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IN THIS ISSUE:

- **Opioid Bills Move Forward in House and Senate-- **Two ACEP Bills Included****
- **2019 National Defense Authorization Act Includes ACEP Language on PDMPs**
- **PAHPA Draft Released**
- **Check out the latest ACEP Capital Minute**
- **CMS Releases Fiscal Year 2019 Medicare Hospital Inpatient Prospective Payment System Proposed Rule**
- **ACEP Response to the “Short-Term, Limited-Duration Insurance” Proposed Rule**
- **NEMPAC Activities at LAC18**
- **Congressional Dine-Arounds during LAC18**

Opioid Bills Move Forward in House and Senate

On Tuesday, the Senate Health, Education, Labor, and Pensions (HELP) Committee marked up S. 2680, the Opioid Crisis Response Act (OCRA), bipartisan legislation crafted by HELP Chairman Lamar Alexander (R-TN) and Ranking Member Patty Murray (D-WA). The comprehensive package reflects the work and priorities of 38 different senators.

Importantly, the legislation includes two ACEP-led legislative priorities. The first promotes the development of alternatives to opioids in acute care settings such as the emergency department. The second helps promote the administration of Medication Assisted Treatment (MAT) in the emergency department with corresponding resources in the community to ensure a successful “warm handoff” for patients with substance use disorders. ACEP continues working to ensure these initiatives are enacted into law.

On Wednesday, the House Energy & Commerce Health Subcommittee marked up nearly 60 different bills to address the opioid crisis, **including H.R. 5197, the Alternatives to Opioids (ALTO) in the Emergency Department Act, and H.R. 5176, the Preventing Overdoses While in Emergency Rooms (POWER) Act, both of which ACEP helped to craft and secure their legislative markup.** During the markup, Ranking Member Frank Pallone (D-NJ) [referenced the testimony](#) of ACEP’s Mark Rosenberg, DO, FACEP, before the committee in March, and highlighted the success of the ALTO program he implemented at St. Joseph’s Hospital in New Jersey.

And finally, on Wednesday, the House Ways and Means Trade Subcommittee held a hearing titled, “Stopping the Flow of Synthetic Opioids in the International Mail System.” The panel heard testimony from representatives of U.S. Customs and Border Protection and the United States Postal Service (USPS) regarding the challenges in addressing the trafficking of

synthetic opioids through the postal system. **ACEP has supported Representative John Katko's (R-NY) legislation to address this issue, H.R. 2851, the Stop the Importation and Trafficking of Synthetic Analogues Act of 2017 (SITSA).**

2019 National Defense Authorization Act Includes ACEP Language on PDMPs

The House of Representatives has begun consideration of fiscal year (FY) 2019 National Defense Authorization Act (NDAA), the annual legislation providing and authorizing the budget for the U.S. Department of Defense (DoD). **The bill, H.R. 5515, includes language provided by ACEP to direct the Secretary of Defense to establish and operate a prescription drug monitoring program (PDMP) and to ensure that this PDMP establishes appropriate procedures for sharing information between the DoD and state PDMPs.** This language is the product of continued work with Representatives Mike Turner (R-OH) and Seth Moulton (D-MA), who have led the charge in seeking resolution of this issue with the DoD.

Currently, there is no established process for sharing information between DoD and state PDMPs, leading to significant gaps in information about active service members and their family members. This effort will help ensure greater coordination between civilian and military health care providers. ACEP continues working to improve coordination between the DoD and civilian providers, as well as the Department of Veterans Affairs (VA) and Indian Health Service (IHS).

PAHPA Draft Released

On Thursday, the Senate Committee on Health, Education, Labor, and Pensions (HELP) released a discussion draft of legislation to reauthorize the Pandemic and All-Hazards Preparedness Act (PAHPA), the law concerning the country's public health preparedness and response framework. ACEP staff has been actively working with bill authors in the House and Senate to incorporate priorities for emergency medicine, including continued funding for the Hospital Preparedness Program, codification of the Emergency Care Coordination Center (ECCC), strengthening the National Disaster Medical System (NDMS), providing liability reforms for emergency physicians and volunteer health professionals, improving trauma availability and training, and improving access to emergency medications and alleviating essential emergency drug shortages.

The HELP Committee is seeking input from stakeholders by Friday, May 4. ACEP is currently reviewing the draft legislation and is in the process of responding to the committee to ensure the legislation addresses the needs of emergency physicians.

