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Capital Minute

In our latest <u>Capital Minute webinar</u>, ACEP's advocacy team provides an update on our support of the Coronavirus Provider Act, the recent distribution of relief package funding and how ACEP is providing input on the planning for future pandemics. <u>Register</u> for the next Capital Minute on June 25 and <u>submit</u> guestions ahead of time.

Case Study: How ACEP Directed 100,000 Messages to Congress about PPE Shortages We worked with our partners at Phone2Action to develop a case study to showcase our federal advocacy efforts and Virtual Hill Day amidst COVID-19. To view the resulting article in Association Adviser, click here.

ACEP-supported Physician Mental Health Legislation Introduced in House

On Thursday, June 18, the "Coronavirus Health Care Worker Wellness Act" (H.R. 7255) was introduced in the House of Representatives by Representatives Raja Krishnamoorthi (D-IL), John Katko (R-NY), and Frederica Wilson (D-FL). ACEP worked closely with Congressman Krishnamoorthi and his staff to develop and inform this bill that establishes a grant program to ensure emergency physicians and other frontline health care providers have access to the mental health resources they need during the COVID-19 pandemic. You can read ACEP's letter of support for the legislation here.

The legislation builds upon Rep. Krishnamoorthi's recent bipartisan efforts (including a bipartisan letter with nearly 100 signatories) to highlight the mental health challenges posed by the unprecedented scale and impact of the COVID-19 response. The legislation approaches this pressing issue with both near- and long-term strategies. In addition to establishing a grant program to provide the funding and resources needed in the more immediate term, the legislation also directs the Secretary of Health and Human Services to commission a study to examine the factors that contribute to poor mental health and burnout, potential barriers to treatment that may exist for health care professionals, and recommendations on effective solutions to address these challenges.

ACEP continues working to ensure that emergency physicians have access to the resources and care they need during these exceptionally challenging times, including efforts to introduce companion legislation in the Senate and to ensure that these provisions are included in any future COVID-19-related legislation considered by Congress.

Help Eliminate Barriers to Physician Mental Health Care

ACEP is committed to eliminating obstacles to EM physicians seeking mental health care. By anonymously sharing your story, you can help inform and further ACEP's advocacy efforts to remove the existing barriers to seeking treatment, including fears surrounding licensure and credentialing, and better encourage professional support and non-clinical mental health initiatives, such as peer support. Share your experience.

NEMPAC News

NEMPAC is supporting Dr. Cameron Webb in a competitive democratic primary for Virginia's 5th congressional district, which will be held next Tuesday, June 23rd. Dr. Webb treats patients as a general internist, teaches students and serves as the Director of Health Policy and Equity at UVA's School of Medicine. He is also married to an ACEP member. To learn more about Dr. Webb, click here.

NEMPAC VIP Donor "Virtual Happy Hour" Series

The NEMPAC Board of Trustees is hosting a fifth VIP Donor "Virtual Happy Hour" on Thursday, June 25th with special guests Rep. Phil Roe (R-TN) and Rich McCormick, MD, FACEP, ACEP member and candidate running for Georgia's 7th congressional district. 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.

NEMPAC Charity Match

For the month of June, with just one contribution, you can <u>support NEMPAC</u> and a charitable cause that provides resources to frontline providers managing the COVID-19 pandemic. Contributions of \$100 or more made to NEMPAC between June 1 – June 30, 2020 will be matched 10 cents on every dollar by ACEP. The more you give, the more we give back. We hope you will take advantage of this incredible opportunity and join your fellow ACEP members to support meaningful political and charitable involvement.

Eligible charities are:

- GetUsPPE.org
- Emergency Medicine Foundation/COVID-19 EM Research
- American Foundation for Suicide Prevention

Click here to make your donation and select a charity!

