



In this Issue:

[Urge Congress to Enact Valuable Protections for COVID-19 Health Care Providers Introducing NEMPAC Charity Match!](#)

[Capital Minute](#)

[ACEP Sends Letter to Congressional Leadership on COVID-19 Priorities](#)

[Senate Passes PPP Loan Modifications, Heads to POTUS for Signature](#)

[Advocating for Emergency Physicians' Mental Health](#)

[Happy Anniversary, Regs & Eggs!](#)

[ACEP Requests Additional Support for Emergency Medicine from the Provider Relief Fund](#)

[CDC Releases Study on Impact of COVID-19 on ED Visits](#)

Urge Congress to Enact Valuable Protections for COVID-19 Health Care Providers

ACEP continues to advocate for your physical, emotional, and economic well-being during this unprecedented time. We strongly believe that while you and your emergency medicine colleagues across the country are preserving and protecting the health of the American public, you should not be faced with or worried about unwarranted legal action while responding to the COVID-19 crisis, often under challenging conditions outside the normal standards of care, and with limited resources.

Recently, Reps. Phil Roe, MD (R-TN) and Lou Correa (D-CA) introduced H.R.7059, the "Coronavirus Provider Protection Act." This ACEP-supported, bipartisan legislation would provide liability protections for health care professionals and related health care entities for services related to the COVID-19 emergency response. The language of the bill is very similar to the proposal that ACEP worked on with the Health Coalition on Liability and Access (HCLA) and that we've shared with Hill offices as part of our follow-up from ACEP's Virtual Hill Day on April 28.

[Click here](#) to send a message to your federal legislators urging support for these protections.

Introducing NEMPAC Charity Match!

For the month of June, with just one contribution, you can [support NEMPAC](#) 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!

Capital Minute

[Click here](#) to register for the next live ACEP Capital Minute on Thursday, June 11th at 3 pm ET.

ACEP Sends Letter to Congressional Leadership on COVID-19 Priorities

On Tuesday, June 2, ACEP President William Jaquis, MD, FACEP, sent a [letter](#) to Senate and House leadership urging Congress to take action on several emergency medicine priorities in future COVID-19 legislation.

Dr. Jaquis noted several ACEP priorities, including:

- the continued need to ensure adequate personal protective equipment (PPE) for emergency physicians and other frontline workers, including full utilization of the Strategic National Stockpile and invocation of the Defense Production Act (DPA);
- appropriate resources to support contact tracing and testing;
- support for mental health resources for emergency physicians and frontline providers managing the challenges of the COVID-19 response;
- additional funding and clarity for the Provider Relief Fund needed to provide financial stability for emergency physician groups and practices;
- sensible, temporary liability protections for frontline health care providers; and,
- additional relief on Medicare payment changes to ensure emergency physicians are not further harmed by impending Medicare cuts.

The letter serves as reminder that while we have slowed the spread of the virus, the overall response is not done, and the coronavirus remains a significant threat to public health. ACEP continues to work with legislators to highlight these priorities and urges swift action to protect emergency physicians on the front lines and patients during this exceptionally challenging time.

Senate Passes PPP Loan Modifications, Heads to POTUS for Signature

On Wednesday, June 3, the Senate approved legislation to provide additional flexibility for borrowers under the Small Business Administration's (SBA) Paycheck Protection Program (PPP), the loan program established to provide stability for small businesses affected by the ongoing COVID-19 response. The bill passed the House of Representatives on May 28 with nearly unanimous support in a 417-1 vote, and now heads to the President to be signed into law.

H.R. 7010, the "Paycheck Protection Program Flexibility Act of 2020," allows additional flexibility for the \$670 billion program, easing restrictions on provisions that hindered many employers' ability to seek loan forgiveness. Under the original provisions of the PPP, borrowers were required to spend seventy-five percent of their total loan on payroll and use the entirety of the loan within eight weeks in order to qualify for loan forgiveness. H.R. 7010 amends the PPP to allow small businesses to use the funds within twenty-four weeks, reduces the seventy-five percent payroll requirement, eliminates the two-year loan repayment restrictions for future borrowers, allows payroll tax deferment, and extends June 30 rehiring deadline.

The PPP stands as one of the few remaining areas of overwhelming bipartisan agreement in the broader COVID-19 legislative response. However, the timeline for any additional COVID-19 related legislation remains unclear as the Senate Majority has not shown any urgency to pass another large bill, preferring to wait to see how existing funds are spent and what may be needed moving forward. ACEP remains engaged with legislators to secure important protections for emergency physicians responding to the COVID-19 pandemic.

