplish to get the COVID pandemic under control?

3. Is there anything else you think we should know about your campaign and your work or interest in physician and/or health care issues?

4. Should you be elected to Congress, what would be your top three legislative priorities?

5. Which other physician/health care provider groups are supporting your candidacy?