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In this issue:

- [Capital Minute](#)
- [Register for the ACEP Advocacy Townhall 6/17: Surprise Billing](#)
- [ACEP Testifies Before Congress on Surprise Medical Bills](#)
- [ACEP-Supported Amendment to Fund ALTO Approved by House](#)
- [Regs & Eggs: Regulatory Affairs Blog](#)
- [MedPAC Releases Annual Report Including Chapter on ED Utilization](#)

Capital Minute

Check out this week's Capitol Minute here: <https://www.youtube.com/watch?v=NsJRjjKn2Vo> or click on the blue box below to view.



Register for the ACEP Advocacy Townhall 6/17: Surprise Billing

ACEP will be hosting an interactive members-only Advocacy Townhall on Surprise Billing on Monday, June 17th at 4pm EST. This is your chance to speak directly with ACEP leadership; stay current on the latest activity on Capitol Hill and learn more about how you can act now and get involved. Click here to register: https://acep.zoom.us/webinar/register/WN_LXsbBBa2QjiIXqThZWamA. Please [register for access](#) whether you plan to watch live or prefer to view the townhall on-demand at a later date.

ACEP Testifies Before Congress on Surprise Medical Bills

On Wednesday, ACEP President Vidor Friedman, MD, FACEP, testified before the House Energy and Commerce Health Subcommittee on the issue of surprise medical bills. Dr. Friedman's [testimony](#) focused on the framework that ACEP has been promoting with lawmakers since January, the unique nature of the care provided in the nation's emergency departments, and urging Congress to use an independent dispute resolution model, such as the one used in New York, to determine reimbursement rates when there is a dispute between physicians and insurers.



The hearing was entitled “No More Surprises: Protecting Patients from Surprise Medical Bills.” Other witnesses included Sonji Wilkes, a patient advocate; Sherif Zaafron, MD, FASA, on behalf of Physicians for Fair Coverage (PFC); Rick Sherlock, Association of Air Medical Services (AAMS); James Gelfand, ERISA Industry Committee (ERIC); Tom Nickels, American Hospital Association (AHA); Jeanette Thornton, America’s Health Insurance Plans (AHIP); and Claire McAndrew, Families USA.

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

To view other ACEP activities on this important issue, click [here](#).

ACEP-Supported Amendment to Fund ALTO Approved by House

Yesterday, in an overwhelming 382-32 vote, the House of Representatives approved a bipartisan amendment offered by Rep. Bill Pascrell (D-NJ) to provide \$10 million for the Alternatives to Opioids (ALTO) in the Emergency Department program that was authorized in last year's comprehensive opioids bill, the “SUPPORT for Patients and Communities Act” (P.L. 115-271).

The amendment was offered to the Fiscal Year (FY) 2020 Labor-Health and Human Services-Education appropriations bill that was under consideration by the House of Representatives this week. Labor-HHS is part of a “mini-bus” appropriations package that will also include federal funding for programs related to the Department of Defense; State and Foreign Operations; and Energy and Water.

ACEP DC staff worked with Rep. Pascrell's office to ensure the amendment was made in order and passed successfully, as well as offered a letter of support from Dr. Friedman, which was submitted into the Congressional Record.

Thanks to ACEP's successful advocacy efforts for ALTO last year – including testimony from ACEP Board member Mark Rosenberg, DO, FACEP, before the House Energy and Commerce Health Subcommittee and advocacy at LAC – this ACEP-led effort to expand the program throughout the country was signed into law in the SUPPORT Act, but still required funding through the appropriations process. This is an important legislative achievement in our ongoing efforts to address the opioid crisis with ED-specific programs. We will continue working to ensure this funding is signed into law.

The press release from Rep. Pascrell's office can be found [here](#).

Regs & Eggs: Regulatory Affairs Blog

Last week, ACEP started a new blog focused on federal regulatory affairs, “[Regs & Eggs](#).” Every Thursday morning, while you’re eating your breakfast, ACEP’s Director of Regulatory Affairs, Jeffrey Davis, will provide weekly updates on the major federal regulations impacting emergency medicine. This week’s post focuses on CMS’ Patients over Paperwork Initiative to reduce administrative burden. As part of this initiative, CMS has already taken a number of actions to reduce burden, and is now requesting input on additional ideas. As we respond to this request, we need to hear your voice and get your input.

We hope you join for us some Regs & Eggs: www.acep.org/regsandeggs.

MedPAC Releases Annual Report Including Chapter on ED Utilization

Today the Medicare Payment Advisory Commission (MedPAC) released its annual [report](#), providing non-binding recommendations to Congress and CMS on Medicare payment policies. As ACEP expected, there is a [chapter dedicated to ED utilization](#). MedPAC finds that spending for hospital ED visits have increased in recent years. The Commission examined various potential reasons for this shift in coding, and found that, while hospitals are providing more intensive care to ED patients, the conditions treated in EDs and the reasons that patients seek care in EDs have not changed over time. MedPAC believes that these results suggest that patterns of hospital coding reflect a “provider response to payment incentives.”

Most of the discussion in the report focuses on facility coding practices and trends, not on the professional component. MedPAC only makes one specific recommendation-- that the HHS Secretary create and implement national facility coding guidelines for ED visits by 2022.

As background, in October 2018, MedPAC began to dive into this issue at a public meeting. After that meeting in October, ACEP met directly with MedPAC to present our perspective on ED utilization and coding trends. We also talked to them about facility ED coding guidelines that ACEP had developed. MedPAC held several other public meetings to discuss this topic, culminating with the release of the report today. **The ACEP guidelines for facility coding are referenced multiple times in the report.**

It is important to note again that MedPAC can only make recommendations to Congress or to CMS. None of the recommendations or policies MedPAC proposes are binding.

Finally, in related news, MedPAC’s sister Commission, the Medicaid and CHIP Payment and Access Commission (MACPAC), also released its [annual report](#) today. The report, in five chapters, addresses policy and payment considerations related to prescription drugs, Medicaid shortfall, program integrity, therapeutic foster care, and Medicaid funding in Puerto Rico.



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