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#### **ACEP's Capital Minute is Going Live!**

We are revamping the Capital Minute to communicate with ACEP members about the latest federal advocacy efforts and news in real-time. Every other Thursday at 3pm ET, ACEP members will have the opportunity to hear updates and have their questions answered live by Laura Wooster, ACEP's Associate Executive Director of Public Affairs. [Click here](#) to register for the next live ACEP Capital Minute on Thursday, April 16.

#### **ACEP Hosts Second Virtual COVID-19 Congressional Briefing**

On Tuesday, April 7, ACEP hosted a second virtual briefing for congressional staff regarding the latest on-the-ground efforts by emergency physicians in response to the COVID-19 pandemic. The webinar featured ACEP President-elect Mark Rosenberg, DO, FACEP, ACEP Board Member Alison Haddock, MD, FACEP, and Stuart Kessler, MD, FACEP, who shared their perspectives and experiences regarding the emergency medicine response to the coronavirus.

The panelists reiterated ACEP's [federal policy priorities](#), including the continued need for more personal protective equipment (PPE), the need for additional supplies and resources that should be prioritized for emergency medicine, liability protections related to screening and treating of COVID-19 patients, and financial stability to maintain readiness and to sustain EM practices. The panelists also noted the significantly reduced volumes that emergency departments are experiencing throughout the country and urged legislators to ensure that emergency relief funding is distributed beyond just hospitals and to EMS and emergency physicians that are not hospital-employed.

ACEP continues to advocate for the priorities of emergency physicians and remains hard at work with both legislators and regulators to ensure these critical needs are met.

#### **Negotiations Continue as Senate Fails to Pass Additional COVID-19 Relief**

On Thursday, April 9, the Senate was unable to reach an agreement to provide an additional \$250 billion in coronavirus relief funding for small businesses. The measure was put forward by Majority Leader Mitch McConnell (R-KY), but Senate Democrats blocked the move and presented their own approach. The Democrats had signaled earlier in the week that they would likely block the effort unless it provided at least \$250 billion for hospitals and local governments, on top of the additional \$250 billion for the Paycheck Protection Program.

On Friday, Minority Leader Chuck Schumer (D-NY) said that negotiations with Treasury Secretary Steve Mnuchin were productive and that a bipartisan agreement was within reach, potentially sometime early next week. With the initial funding for the Paycheck Protection Program quickly running out, both legislators and the White House are eager to shore up the program with additional emergency relief.

## **HHS Distributes First Wave of \$100 billion Stimulus Funding to Health Care Providers**

Today, the Department of Health and Human Services (HHS) distributed \$30 billion of the \$100 billion CARES Act funding to Medicare "providers" (physicians, hospitals, and other facilities and health professionals that bill Medicare). The amount was distributed in direct proportion to providers' total 2019 Medicare fee-for-service reimbursement. As an example, if a large hospital system's total Medicare spending in 2019 represented 1 percent of the total Medicare FFS spending across the country, that hospital system would receive 1 percent of the \$30 billion.

HHS distributed the funds electronically and some ACEP members have already reported receiving the funds. Some of you, depending on where you practice and your patient mix, will receive more or less than others, since again, the amount you receive is simply based on your Medicare payments from last year.

There is also a catch that goes along with the funding. Within 30 days, you must agree to [certain terms and conditions](#). These terms and conditions include the following statement:

"The Secretary has concluded that the COVID-19 public health emergency has caused many healthcare providers to have capacity constraints. As a result, patients that would ordinarily be able to choose to receive all care from in-network healthcare providers may no longer be able to receive such care in-network. Accordingly, for all care for a possible or actual case of COVID-19, Recipient certifies that it will not seek to collect from the patient out-of-pocket expenses in an amount greater than what the patient would have otherwise been required to pay if the care had been provided by an in-network Recipient."

**ACEP is seeking clarification on exactly what this condition means and how this may impact you and your patients.** If you do not agree to all the terms listed, you are required to contact HHS within 30 days of receipt and return the funds. It is important to note that this is just the first wave of the \$100 billion. \$70 billion still remains, and HHS has stated publicly that the remaining funding will go toward "providers in areas particularly impacted by the COVID-19 outbreak, rural providers, providers of services with lower shares of Medicare reimbursement or who predominantly serve the Medicaid population, and providers requesting reimbursement for the treatment of uninsured Americans."

All in all, **ACEP doesn't feel what you may receive from the \$30 billion first wave of funding is enough.** We have actively advocated on your behalf from the moment the CARES Act was passed to push HHS to distribute funding directly to you - emergency physicians who are risking your lives combating the virus and have the greatest risk of missing work because of being exposed to COVID-19.

On March 27, ACEP sent a [letter to the HHS Secretary](#) asking that HHS prioritize funding for emergency physicians - and on April 3, we sent a [follow-up letter](#) specifically requesting that HHS distribute \$3.6 billion to emergency physician practices.

We know we have our work cut out for us, but please know **ACEP will continue to fight for you and work as hard as we can to ensure that you have the resources you need to do your jobs.**

Additional details about the \$100 billion fund are available at <https://www.hhs.gov/provider-relief/index.html>

## **Registration Reminder: ACEP Virtual Hill Day**

ACEP's Virtual Hill Day is your chance to advocate on behalf of your patients, yourself, and your practice as you discuss with federal legislators and their staff the issues and resources you need most during the COVID-19 pandemic. Your voice is important during this vital time, so this event is free for ACEP Members. The event is limited to only 600 participants. The deadline to register is April 22, 2020. Don't miss out! Registration is already 40% full. [Click here](#) for more information and to register.

## Virtual Engagement Options with Legislators during COVID-19

Due to COVID-19, many Members of Congress are scheduling conference calls and tele-town halls with constituents in place of in-person meetings. Social distancing doesn't mean you can't make your voice heard! It's important now, more than ever, to tell your story and let legislators know what you are experiencing on the front lines of COVID-19. To find a tele-town hall in your congressional district, visit [townhallproject.com](http://townhallproject.com). Simply type your zip code in the red box and click find a townhall. You will then be able to RSVP and view call-in information. [Click here](#) to view our tips and talking points.

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