



September 20, 2019

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
Washington, DC 20515

The Honorable Mitch McConnell
Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Charles Schumer
Minority Leader
U.S. Senate
Washington, DC 20510

Dear Speaker Pelosi, Minority Leader McCarthy, Majority Leader McConnell, and Minority Leader Schumer:

On behalf of the American College of Physicians (ACP), I am writing to urge Congress to work expeditiously and on a bipartisan basis to pass key legislative initiatives that impact the health and welfare of our patients and our communities. Congress should act on legislation to avoid a government shutdown by the end of the fiscal year on October 1st, ensure adequate funding for vital federal public health/workforce programs, take steps to address the epidemic of firearms-related injury and death in this nation, protect patients from unanticipated, high medical bills, and lower the cost of prescription drugs.

The American College of Physicians is the largest medical specialty organization and the second largest physician group in the United States. ACP members include 159,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

Fund Vital Federal Health Care Programs for FY 2020

As Congress works to finalize the FY2020 Labor, Health and Human Services, and Education Appropriations bill, we urge you to make much-needed investments in federal health care programs and initiatives designed to maintain and expand primary care, ensure an adequate physician workforce, and promote public health, as outlined in detail in a recent ACP [letter](#) to Congress. To summarize, we urge adequate funding for the following:

- **Title VII, Section 747, Primary Care Training and Enhancement (PCTE) at \$71 million:** The PCTE Program distributes educational grants for primary care physician students, medical residents, fellows, and faculty to enhance primary care provider recruitment.

This program is the only source of federal training dollars available for general internal medicine, general pediatrics, and family medicine.

- **The National Health Service Corps (NHSC) at \$830 million:** The NHSC awards scholarships and loan repayment to health care professionals to help expand the country's primary care workforce and meet the health care needs of underserved communities across the country. In FY2018, with a field strength of over 10,900 primary care clinicians, NHSC members are providing culturally competent care to over 11.5 million patients at over 16,000 NHSC-approved health care sites in urban, rural, and frontier areas. For FY2020, the NHSC's funding situation is particularly dire and faces a funding cliff because its mandatory funding is set to expire.
- **The Title X Family Planning Program at \$400 million; remove barriers to care that interfere with the patient-physician relationship:** The Title X program serves almost four million patients, almost 90 percent female, who received clinical services provided by Title X clinics, including contraceptive services, cervical and breast-cancer screenings, pregnancy testing and counseling, testing and treatment for sexually-transmitted diseases and various patient education and referral services in 2017. ACP opposes any regulatory restrictions that would deny or result in discrimination in the awarding of federal funding to women's health clinics that are qualified under existing federal law for the provision of evidence-based services including, but not limited to, provision of contraception, preventive-health screenings, sexually transmitted infection testing and treatment, vaccines, counseling, rehabilitation, and referrals.
- **The National Institutes of Health (NIH) at \$42.1 billion; the Centers for Disease Control and Prevention (CDC) at \$8.275 billion.** ACP strongly supports NIH's mission of making important discoveries that treat and cure disease to improve health and save lives and that maintain the United States' standing as the world leader in medical and biomedical research. As noted below, ACP also urges Congress to provide dedicated and sufficient funding for research on the prevention of injuries and deaths from firearms.

Address the Epidemic of Firearms-Related Injury and Death

In the wake of recent mass shootings and the ongoing daily toll of gun violence, ACP sent a [letter](#) to Senate leaders urging the passage of much needed policy reforms to help prevent the senseless firearms-related injuries and deaths that continue to occur across this nation. We also joined with our colleagues from seven medical and public health societies representing 731,000 physician members and 25,000 public health professionals to [urge](#) Congress to take immediate steps to reduce the threat of violence, including the following:

- **Provide at least \$50 million in funding for research by the CDC and NIH on the prevention of injuries and deaths from firearms.** There is an urgent need for robust research about the causes and consequences of firearm violence and unintentional injuries and for strategies to reduce firearm-related injuries.

