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Capital (30) Minutes

Capital (30) Minutes is ACEP's new take on the Capital Minute—a look at what's happening in Washington, D.C. right now that's affecting emergency physicians and patients. Capital (30) Minutes airs live every other Thursday at 3:00 PM ET. [Click here](#) to watch previous webinars, view the schedule of upcoming events, and register for future airings.

[Click here](#) to view this week's edition of Capital (30) Minutes.

Dr. Lorna Breen Health Care Provider Protection Act Introduced in Senate

Take Action to Urge Congressional Support for Mental Health Resources and Protections for Emergency Physicians

On July 29, the "Dr. Lorna Breen Health Care Provider Protection Act" (S. 4349) was introduced by Senators Tim Kaine (D-VA), Jack Reed (D-RI), Todd Young (R-IN), and Bill Cassidy, MD (R-LA). ACEP worked closely with the sponsors of this legislation that will take major steps to reduce and prevent suicide and burnout, and alleviate other mental health concerns that have only been exacerbated by the COVID-19 pandemic. The legislation is named for Dr. Lorna Breen, an emergency physician and ACEP member who died by suicide earlier this year.

Similar to the ACEP-supported "Coronavirus Health Care Worker Wellness Act" (H.R. 7255) introduced by Rep. Raja Krishnamoorthi (D-IL), the legislation provides grants to establish or expand mental health support services and resources for health care professionals responding to the COVID-19 pandemic, and initiates a comprehensive federal study into health care professional mental health and burnout, particularly in the context of the COVID-19 pandemic. The bill also creates mental health and well-being training programs throughout the medical training and education process and establishes a national campaign to encourage health care professionals to seek support and treatment.

To read ACEP's letter of support, [click here](#).

Emergency physicians' mental health, especially during the ongoing pandemic, remains one of ACEP's top priorities for the next COVID-19 legislative package. ACEP continues

working with the sponsors of both the House and Senate bills to ensure these critical provisions are included in future legislation.

Congress needs to hear directly from emergency physicians around the country how important this legislation to frontline health care professionals managing the COVID-19 pandemic.

[Click here](#) to send personalized emails to your members of Congress.

Please act today as there is a small window of time to take action as negotiations are underway for the next and possibly final COVID-19 relief package.

Senate Finance Committee Holds Hearings on Medical Supply Chain

On July 28, the Senate Finance Committee held the first of two hearings on issues concerning the medical supply chain during the COVID-19 pandemic, with a second hearing on July 30.

The [first hearing](#) featured witnesses from the federal government, including the Department of Homeland Security's Office of Procurement, U.S. Customs and Border Protection, and U.S. Immigration and Customs Enforcement's Homeland Security Investigations, who testified on federal efforts to shore up the nation's supply chain. Some of the testimony touched on issues regarding efforts to detect and prevent counterfeit or inadequate PPE and supplies from entering the medical supply chain.

The [second hearing](#) featured a panel of witnesses from industries affected by the COVID-19 pandemic, including Cathy Denning, Group Senior Vice President of Sourcing Operations, Analytics and Center of Excellence for Vizient, Rob Wiehe, SVP, Chief Supply Chain and Logistics Officer for UC Health, Charles Johnson, President of the International Safety Equipment Association, and Dr. Ernest Grant, RN, FAAN, President of the American Nurses Association. The hearing focused on supply chain management and challenges for the private sector, as well as the ongoing shortages and challenges experienced by frontline providers responding to COVID-19.

House Coronavirus Oversight Committee Holds Hearing on Need for COVID-19 Containment Plan

On Friday, July 31, the House Select Subcommittee on the Coronavirus Crisis held a hearing, "The Urgent Need for a National Plan to Contain the Coronavirus." The hearing featured Dr. Anthony Fauci, National Institute of Allergy and Infectious Diseases Director, Dr. Robert Redfield, Director of the Centers for Disease Control and Prevention (CDC), and Admiral Brett Giroir, Assistant Secretary for Health at the Department of Health and Human Services (HHS).