Check out the latest ACEP Capital Minute

There's a new edition of ACEP's Capital Minute for the last week of April, 2018. Check it out here: <https://www.youtube.com/watch?v=vLJ0fcrFvvg>



CMS Releases Fiscal Year 2019 Medicare Hospital Inpatient Prospective Payment System Proposed Rule

On April 24, CMS released its annual Medicare proposed rule for hospitals payments: the hospital inpatient prospective payment system (IPPS). The rule proposes numerous updates to payments to hospitals and long-term care hospitals as well as many other policies that would impact both hospitals and providers.

Of interest, the rule includes a request for information on out-of-network and price transparency issues, including for emergency departments. CMS is concerned that patients are facing challenges due to insufficient price transparency, including surprise out-of-network bills for anesthesiology and radiology charges, and “being surprised by facility fees and physician fees for emergency room visits.” CMS is strengthening their guidelines for and enforcement of a requirement from the Affordable Care Act that hospitals make public a list of their standard charges, as well as other potential actions it seeks input on.

Beyond this request for information, the rule proposes reforms to hospital quality programs such as the the Medicare and Medicaid Electronic Health Record (EHR) Programs (known as Meaningful Use), which has been renamed to “Promoting Interoperability”. The overall goals of these reforms are to reduce provider burden by streamlining reporting requirements and to promote interoperability of EHRs.

ACEP plans to formally respond to this proposed rule in the weeks to come.

ACEP Response to the “Short-Term, Limited-Duration Insurance” Proposed Rule

On April 23, ACEP submitted comments on the Trump Administration’s proposed rule related to short-term, limited-duration insurance. The rule proposes to expand the maximum duration of short-term health plans from three months to no more than 12 months. Short-term health plans, which are designed for people who experience a temporary gap in health coverage, are not subject to the requirements imposed on plans in the individual group

market, including the requirement to cover all ten essential health benefits (EHBs). While these plans in the past have served as a bridge for consumers to allow them time to purchase comprehensive insurance, ACEP is concerned about the consequences of allowing the plans to effectively become a replacement for long-term insurance policies. ACEP believes that it is critically important for all insurance plans to cover all ten EHBs. Without such guaranteed coverage, consumers can be left with a narrow set of benefits that do not ensure them access to the items and services they need to manage their health conditions. Therefore, we asked in our comments that the Administration reconsider the proposal and either rescind the rule entirely or at least require short-term health plans to cover all ten essential health benefits. Our full set of comments on the rule is found [here](#).

NEMPAC Activities at LAC18

2018 is an election year and NEMPAC is working hard to identify and support legislators and candidates who will work for sound health care policy to improve the practice of emergency medicine and access for patients. To that end, we have a host of NEMPAC activities planned for LAC18 including:

NEMPAC VIP Reception, Sunday, May 20 from 6:00 – 8:00 pm at the International Spy Museum.

Donors at the following levels are invited to attend:

Sterling: \$600 or more annually (\$60 for Residents)

Give-a-Shift: \$1200 or more annually (\$120 for Residents and \$365 for Residents transitioning into Year 1,2,3 of practice). You may also bring a guest at this level.

To register or for more information, click here www.acep.org/lac

Congressional Dine-Arounds during LAC18

NEMPAC will again be hosting Congressional Dine-Arounds for key members of congress during the LAC. Join your emergency physician colleagues and some of the most influential lawmakers while dining or attending social events in our nation's capital. A minimum donation to the Member of Congress' campaign is suggested for participation, which will be combined with the support provided by NEMPAC. Food and beverage is included with the events.

Here is the current schedule:

Monday, May 21

Rep. Kyrsten Sinema (D-AZ)

Rep. Brett Guthrie (R-KY)

Rep. Dutch Ruppersberger (D-MD)

Rep. Mike Kelly (R-PA)

Tuesday, May 22

Rep. Carlos Curbelo (R-FL) w/special guest Rep. Ryan Costello (R-PA)

Sen. Debbie Stabenow (D-MI)

Rep. Greg Walden (R-OR)

Sen. Patty Murray (D-WA)

Rep. Raul Ruiz (D-CA), emergency physician and Rep. Ami Bera (D-CA), physician member of congress

Rep. Kathy Castor (D-FL)

Rep. Bill Pascrell (D-NJ)

If you have any questions about these events or wish to RSVP, please contact Jeanne Slade, ACEP Director of Political Affairs, at (202) 728-0610, ext. 3013 or jslade@acep.org.

ACEP members' support of NEMPAC makes events like these possible. [Click here](#) with your ACEP login credentials to donate to NEMPAC and make our voice even stronger!



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