

## COVID-19 Advocacy

# ACEP 911 Network Tips and Talking Points for Conference Calls and Tele-town Halls with Legislators

### General Messaging Guidance

Advocacy is standing up and sharing your story for emergency medicine and patients. Policymakers and the public need to hear what's happening on the ground, and no one can share that story better than you.

The facts about COVID-19 are changing quickly but what's steady during these challenging times, and what's important for any legislator to come away with, is a sense of:

- Your commitment to treat anyone, anytime.
- Your perspective on the frontlines.
- Your challenge. You train for this, but you are insufficiently protected and equipped.

Be sure to check [www.acep.org/COVID-19](http://www.acep.org/COVID-19) and our [federal policy guidance and announcements](#) page for the latest information that impacts emergency physicians, including [ACEP's current federal policy requests](#).

### Tips for a Successful Call

During conference calls or tele-town hall meetings, it is important to **stay on message and to be concise**. Legislators have busy schedules and limited time for each call. Keep the message simple. Briefly and succinctly talk about how COVID-19 affects your practice and patients. ACEP's federal advocacy talking points are below.

#### Preparing for the Call

- For conference call meetings, **concentrate your discussion on three key points or less**. During tele-town halls, there will be other constituents on the call so you may only have time to ask one or two questions. **Prepare one or two questions to ask or key points to address**.

#### During the Call

- Introduce yourself. Be sure to mention your name, hospital, and ACEP.
- **Try to leave one or two clear messages or impressions with the legislator.**
  - Briefly share an anecdote or provide an update on what's going on in your hospital and tie it to one of the points below.
- If additional information is requested, inform your Representative or Senator that you will have ACEP's Washington, DC-based staff follow-up.

## After the Call

- **Your continued follow-up is critical.** Email, write or call legislators and staff to thank them for their time.
- Remind them of anything they may have agreed to do and send additional information, such as [ACEP's current federal policy requests](#) and [patient resources](#).
- Inform the ACEP Washington office of any follow-up which is necessary by ACEP staff.
- Maintain communication with legislators and their staff through letters, phone calls and tele-town halls.
- Join your legislators' Facebook, Twitter or other social media sites

**NEVER discuss campaign contributions from yourself of NEMPAC.** It is not acceptable or legal to predicate legislative and policy discussions with political and campaign/related support.

## ACEP's Federal Advocacy Talking Points: COVID-19

- As emergency physicians remain on the frontlines of caring for those affected, there is a continued need for policymakers to implement changes to effectively combat COVID-19.
- At a federal level, the American College of Emergency Physicians (ACEP) is focused on protecting patients' access to care, securing the health care workforce, and ensuring adequate resource allocation during this growing public health emergency.
- We urge the federal government to exhaust every option available to rapidly increase PPE production and prioritize distribution to emergency physicians and other frontline health care providers.

## Policy Priorities

- Ensure that insurance companies fully cover the cost of testing, diagnosis, and treatment provided, **without patient cost sharing**.
- Prioritize availability of PPE, and fully utilize the Strategic National Stockpile and Defense Production Act.
  - Protect and strongly enforce rights of frontline personnel to wear and use PPE
- Ensure that relevant medications and supplies are prioritized and distributed directly to needed sites of care.
- Increase supply chain transparency to better identify and proactively address potential shortages.
- Loosen restrictions and remove barriers that impede workforce movement across state lines, such as licensure.

- Consider temporary liability protections for those screening and treating COVID-19 patients.
- Provide financial stability so emergency physicians can treat patients, maintain readiness, and be fully prepared for patient surges.
- Ensure federal and state emergency funding is targeted and distributed beyond hospitals, such as for EMS and emergency physicians who are not hospital-employed.