In this Issue:

**Capital Minute**

**NEMPAC VIP Donor “Virtual Happy Hour” Series**

**Senate Returns for Legislative Business: Masks and Virtual Meetings**

**Regs & Eggs Blog: Another Week... Which Means More COVID-19 Regulatory Changes**

**HHS Makes Updates to the Provider Relief Fund**

**Important COVID-19 Testing-Related Announcements**

**Guidance on Notifying FDA about Device Shortages**

**Capital Minute**

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, May 14th.

**NEMPAC VIP Donor “Virtual Happy Hour” Series**

The NEMPAC Board of Trustees is hosting their second VIP Donor “Virtual Happy Hour” on Thursday, May 14th with special guest Rep. Phil Roe, MD (TN-01), co-chair of the GOP Doctors Caucus. Participation is limited to the first 100 NEMPAC VIP donors who register. All VIP Donors will receive an invitation by email. Not sure of your VIP status? [Click here](#) to contact us to check your donation status or [click here](#) to renew. [Click here](#) to view the schedule of upcoming NEMPAC events and other information.

**Senate Returns for Legislative Business: Masks and Virtual Meetings**

Senators returned to Washington, D.C., this week, attempting to socially distance as much as possible while most congressional staff continue to work from home. Behind-the-scenes negotiations continue on the framework for an anticipated “COVID 4.0” legislative package, but this effort is still mostly conceptual at this point, and rank-and-file members continue to lay out priorities for what they would like to see in any eventual agreement.

Embracing the “new normal,” the Senate Health, Education, Labor, and Pensions (HELP) Committee held a combined in-person/virtual hearing on May 7 titled, “Shark Tank: New Tests for COVID-19”. The hearing was an examination of efforts aimed at developing new technologies needed to rapidly produce COVID-19 tests, supply chain capability, and eventual distribution to vulnerable populations, and what the National Institutes of Health (NIH) and Biomedical Advanced Research and Development Authority (BARDA) are doing to facilitate these efforts. NIH Director Francis Collins, MD, Ph.D., and BARDA Acting Director Gary Disbrow, Ph.D., served as witnesses.

HELP Chairman Lamar Alexander (R-TN) noted that current technology is not where it needs to be to produce the needed quantity of tests nor can the supply chain keep up with the demand. Senate Democrats, including Ranking Member Patty Murray (D-WA), were more blunt and laid out frustrations with the Administration’s lack of preparation and overall response to the pandemic – yet another indicator of growing partisan tensions between Republicans and Democrats as the next COVID package is drafted.

While the House has not yet returned, legislators continue to introduce bills and author letters highlighting their COVID-19 related priorities in hopes they will be included in upcoming legislation.
Rep. Raja Krishnamoorthi (D-IL) sent a bipartisan letter this week calling for increased access to mental health resources for frontline health care professionals, which featured input from ACEP and the ACEP Federal Government Affairs Committee. Also, last week, Rep. Norma Torres (D-CA) sent an ACEP-endorsed letter urging House Democratic leadership to prevent pay cuts for frontline health care providers and to provide survivor benefits, hazard pay, adequate PPE, anti-retaliatory protections, and other measures for health care workers as well as other essential workers in the service economy.

**Reg & Eggs Blog: Another Week... Which Means More COVID-19 Regulatory Changes**

Read this week’s [Reg & Eggs blog](https://www.acep.org/RegEggs) for highlights of a new regulation that the Centers for Medicare & Medicaid Services (CMS) released last week. This is the second major regulation CMS has put out in response to the COVID-19 pandemic. While the first regulation that CMS issued at the end of March had [huge implications for emergency physicians](https://www.acep.org/RegEggs), this regulation won’t have as much of an impact on emergency medicine. However, it does include some important additional flexibilities for health care professionals.

Beyond the regulation, the Regs & Eggs blog touches upon other updates from the past week that emergency physicians should know about.

**HHS Makes Updates to the Provider Relief Fund**

ACEP is continually updating [our website](https://www.acep.org) with information about the current financial support options, including the Small Business Administration loans, the Medicare Advance Payment Program (which has now been suspended), and the Provider Relief Fund-- a $175 billion pot of funding appropriated by Congress to help health care providers with health care related expenses or lost revenues due to COVID-19.

With respect to the Provider Relief Fund, the Department of Health and Human Services (HHS) made a few important announcements this week:

- If you received funding from the first $30 billion tranche and decide to accept the terms and conditions and keep the funding, you must log on to [this portal](https://providerrelief.hhs.gov) and formally attest to the terms and conditions. HHS has extended the attestation deadline to **45 days** (increased from 30 days) from the date you receive a payment. As an example, the deadline for providers who received payment on April 10, 2020 is extended to May 24 from May 9, 2020. Not returning the payment within 45 days of receipt of payment will be viewed as acceptance of the terms and conditions.
- There are numerous steps you must take to receive the second tranche of funding (the additional $20 billion). One of these steps includes attesting to the terms and conditions from the first tranche. HHS added language to their [attestation portal](https://providerrelief.hhs.gov) telling providers to not attest and to contact the HHS hotline (866- 569-3522) if they believe that the payment they received already from the first tranche exceeds their estimated total allocation.
- You can now start submitting claims for the uninsured program. Please review the information in the [registration portal](https://providerrelief.hhs.gov), the [program's home page](https://www.acep.org), and two sets of frequently asked questions (set one and set two) for more details.
- HHS has released a provider-level [breakout](https://www.acep.org) of who has received Provider Relief Funding. This breakout only includes providers who have attested to the terms and conditions as of May 4.

**Important COVID-19 Testing-Related Announcements**

On Monday, the Food and Drug Administration (FDA) revised its policy to improve antibody testing quality. This guidance describes a policy for laboratories and commercial manufacturers to help accelerate the use of tests they develop to achieve more rapid and widespread testing capacity in the United States. Under the new policy, FDA expects commercial manufacturers to submit Emergency Use Authorization (EUA) requests, including their validation data, within 10 days of publication of the updated policy or the date they notify FDA of their test validation, whichever is later. Additional information can be found in a [fact sheet on antibody testing oversight and use](https://www.acep.org) for COVID-19, as well as in a blog posting that notes the new emphasis on prioritizing access and accuracy.
On Wednesday, FEMA released a new fact sheet on Federal Support to Expand National Testing Capabilities. FEMA is working to source and procure testing material – specifically, testing swabs and transport media. This material will be provided to states, territories and tribes for a limited duration to help increase testing capacity in support of their individualized reopening and testing plans. FEMA also outlines the actions taken by the Department to increase testing, information on community-based testing sites, and federal reimbursement for testing.

Finally, on Thursday, the Health Resources and Services Administration (HRSA) provided $583 Million to 1,385 federally qualified health centers (located in all 50 states, the District of Columbia, and eight U.S. territories) to expand COVID-19 testing.

**Guidance on Notifying FDA about Device Shortages**
The FDA has released new guidance that relates to device shortages and potential device shortages occurring during the COVID-19 pandemic. This guidance is intended to assist manufacturers in providing FDA timely, informative notifications about changes in the production of certain medical device products that will help the Agency prevent or mitigate shortages of such devices during the COVID-19 public health emergency.

You are receiving the Weekly Update emails as a member of the ACEP 911 Network. If you no longer want to receive this publication and do not want to be a member of the ACEP 911 Network, please click unsubscribe below.