Advocating for Emergency Physicians' Mental Health

Emergency physicians have historically had higher rates of career burnout and post-traumatic stress disorder (PTSD) than other medical specialties—and the pandemic has only exacerbated these trends. Although emergency physicians should be encouraged to ask for help and seek counseling and other mental health services when they need them, the way the system is designed leaves many legitimately afraid to do so.

This has to change, ACEP has made this issue a top priority. Here are some of the recent steps we have taken:

- This week, ACEP spearheaded the development of a [joint statement](#) with over 40 leading medical organizations, including the American Medical Association and the American Psychiatric Association, that outlines recommendations for removing existing barriers to seeking treatment, including the fear

of reprisal, and better encouraging professional support and non-clinical mental health initiatives, such as peer support, for physicians. See ACEP's press release on the statement [here](#).

- In April, ACEP met with the Joint Commission to discuss current barriers physicians face seeking mental health treatment. Just a few short weeks later, the Joint Commission put out a [statement](#) encouraging organizations to not ask about past history of mental health conditions or treatment and supporting the elimination of policies that reinforce stigma and fear about the professional consequences of seeking mental health treatment.
- We are also working on this issue on the legislative front, as ACEP is championing the [bipartisan effort](#) by 90 members of Congress to secure more resources for health care workers' mental health.
- ACEP also has free mental health counseling sessions, peer-to-peer support, meditation guides, a 24-hour support line, and other tools and resources. ACEP members can find out more about these services [here](#).

Finally, ACEP has been in touch with Dr. Lorna Breen's family on how to improve access to mental health treatment for physicians. Along with the entire country, ACEP [mourned](#) Dr. Breen's tragic passing. The Dr. Lorna Breen Heroes' Foundation, an organization established by her family to help support physicians' mental health, signed onto ACEP's joint statement referenced above.

Happy Anniversary, Regs & Eggs!

This week marks one year since the first [Regs & Eggs](#) blog post was published.

Over the past year Jeffrey Davis, ACEP's Director of Regulatory Affairs, has laid out how federal regulations impact emergency physicians and the patients they serve—and how ACEP has advocated for emergency physicians to ensure that they have the regulatory flexibility and resources they need to effectively do their jobs. From promoting ACEP's [alternative payment model](#), to highlighting key portions of the major Medicare physician fee schedule (PFS) reg, to discussing major barriers to the treatment of patients with opioid-use disorder, to tackling the many challenges you have faced responding to the COVID-19 pandemic, Regs & Eggs has covered a variety of critical regulatory topics. To see all previous blog posts, please go to the Regs & Eggs archive [here](#).

ACEP Requests Additional Support for Emergency Medicine from the Provider Relief Fund

On Monday, ACEP sent a [letter](#) to HHS Secretary Alex Azar about the distribution of the Provider Relief Fund, the \$175 billion pot of funding appropriated by Congress to cover health care providers' lost revenues and increased expenses due to COVID-19. This letter follows up on previous letters we sent on [March 27](#), [April 3](#) and [April 14](#) to the HHS Secretary. In the most recent letter, we reiterate our previous request for \$3.6 billion from the Provider Relief Fund to be specifically allocated towards emergency medicine groups and to the emergency physicians who practice within them. Thus far, we estimate that emergency physician groups have received approximately 7 to 15 percent of the initial \$3.6 billion request. We ask that HHS reserve a portion of the \$75 billion that Congress provided in the Paycheck Protection Program and Health Care Enhancement Act to cover the remaining balance of the \$3.6 billion request.

Visit our [COVID-19 Financial Support advocacy page](#) to stay updated on the Provider Relief Fund and other financial support options.

CDC Releases Study on Impact of COVID-19 on ED Visits

On Wednesday, the Centers for Disease Control and Prevention (CDC) released a [study](#) analyzing the impact of the COVID-19 pandemic on ED visits across the United States.

The CDC compared the volume of ED visits during four weeks early in the pandemic March 29–April 25, 2020 (weeks 14 to 17; the early pandemic period) to that during March 31–April 27, 2019 (the comparison period). During the early pandemic period, the total number of U.S. ED visits was 42% lower than during the same period a year earlier, with the largest declines in visits in persons aged ≤14 years, females, and the Northeast region.

The CDC states that "health messages that reinforce the importance of immediately seeking care for symptoms of serious conditions, such as myocardial infarction, are needed." Further, the CDC found that "the number of visits for conditions including nonspecific chest pain and acute myocardial

infarction decreased, suggesting that some persons could be delaying care for conditions that might result in additional mortality if left untreated."

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