- **Enact the Bipartisan Background Checks Act of 2019 (H.R. 8)**, which would strengthen the accuracy and reporting of the National Instant Criminal Background Check System (NICS) as well as expand Brady background checks to cover all firearm sales, including unlicensed firearms sellers currently not required to use background checks. With some exceptions, the legislation would also expand background checks to cover all private and commercial firearm transfers and sales, including those at gun shows, over the internet, or in classified ads. ACP applauds the House for passage of this legislation and urges Senate leadership to expedite its consideration in the Senate.
- **Enact the Extreme Risk Protection Order Act of 2019 (H.R. 1236/S. 506)**, which has bipartisan support in the U.S. House of Representatives, and would provide grants to states and other jurisdictions that have enacted ERPO laws, using a thoughtful approach that does not stigmatize individuals with mental illness. ERPOs allow family members or law enforcement to petition a judge to temporarily remove a firearm from a person deemed at risk of harming themselves or others. Seventeen states and the District of Columbia have laws authorizing courts to issue an ERPO.
- **ACP also supports enactment of legislation to ban the sale of assault rifles and high capacity magazines, among other measures.**

Protect Patients from Surprise Medical Bills

There is bipartisan consensus that Congress needs to act to address the growing problem of “surprise medical bills” that are issued to patients when they receive care during an emergency situation or medical situation in which additional services are provided by out-of-network clinicians without the patient’s prior knowledge. While we appreciate the efforts of lawmakers on both sides of the aisle to hold patients harmless from surprise medical bills, including recent action on legislation in key committees of jurisdiction, we remain concerned that an agreement has not yet been reached on final compromise legislation. It is vital that Congress put partisanship aside and work to solve this issue, with the best interests of patients firmly in mind. ACP has outlined a set of [principles](#) that we believe are important to include as part of any compromise agreement on this issue. Those principles stress the importance of holding patients harmless from surprise medical bills in the above-cited situations but also the need to establish an independent dispute resolution process that would allow an arbitrator to establish an appropriate and fair payment level between the insurers’ in-network rate and the clinician’s charge.

Lower the Cost of Prescription Drugs

We remain committed to working with you to lower the cost of prescription drugs so that our patients can afford life-saving medications that are prescribed by their physicians. Advances in medications have been life-saving but are of no benefit to our patients if they cannot afford them. As Congress examines solutions to lower the cost and price of prescription drugs, we urge you to approve legislation that would: promote competition in the pharmaceutical industry, increase transparency in the pricing and costs associated with the development of drugs, implement reforms to Medicare to lower out-of-pocket costs for seniors, and increase the value of drugs in the marketplace.

ACP urges enactment of the following bills:

- **The Reforming Evergreening and Manipulation that Extends Drug Years (REMEDY) Act (S. 1209)**, which would amend the law to remove incentives for drug manufacturers to file excessive patents to keep generic drugs off the market, and would lift legal barriers that delay generic entry into the market.
- **The Prescription Drug STAR Act (H.R. 2113)**, which would require manufacturers to publicly justify large price increases for existing drugs and high launch prices for new drugs, and would require the Secretary of HHS to publicly disclose the aggregate rebates, discounts, and other price concessions achieved by pharmaceutical benefits managers (PBMs) on a public website, so consumers, employers, and other payers can understand and compare the discounts PBMs receive. It would also require all drug manufactures to submit information to the Secretary on the average sales price (ASP) for physician-administered drugs covered under part B.
- **The Medicare Prescription Drug Price Negotiation Act of 2019 (H.R. 275/S. 62)**, which allows the Secretary of Health and Human Services to negotiate covered Part D drug prices on behalf of Medicare beneficiaries.
- **The Creating and Restoring Equal Access to Equivalent Samples (CREATES) Act of 2019 (H.R. 965/S. 340)**, which would improve patient access to alternative low-cost prescription drugs and biological products by preventing prescription drug manufacturers from misusing the FDA's Risk Evaluation and Mitigation Strategies (REMS) process to make it difficult for competing generics to be brought to the market.

We are pleased that Speaker Pelosi recently released a plan to lower the cost of prescription drugs and ACP released a [statement](#) that shares our initial thoughts regarding this proposal. We are conducting an in depth review of this proposal and will provide additional comments in the future.

Conclusion

We urge you and your colleagues to work in a bipartisan fashion to advance these policies and we stand ready to serve as a resource on these issues, if and when needed. Should you have any questions, please do not hesitate to contact Brian Buckley at bbuckley@acponline.org.

Sincerely,



Robert M. McLean, MD, FACP
President