Regs and Eggs Blog: Addressing Violence in the Emergency Department—Yes, It's Still a Priority

Although most of ACEP's federal advocacy efforts in recent months have focused on our response to the COVID-19 pandemic, we've still been advancing efforts on other critical issues for emergency physicians. One such issue is addressing violence in the emergency department. For the past nine months, ACEP has been part of an <u>Action Team</u> sponsored by the National Quality Forum, which included 27 experts and recognized leaders from the private and public sector committed to improving the safety of the health care workforce. The work of the Action Team culminated this week with the release of an issue brief (available to download here.

Read the <u>Regs & Eggs blog</u> to learn more about the issue brief and other work ACEP is doing to help address violence in the emergency department.

ACEP Responds to HHS Final Rule Related to Discrimination in Health Care

On Tuesday, ACEP issued a <u>statement</u> in response to a final rule the Department of Health and Human Services (HHS) released last week that eliminates regulations that prohibit health care discrimination against patients based on gender identity. ACEP opposes discrimination of any kind and believes that this final rule violates the Emergency Medical Treatment and Labor Act (EMTALA)—which requires that clinicians treat every patient who comes to the emergency department. By not addressing the rights and needs of all patients undergoing an emergency and the legal obligations of

emergency physicians, this rule undermines the critical role that emergency departments play in our communities. Last August, ACEP had written to HHS asking the Department not to finalize the rule.

HHS Updates FAQs for Provider Relief Fund

HHS has continued to update its <u>frequently asked question (FAQ) document</u> for the <u>Provider Relief Fund</u>-- the \$175 billion pot of funding appropriated by Congress to help cover health care providers' increased expenses and lost revenues due to COVID-19. While HHS has not made any major announcements or changes this week, one new FAQ does discuss the Terms & Condition requirement that anyone who receives over \$150,000 from the Provider Relief Fund must submit quarterly reports to HHS on the use of the funds. HHS states in the FAQ that it will notify recipients of the content and due date(s) of such reports in the coming weeks. In the meantime, it is important for all health care providers to continue to keep careful track of how they are spending all the financial support they've received.

Further, as discussed in <u>last week's Regs & Eggs blog</u>, ACEP is continuing to push HHS for more provider relief funding for emergency physicians.

ACEP Responds to CDC Request for Information on Pain Management

On Tuesday, ACEP <u>responded</u> to a request for information (RFI) issued by the Centers for Disease Control and Prevention (CDC) on pain and pain management. Our response focused on a range of topics regarding emergency physicians' experiences prescribing opioid pain medications, non-opioid medications, and nonpharmacological treatments. We emphasized our strong support for the use of medication for addiction treatment (MAT)—such as the use of buprenorphine—to help treat opioid use disorder in the emergency department, and requested that CDC work with other federal agencies to reduce barriers to treatment, such as the "x-waiver" requirement.

We also recognized that the public comments the CDC is collecting will help complement its ongoing work assessing the need for updating or expanding the CDC Guideline for Prescribing Opioids for Chronic Pain, published in 2016. Earlier this year, the CDC established a workgroup called the Opioid Workgroup that will be charged with both updating the existing opioid prescribing guideline for chronic pain and developing a new one for acute pain. Having an emergency medicine representative on the workgroup will be critical. ACEP formally nominated Aimee Moulin, MD, MAS to serve as a member of the workgroup, and we asked CDC again to strongly consider her nomination.

CMS Issues Proposed Rule on Medicaid Drug Value Based Purchasing

On Wednesday, the Center for Medicare & Medicaid Services (CMS) issued a <u>proposed rule</u> intended to support state flexibility in Medicaid to enter into innovative value-based purchasing arrangements (VBPs) with prescription drug manufacturers. CMS also requests input on future regulations to require additional review of opioid prescribing, MAT, and naloxone prescribing and establish new standards that would enhance states' ability to identify or limit inappropriate prescribing of opioids if a beneficiary is already receiving medications that can be unsafe when taken with opioids.

ACEP is reviewing the rule and plans on issuing a response.

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