



**Both chambers are in session next week.**

**REMINDER: Urge Your Legislators to Sign Congressional Letter on Drug Shortages**

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**REMINDER: Urge Your Legislators to Sign Congressional Letter on Drug Shortages**

During LAC18, hundreds of ACEP members visited Capitol Hill to discuss with Members of Congress how shortages of essential emergency medications are affecting emergency physicians' ability to provide patients with the care they need and deserve.

In these meetings as part of ACEP's advocacy, legislators were asked to sign on to a congressional [letter](#) to urge the Food & Drug Administration to convene the Drug Shortage Task Force along with other federal agencies, as well as stakeholders like ACEP, to identify all of the root causes of drug shortages and develop recommendations on how to address the drug shortage crisis.

Now we are urging all 911 Network members to contact their members of congress to request their support and signature on the letter.

The deadline for Members of Congress to sign on to this letter has been extended to WEDNESDAY, JUNE 13. [Click here NOW](#) to send a message to your legislators and urge them to sign on to this important letter and help ensure that patients have access to the life-saving emergency medications they need and deserve.

Send a reminder to your lawmaker today! [Urge Legislators to Sign Congressional Letter on](#)

## [Drug Shortages](#)

### **Senate Cancels August Recess – For Now**

On Monday, Senate Majority Leader Mitch McConnell (R-KY) announced the Senate will be in session throughout August, canceling the traditional recess period planned for the month. The vast majority of August is typically reserved for members to spend time working in their respective states and visiting with constituents; however, McConnell announced his decision with the aim of addressing a backlog of legislation and judicial confirmations.

While the stated reasoning behind canceling the recess period is for legislative purposes, the maneuver has largely been seen as a political calculation. As many Senate Democrats are facing tough reelection races, canceling the August recess hinders their ability to campaign back in the state and be visible to voters. It remains to be seen whether the Senate follows through, as many observers think the chamber is more likely to work an additional extra week rather than cancel the entire recess.

### **Rep. Seth Moulton (D-MA) discusses Gun Violence and Injury Prevention during ACEP Tele Town Hall**

Hundreds of ACEP members participated in a tele-town hall on Gun Violence and Injury Prevention on Tuesday evening. Our special guest, Congressman Seth Moulton (D-MA), outlined the progress on gun violence and injury prevention legislation in the 115th Congress, including H.R.3999 the Bipartisan Bump Stock Ban, and H.R. 5576 the No Fly, No Buy Bill. Many participants actively participated on the call by asking questions regarding the likelihood of action in this Congress and how ACEP members can get involved and move legislation on common sense solutions that will keep our communities and families safer. The event was the sixth in an ongoing series of tele town halls offered exclusively to ACEP members to provide education and a platform for the discussion of current issues in Congress impacting the delivery of emergency care and patients. Previous tele-town halls topics included health care reform, physician payment issues, mental health reform and EMS standing orders legislation.

To hear an audio recording of the tele town hall, [click here](#).

### **House Passes \$15 Billion Rescissions Package**

On Thursday evening, the House of Representatives passed a \$15 billion rescissions package intended to claw back government funding that was approved earlier this year. The rescissions package comes at the request of President Trump, who was troubled after signing a \$1.3 trillion spending package earlier this year.

While the vast majority of the cuts come from the Children's Health Insurance Program (CHIP), they are specifically targeted at unobligated funds or already-expired programs – meaning that this is largely a symbolic gesture, as these funds could not have been spent anyhow. According to the Congressional Budget Office (CBO), the bill ultimately only cuts \$1.1 billion in spending over the 10-year budget window.

The bill now awaits an uncertain fate in the Senate, which must act on the legislation by June 22 to pass the bill with only a simple majority.

### **U.S. Department of Justice Pushes New Effort to Dismantle ACA**

On Thursday, the U.S. Department of Justice (DOJ) asked a federal court to eliminate several consumer protections in the Patient Protection and Affordable Care Act (ACA), including limitations on how much insurers can charge individuals based upon pre-existing conditions, age, or gender, delivering a new blow to the stability of the individual health insurance market. This effort comes in support of a lawsuit filed by Texas and 19 other states challenging the constitutionality of the guaranteed issue and community rating provisions in the ACA.

The DOJ has indicated it will not defend the constitutionality of these provisions in light of the repeal of the ACA's individual mandate in 2017 as part of the tax reform package. Whether or not this effort ultimately succeeds or fails is not yet clear, but some note that it will add significant uncertainty to the individual insurance markets regardless. ACEP will continue to monitor this issue as it moves forward.

### **House Committee Begins Review of Preparedness Response Programs**

On Wednesday, the House Energy and Commerce Health Subcommittee held a hearing on reauthorizing the Pandemic and All-Hazards Preparedness Act (PAHPA). The draft legislative proposal would update the nation's law on preparing for and responding to natural and man-made disasters and focuses on the health response to these catastrophes, including any chemical, biological, radiological, or nuclear (CBRN) threats. These efforts are meant to improve collaboration between the HHS Assistant Secretary for Preparedness and Response (ASPR), the Centers for Disease Control and Prevention (CDC), the Food & Drug Administration (FDA), and the nation's state, local, tribal, and territorial public health departments.

Both chambers of Congress are now working to fast-track revisions to PAHPA, which is set to expire at the end of September. The Senate Health, Education, Labor, & Pensions (HELP) Committee approved its version of the bill on May 23 by a vote of 22 to 1.

ACEP continues to advocate for improvements in the law that would improve regionalization of emergency services, increase funding for Hospital Preparedness Program (HPP) grants, allow military trauma teams to provide services at civilian trauma centers, and help ameliorate shortages of essential emergency medications (EEMs), among other things.

### **2018 Medicare Trustees Report Released**

On June 5, the Medicare Board of Trustees released the 2018 Medicare Trustees Report, an annual report which evaluates the current status of the two Medicare Trust Funds and provides financial projections for the next 75 years. The year's report estimates that the Hospital Insurance (HI) Trust Fund, which covers costs under Medicare Part A, will be depleted by 2026, three years earlier than in last year's report. The report includes a few reasons why the exhaustion date of the HI Trust Fund has moved up. First, HI income is projected to be lower than last year's estimates due to lower payroll taxes than previously

projected as well as lower income from the taxation of Social Security benefits. Second, HI spending is projected to be slightly higher than last year's estimates, mostly due to higher-than-expected spending in 2017, legislation that increased hospital spending, and higher Medicare Advantage (Part C) payments.

It is important to note that the Supplementary Medical Insurance (SMI) Trust Fund, which covers Medicare Part B (including physician) spending, does not face the same fiscal challenges as the HI Trust Fund. The financing of the SMI Trust Fund is structured in such a way that premium income and general revenue income are reset each year to cover expected costs and preserve an adequate contingency margin. Like last year, the report acknowledges that annual updates for physicians, which were set by the Medicare Access and CHIP Reauthorization Act (MACRA), do NOT keep pace with the average rate of physician cost increases. The Trustees believe that, absent a change in the delivery system or future legislative update to physician rates, access to Medicare-participating physicians will become a significant issue in the long term.

The full [2018 Medicare Trustees report can be found here.](#)



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