



May 10, 2019

In this issue:

- [ACEP's "Leadership & Advocacy Conference" Provided Timely Opportunity for Emergency Physicians to Discuss Critical Issues with Members of Congress and Their Staff](#)
- [Surprise Billing](#)
- [Improving Access to Mental Health from the Emergency Department Act](#)
- [House Approves Two Drug Pricing Bills](#)
- [Emergency Preparedness Bill Introduced in Senate](#)
- [House Approves Bill to End Short-Term "Junk" Health Plans](#)

### **ACEP's "Leadership & Advocacy Conference" Provided Timely Opportunity for Emergency Physicians to Discuss Critical Issues with Members of Congress and Their Staff**

*Participants focused on Surprise Billing and Improving Mental Health from the Emergency Department*

551 emergency physicians from 47 states visited with federal legislators and staff on Capitol Hill on Tuesday, May 7 during the ACEP 2019 Leadership and Advocacy Conference (LAC) in Washington, DC. The conference facilitated a total of 350 meetings that gave attendees the opportunity to educate and present solutions directly to legislators and their staff on hot-button issues like "surprise medical bills" and psychiatric patient boarding in the emergency department (ED). A key factor in focusing on these issues was the ability for us to move the needle based on our assessment of the current environment in Congress.

#### **Surprise Billing**

With increased public attention on the issue of surprise bills, as well as growing discussion around how to address this issue in the House of Representatives, Senate, and with the Administration, ACEP released [specific recommendations](#) earlier this year on how to ensure patients are truly taken out of the middle of billing disputes. LAC attendees discussed three key principles that should guide such an effort: protect patients by taking them out of the middle and holding them harmless; level the playing field and encourage fair and reasonable contracting for in-network services; and, recognize the unique nature of emergency care (i.e., EMTALA). The congressional visits were an opportunity for the physicians to educate lawmakers about the unique nature of emergency care and to advocate for our patients regarding this issue.

To access the surprise billing education pieces shared on Capitol Hill, [click here](#).

Just two days later, President Trump called on Congress to help protect American consumers from unexpectedly large medical bills after they go to the hospital. During his remarks the President said Democrats and Republicans alike should work quickly to stop "surprise" billing in the health-care industry. While there is broad consensus on Capitol Hill about a need for federal action, and the Administration's attention on the issue will likely spur greater momentum – the devil is in the details.

In response to the release of the [White House's principles](#) regarding surprise billing, ACEP released a [statement](#) on behalf of President Dr. Vidor Friedman, in which he said, "ACEP shares the

Administration's view that improving transparency is critical to stopping surprise bills ... Still, the principles the White House laid out do not go far enough to protect patients."

### **Improving Access to Mental Health from the Emergency Department Act**

LAC attendees also educated legislators about the challenges they face providing care for psychiatric patients in the emergency department and asked for their co-sponsorship of new legislation introduced on May 3 by Rep. Raul Ruiz (D-CA), who is also a board-certified emergency physician. Dr. Raul Ruiz introduced H.R. 2519, the "Improving Access to Mental Health from the Emergency Department Act" on Monday and Sens. Shelley Moore Capito (R-WV) and Maggie Hassan (D-NH) introduced the companion bill in the Senate, S. 1334. These bills were drafted by ACEP to provide additional resources for patients with acute mental health needs who seek care in the ED due to a critical shortage of inpatient and outpatient resources. During their Hill meetings, ACEP members described some of the innovative programs developed by emergency physicians that may be useful in other communities, and asked legislators to support these efforts by co-sponsoring their respective bills. Information on this legislation can be found [here](#).

Next week we will send a special edition of the 911 Weekly Update to provide further details about the 2019 Leadership and Advocacy Conference and important instructions on how you can follow-up on this advocacy work back at home with your own legislators.

### **House Approves Two Drug Pricing Bills**

On Wednesday, the House of Representatives adopted two prescription drug pricing-related bills unanimously. The House passed H.R. 1503, the "Orange Book Transparency Act," by a vote of 422-0, with 10 Members not voting. The House also adopted H.R. 1520, the "Purple Book Continuity Act," by a vote of 421-0, with 11 Members not voting.

The two bills were approved by the House Energy and Commerce Committee in early May. H.R. 1503 would require manufacturers to share complete and timely information with the US Food and Drug Administration (FDA), and modify other requirements related to the listing of patents in the Orange Book. H.R. 1520 would codify publication of approved biological products in the Purple Book in a similar format and with similar requirements to the Orange Book, specify that the FDA should publish the Purple Book electronically on its website, and direct the FDA to consider the types of patents for listing.

### **Emergency Preparedness Bill Introduced in Senate**

Also on Wednesday, Sens. Richard Burr (R-NC) and Bob Casey (D-PA) introduced legislation, S. 1379, that would reauthorize certain public health security and all-hazards preparedness and response programs authorized under the Public Health Service Act and Federal Food, Drug, and Cosmetic Act.

S. 1379, which was referred to the Senate Health, Education, Labor, and Pensions (HELP) Committee, includes the Pandemic and All-Hazards Preparedness Act (PAHPA) provisions included in H.R. 269, which was passed by the House of Representatives on January 8, that also included other FDA-related provisions that are not part of S. 1379.

### **House Approves Bill to End Short-Term "Junk" Health Plans**

On Thursday, the House of Representatives adopted H.R. 986, the "Protecting Americans with Preexisting Conditions Act." The legislation would nullify 2018 guidance issued by the Trump Administration to implement Affordable Care Act (ACA) Section 1332 State Innovation Waivers. The House adopted H.R. 986, as amended, largely along party lines by a vote of 230 to 183, with four Republicans joining Democratic Members in voting yes, one Republican Member voting present, and 18 Members, nine Democrats and nine Republicans, not voting.

According to the House Energy and Commerce Committee report on H.R. 986, the legislation would revoke guidance by the Department of Health and Human Services, issued October 24, 2018, that

modified requirements states must meet in issuing Section 1332 waivers. The Committee report notes the guidance would permit states to receive approval for “proposals that direct the ACA’s tax credit subsidies towards short-term, limited duration insurance (STLDI) plans and other types of health insurance plans that do not provide consumer protections contained in Title I of the ACA.”

It is highly unlikely this legislation will be considered by the Senate. Even if the Senate did approve the measure, President Trump has vowed to veto the measure if it reaches his desk.



Connect with us on  Facebook and  Twitter!

---

To ensure delivery to your inbox, add [ACEP@acep.org](mailto:ACEP@acep.org) & [JSlade@acep.org](mailto:JSlade@acep.org) to your address book.  
Copyright © 2019 American College of Emergency Physicians. All rights reserved.  
View the ACEP [privacy policy](#).

---

ACEP Public Affairs | 2121 K Street, NW Suite 325 | Washington, DC 20037

[Click here to unsubscribe.](#)