As with many of the Select Subcommittee's hearings, the conversation was largely a bitter and contentious partisan battle between Democrats and Republicans on the committee. Dr. Fauci responded to some criticisms of his previous statements or assessments of the virus and told the committee that he believes the coronavirus is unlikely to ever fully go away given the high transmissibility of the virus.

To view the hearing, [click here](#).

COVID 4 Negotiations Stall

On July 27, Senate Republicans released their \$1 trillion COVID relief package. The proposal is made up of several bills that are collectively being referred to as the HEALS Act. While the first three major COVID response legislative proposals were approved by Congress with large bipartisan majorities, this round of discussions has proven to be much more challenging. The House Democratic bill, the HEROES Act, included \$3 trillion in funding and program support, while some Senate Republicans believe \$1 trillion is too much and others are opposed to another funding package entirely. One significant ACEP-supported proposal that was included in the HEALS Act, but not the House bill, would provide liability protections for emergency physicians, other health care providers, businesses, and schools arising from COVID. As of Friday morning, negotiations have all but stalled and both chambers are likely to delay their upcoming August recesses.

ACEP will be monitoring the House-Senate negotiations closely and advocating to make sure the provisions most favorable to emergency medicine from both bills make it into the final version that is signed into law. In addition to liability protections, we continue tracking access to PPE, mental health support services for frontline physicians, Provider Relief funds, testing and tracing resources, state and local support, hazard pay, and telehealth services, and others.

NEMPAC Charity Match

While [making your contribution to NEMPAC](#), 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: President Trump Issues Executive Orders on Drug Prices

As we continue to wait for the [2021 Medicare physician fee schedule \(PFS\) proposed regulation](#) to be released, the Trump Administration has been making other regulatory headlines. Last Friday, President Trump signed three executive orders aimed at reducing prescription drug costs.

Read the [Regs & Eggs blog](#) to learn more about the executive orders and ACEP's responses to previous drug pricing proposals.

Stay up-to-date on the latest federal announcements and guidance related to COVID-19 by clicking [here](#).

CMS Updates Data on COVID-19 Impacts on Medicare Beneficiaries

On Tuesday, the Centers for Medicare & Medicaid Services (CMS) released [data](#) that provide a snapshot of the impact that COVID-19 has on the Medicare population. The data includes Medicare beneficiary COVID-19 cases and hospitalizations from January 1 to June 20, 2020.

Key takeaways from the data include:

- Medicare fee-for-service (FFS) payments for COVID-19 hospitalizations totaled \$2.8 billion, representing over \$25,000 per hospitalization.
- American Indian/Alaskan Native beneficiaries have the second highest rate of hospitalization for COVID-19 among racial/ethnic groups after Blacks.
- COVID-19 is disproportionately affecting vulnerable populations, particularly racial and ethnic minorities, in part because of higher rates of chronic health conditions in these populations and issues related to the social determinants of health.

HHS Issues New Report on Medicare Beneficiary Telehealth Utilization amid COVID-19

On Tuesday, the Department of Health and Human Services (HHS) released a [report](#) showing the utilization trends of telehealth services for primary care delivery in Medicare in the early days of the COVID-19 pandemic. The report found that Medicare in-person visits for primary care fell precipitously in mid-March. In April, nearly half (43.5 percent) of Medicare primary care visits were provided through telehealth compared with less than one percent (0.1 percent) in February. While the report does not analyze specialist visits, other studies mentioned in the report have also shown dramatic increases in telehealth use during the pandemic among specialists.

CMS Releases Request for Information on Electronic Prescribing of Controlled Substances in Medicare Part D

On Thursday, CMS issued a [request for information \(RFI\)](#) on electronic prescribing of controlled substances in Medicare Part D. The SUPPORT Act requires generally that prescriptions for controlled substances covered under Medicare Part D must be electronically transmitted by health care practitioners. The requirement will be effective beginning January 1, 2021. The RFI seeks information from stakeholders on issues including whether CMS should include exceptions to the electronic prescribing requirement, and under what circumstances, and whether the agency should impose penalties for noncompliance with the electronic prescribing mandate in rulemaking and what the penalties should be.

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