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**OON/Surprise Medical Bills Update and Action Alert**

On Tuesday, the Senate Health, Education, Labor & Pensions (HELP) Committee held a hearing on reducing health care costs, which included discussions about ways to eliminate surprise medical bills. Witnesses included: Sean Cavanaugh, Aledade; Benedic Ippolito, American Enterprise Institute (AEI); Tom Nickels, AHA; Frederick Isasi, Families USA; Elizabeth Mitchell, Pacific Business Group on Health; and Marilyn Bartlett, Office of the Montana State Auditor. To view the hearing, [click here](#).

The following day, HELP Committee Chairman Lamar Alexander (R-TN) and Ranking Democrat Patty Murray (D-WA) introduced S. 1895, the “Lower Health Care Costs Act of 2019.” The committee had previously released a draft proposal a few weeks earlier with three options they were considering on how to address surprise medical bills – network matching, a form of arbitration, and benchmarking. [Click here](#) to read ACEP’s comments to the committee regarding this draft proposal. Overall, ACEP thanked the committee for providing a placeholder for language to address surprise medical bills but we expressed strong concerns regarding all three options outlined, and instead urged the committee to reconsider using the bi-partisan Senate Price Transparency Work Group’s arbitration model as the starting point for this section of the bill.

Unfortunately, upon introduction on Wednesday, S. 1895 included the benchmarking model through which insurers would only pay the median in-network rate for all out-of-network services provided at an in-network facility. ACEP continues to express opposition to this provision and is working with the committee leadership, staff, and other members of the committee to encourage an alternative method of determining reimbursement for these out-of-network services. To read ACEP’s press release regarding the Senate bill, [click here](#).

We also are asking 911 Network Members to reach out to your U.S. Senators to encourage them to oppose the approach used in S. 1895 and urging them instead to build upon the Bi-Partisan Price Transparency Work Group’s framework to resolve this important issue. An action alert went out on Thursday but if you did not have a chance to act yet, please [click here](#) to access the alert.

The HELP Committee has scheduled a mark-up to consider S. 1895 on Wednesday, June 26 so please take action as soon as possible.

On the House side of the Capitol, ACEP continues to work with other medical specialty stakeholders to promote the independent dispute resolution legislation developed by Drs. Raul Ruiz (R-CA) and Phil Roe (R-TN), which we expect to be introduced next week.

Many of you were able to join us for ACEP Advocacy Townhall on Surprise Billing last Monday. If you were unable to join, you can watch a recording of the townhall here.
You can also use the resources in the ACEP Surprise Billing Member Advocacy Toolkit to help raise your voice.

**House Conducts Hearing on Federal Opioid Programs**

On Wednesday, the House Oversight and Reform Committee held a hearing entitled, “Medical Experts: Inadequate Federal Approach to Opioid Treatment and the Need to Expand Care.” The hearing demonstrated bipartisan agreement that more needs to be done at the federal level to ensure those affected by the opioid crisis are able to access treatment, while highlighting differences among lawmakers regarding the best approach. Democratic Members generally focused on the need for a comprehensive federal approach to support access to medical treatment, while Republican Members highlighted the role of local communities and innovative demand reduction strategies.

The following witnesses testified: Dr. Susan Bailey, President-elect, American Medical Association (AMA); Dr. Arthur Evans, CEO/Executive Vice President, American Psychological Association (APA); Ms. Angela Gray BSN, RN, Nurse Director, Berkeley-Morgan County Board of Health, West Virginia; Dr. Yngvild Olsen, Vice President, American Society of Addiction Medicine (ASAM); Ms. Jean Ross RN, President, National Nurses United; and Dr. Nancy Young, Executive Director of Children and Family Futures.

The witnesses all urged the Administration to do more to address the epidemic and indicated support for H.R. 2569, the “Comprehensive Addiction Resources Emergency (CARE) Act.”

To view the hearing, click here.

**House Passes FY2020 Labor/HHS Appropriations Bill**

On Wednesday, the House of Representatives passed the Departments of Labor, Health and Human Services, and Education, and Related Agencies (Labor/HHS) Appropriations bill for fiscal year (FY) 2020. This legislation provides the necessary annual appropriations funding for HHS and the various health programs under the agency’s umbrella and passed in a 226-203 vote.

In a victory for emergency medicine, two ACEP-developed priorities originally authorized in Congress’ comprehensive, bipartisan opioids package that became law last summer (the SUPPORT Act, H.R. 6) were included in the funding bill. An amendment offered by Rep. Bill Pascrell (D-NJ) provides full funding ($10 million per year) for the Alternatives to Opioids (ALTO) in the Emergency Department Act that he championed last year and will help expand non-opioid treatment protocols in EDs throughout the country. Rep. Pascrell’s amendment passed in a 382-32 vote.

The other was an amendment offered by Rep. David McKinley to provide full funding ($10 million per year) for the Preventing Overdoses While in Emergency Rooms (POWER) Act provision that was included in H.R. 6. This law will help promote a “warm hand-off” approach to better connect emergency patients who have overdosed with the long-term treatment options in their community that they need and deserve. Rep. McKinley’s amendment passed in a 415-9 vote.

While this is a critical step and a win for ACEP advocacy efforts, the Senate must still pass their own Labor/HHS appropriations bill and resolve differences with the House version. ACEP remains engaged with legislators to ensure that necessary funding for these important emergency medicine programs is signed into law.

**NIH Releases RFI on Telemental Health for Suicide Prevention in ED Settings**

Last week, the National Institutes of Health (NIH) released a request for information (RFI) seeking input from the community about their use of telehealth in general hospital emergency medical care settings to facilitate the care of individuals with suicide risk. The NIH wants to know about how the ED currently uses telehealth in these cases and is seeking comments on a range of topics. ACEP plans on submitting an official response to this RFI and is interested in hearing your input on this important issue. To assist in our official response, we have created an online form that will collect answers to all the major questions and topics NIH raises in the RFI. If you would like to contribute to ACEP’s response, please fill out the form by Friday, August 9th.
Regs & Eggs: Regulatory Affairs Blog
ACEP has 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 violence in the ED. Unfortunately, as an emergency physician, you or someone you know has likely been physically or verbally assaulted in the ED. Read the blog to find out how you can help shape new requirements that will help make your ED a safer place for you, your colleagues, and your patients.
We hope you join for us some Regs & Eggs.

FDA Releases Guidance on Benefit-Risk Framework for Opioid Analgesics
On Thursday, the Food and Drug Administration (FDA) released draft guidance entitled “Opioid Analgesic Drugs: Considerations for Benefit-Risk Assessment Framework.” The guidance summarizes the information that should be included in a new drug application for an opioid analgesic drug to facilitate the agency’s benefit-risk assessment and describes the framework the agency uses in its evaluation for opioid analgesic drugs. The acting Commissioner Ned Sharpless M.D. emphasized that the agency is “focused on decreasing exposure to opioids and helping prevent new addiction.” The FDA also announced that they will be holding a public meeting on September 17, 2019 to discuss the agency’s benefit-risk assessment of opioid analgesic, including risks of misuse and abuse of these products.

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