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Contact Congress to Expand Mental Health Resources for COVID-19 Health Care Providers

Urge Co-Sponsorship of H.R. 7255, the “Coronavirus Health Care Worker Wellness Act”
Recognizing the unmitigated stress on emergency physicians and other health care providers that comes with managing and treating patients during the COVID-19 pandemic, Reps. Raja Krishnamoorthi (D-IL), John Katko (R-NY), and Frederica Wilson (D-FL), introduced H.R. 7255, the “Coronavirus Health Care Worker Wellness Act of 2020.” ACEP worked closely with the sponsors to develop this legislation that provides grants to help establish or expand mental health resources for emergency physicians and other health care workers. The legislation also commissions a study to examine the factors that contribute to burnout and poor mental health outcomes for health care workers and provides recommendations to Congress to improve mental health for our nation's health care workforce.

There is a small window of time now for you to reach out to your federal legislators to urge support for these much-needed resources and to ensure their inclusion in upcoming COVID-19 legislation.

Click here to send your message today!

House Committee Reviews Mental Health Legislation
On June 30, the House Energy and Commerce Health Subcommittee held a legislative hearing entitled "High Anxiety and Stress: Legislation to Improve Mental Health During Crisis" to examine 22 bills related to mental health. Three of the bills have specific implications for emergency department care of mental health patients. The ACEP-supported “Improving Mental Health Access from the Emergency Department Act of 2019” (H.R. 2519), sponsored by Rep. Raul Ruiz (D-CA), would establish grants to support the provision of community follow-up services for individuals who present at the emergency department with an acute psychiatric emergency. The ACEP-supported "Effective Suicide Screening and Assessment in the Emergency Department Act” (H.R. 4861), sponsored by Reps. Gus Bilirakis (R-FL) and Eliot Engel (D-NY), would create grants to help improve the identification, assessment, and treatment of patients in the ED who are at-risk of suicide. The “Suicide Prevention Act” (H.R. 5619), sponsored by Reps. Chris Stewart (R-UT) and Doris Matsui (D-CA), would institute grants to hospital EDs for programs to prevent self-harm and suicide attempts among patients after discharge.

In addition, there were two bills (H.R. 2874 and H.R. 3165) that would help improve transparency by health insurance plans of how they apply mental health parity laws and a bill (H.R. 1646) to collect data on public safety officer suicides and establish grants for support services within fire departments and EMS agencies.
While the ACEP-supported “Coronavirus Health Care Worker Wellness Act” (H.R. 7255), mentioned previously, was not included on the subcommittee’s formal agenda, several lawmakers referenced the bill due to its importance of creating or expanding programs dedicated to promoting mental wellness among frontline health care providers.

To view the hearing, click here.

**ACEP Submits Statement to House Select Subcommittee on Coronavirus Crisis**

On July 2, the House Select Subcommittee on the Coronavirus Crisis held a hearing, “The Administration’s Efforts to Procure, Stockpile, and Distribute Critical Supplies,” to examine efforts to acquire personal protective equipment (PPE), COVID-19 testing supplies, and other critical supplies needed to respond to the coronavirus pandemic. ACEP submitted a letter for the record to highlight ongoing shortages of these supplies and how they affect emergency physicians’ ability to effectively treat patients during the pandemic.

The hearing featured testimony from Rear Admiral John Polowczyk from the Department of Defense (DoD) Supply Chain Stabilization Task Force, Admiral Brett P. Giroir, MD, Department of Health and Human Services (HSS) Assistant Secretary for Health, and the Honorable Kevin Fahey, DoD Assistant Secretary of Defense for Acquisition.

The witnesses provided context on federal efforts to acquire and distribute needed PPE, as well as existing challenges and future threats on the horizon given a growing cases, hospitalizations, and deaths. Adm. Giroir noted that rather than flattening the curve, infection rates are still going up and that these numbers are not simply the result of increased testing. He also reinforced the message that the only way to control the spread of the coronavirus is through disciplined public health efforts until a vaccine can be developed and become widely available.

To view the hearing, click here.

**NEMPAC Charity Match- Extended through July**

While making your annual contribution to NEMPAC in July, you will have the opportunity to select one of three COVID-19 related charities that ACEP will match 10 cents on every dollar of your donation. It is our way of thanking you for your support and giving back during these unprecedented times. Join your fellow ACEP members to support meaningful political and charitable involvement.

After making your donation online, you will be asked to select one of these charities for the match.

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 & Eggs: An Update on ACEP’s COVID-19 Advocacy Strategy**

ACEP has created, and is continually updating, a list of COVID-19 advocacy priorities that guide our daily work. Over the last several months, ACEP has worked with key decisionmakers within the Trump Administration and Congress to address many of these priority issues.

In May, we published a detailed summary of the rapid federal and regulatory developments that happened during the initial onslaught of COVID-19. This week’s Regs & Eggs post focuses on ACEP’s more recent advocacy efforts around key issues that are affecting you and your patients.

**ACEP Responds to Fiscal Year 2021 Inpatient Prospective Payment System Proposed Rule**

Today, ACEP responded to the Centers for Medicare & Medicaid Services’ (CMS’) annual Medicare inpatient hospital proposed rule. We only commented on a few proposals that impact emergency
Of note, CMS is doubling down on its prior hospital price transparency policy by proposing to require hospitals to report their median negotiated inpatient services charges for Medicare Advantage organizations and commercial payors. In our comments, ACEP states that while we support the Trump Administration's commitment to improving price transparency, we believe that CMS should institute policies that are less burdensome and disruptive to the health care system than those that the agency has already chosen to implement.

CMS is also proposing policy changes to how residency slots are calculated when hospitals close (this is primarily in response to the closure of Hahnemann University Hospital). Specifically, CMS is proposing to expand the definition of a displaced resident to include those who may not be physically present at the hospital when it closes. ACEP and the Emergency Medicine Residents' Association (EMRA) strongly support these proposals.

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