AAEM
AMERICAN ACADEMY OF EMERGENCY MEDICINE

THE AAEM ACTION REPORT

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Congressional Activity

Congressional Schedule & CR Passage

On September 1st, Congress passed a continuing resolution that funds the government through December 11th, including provisions delaying an Office of Management and Budget regulation that would give political appointees more control over grants, among other things. AAEM weighed in against the rule as part of the comment process. The House recessed on September 17th with plans to reconvene after the election. The Senate plans to recess next week.

Chances for a lame duck session in December, where Congress returns to consider outstanding items, remains high. Health legislation is likely to come up during that time.

AAEM Priorities

All three of the AAEM priorities, due process, non-competes, and corporate practice of medicine, have now been introduced in the House and the Senate. We will work hard to get the bills introduced prior to our June Hill Day during the next Congress and will continue to advocate for passage of the bills into law.

Federal CPOM Legislation

On September 16th, a bicameral group of legislators introduced The Stop Corporate Takeovers of Physicians Act of 2026 (bill language here). In the Senate, bill leads are Senators Elizabeth Warren (D-MA), Ron Wyden (D-OR), and Jeff Merkley (D-OR). In the House, bill sponsors are Representatives Val Hoyle (D-OR), Suhas Subramanyam (D-VA), and Alexandria Ocasio-Cortez and original cosponsors are Reps Yassamin Ansari (D-AZ), Yvette Clarke (D-NY), Chris Deluzio (D-PA), Maxwell Frost (D-FL), Eleanor Holmes Norton (D-DC), and Rashida Tlaib (D-MI).

AAEM has long championed this bill. AAEM provided input to the first draft and ongoing edits to subsequent drafts, met with the bill leads throughout the process, strategized about strengthening Congressional support for the bill, supported introduction through grassroots and grasstops efforts, and participated in DC-based panels supporting the concept of federal legislation.

The bill press release included a quote from AAEM. In addition, AAEM President Dr. Vicki Norton participated in a press conference on September 16th announcing the bill's introduction. Other outside groups participating in the press conference included the American Economic Liberties Project, the Alliance of Independent Dentists, and OnCARE Alliance. AAEM member Dr. Alexis McCabe also spoke, and Drs. Laura Bontempo and Eric Brader attended the press event.

Finally, the Wall Street Journal ran an exclusive on the bill which said, “The push against private equity is also being led by doctors, many of whom are frustrated by their declining professional autonomy as financial investors acquire more practices. The federal bill is backed by doctors’ groups including the American Academy of Emergency Medicine.

Workforce Mobility Act

On September 1st, Reps. Scott Peters (D-CA) and Tom Kean (R-NJ) introduced H.R. 10215, The Workforce Mobility Act, a bill to ban non-competes nationally. Senators introduced the Senate version last year. A press release includes

a quote from Dr. Norton on behalf of AAEM.

The Physician & Patient Safety Act

The I Street team is continuing to follow up on promising cosponsor leads for the Physician and Patient Safety Act including those identified during the AAEM Emergency Medicine Advocacy Summit (EMAS). In this regard, Rep. Hoyle cosponsored the bill on August 20th. AAEM will continue to seek cosponsors.

Congressional Resolution Recognizing National Physician Suicide Awareness Day

On September 17th, AAEM endorsed a bipartisan Congressional Resolution recognizing September 17th as National Physician Suicide Awareness Day. Vicki Norton, MD FAAEM, joined the resolution bill leaders Reps Haley Stevens (D-MI) and Brian Fitzpatrick (D-PA) and other health organizations to call attention to the stigma that still keeps physicians from seeking mental health care. Dr. Norton was quoted in the press release as follows, "With research showing that roughly one in ten physicians report recent or current suicidal ideation, we cannot afford to treat physician mental health as an afterthought. Designating National Physician Suicide Awareness Day is an important step toward breaking down stigma and encouraging physicians to seek help without fear."

Surprise Billing Developments

Congress and key stakeholders continue to focus on implementation issues surrounding the surprise billing law – the No Surprises Act.

On September 10th, in a letter and during a press briefing, a coalition of 66 consumer, labor, patient, and employer groups asked Congress to reform the No Surprises Act's arbitration process. According to the letter, "Congress must act to close these costly IDR loopholes to ensure that patients, consumers, and employees remain protected from unexpected out-of-network bills -- and that health insurance premiums are not driven higher as a result of abuse of the arbitration process."

Several Congressional Committees are reviewing the issue. The Senate HELP Committee is planning a member roundtable on surprise billing for the fall. House Energy & Commerce ranking member Rep. Frank Pallone (D-NJ) on September 3rd sent oversight letters to six independent dispute resolution (IDR) entities, seeking information about how they determine whether disputes are eligible and how they select payment amounts. The six companies have a deadline of September 24th to respond.

A new Health Affairs study found that The No Surprises Act's IDR process resulted in $22.4 billion in costs from 2022 to 2025, including $15.6 billion in awards that exceed qualified payment amounts, and recommends several policy fixes. According to the study, "these costs are primarily driven by a high volume of disputes and dispute awards that far exceed expected in-network rates."

Medicare Physician Payment Legislation

In July, bipartisan leaders from the Doc Caucus introduced the Patient First Act, H.R. 9693, which comprehensively reforms the Medicare physician payment system. On September 15th, the House Energy and Commerce Committee convened a hearing which focused on this bill among other issues. "We can't pass yet another short-term fix and leave everybody on edge till the end of the year, like we've done for so many years," Democratic Doctors Caucus

Chair Kim Schrier (D-WA) said during the hearing. “It is time for Congress to finally right this ship and to enact long-term reform to physician payment.”

Regulatory Activity

Medicare Fee Schedule Rule

AAEM joined 150 medical specialty groups in signing a letter to the Center for Medicare and Medicaid Services (CMS) on August 27th. In the letter, the groups urged CMS not to finalize the proposed policy to reduce payment by 50 percent when a separately identifiable office/outpatient (O/O) evaluation and management (E/M) service reported with modifier -25 is furnished on the same day as a procedure with a 0-, 10-, or 90-day global period. The letter went on to say that CMS advances this policy on an unsubstantiated assumption of “likely” duplication, without the evidence a change of this magnitude requires, and without addressing the concerns that led the Agency to decline a substantially similar proposal in 2019.

Court Decision on IDR Process & Administration Response

On August 7th, CMS published an implementation timeline document on the IDR process. On June 4th, several agencies published the Federal IDR Operations final rules, which the timeline document further clarifies.

CMS Guidance Increases Prior Authorization Reporting Requirements

On August 17th, CMS issued new guidance that requires Medicaid, CHIP, and Medicare Advantage among others to post certain metrics, such as a list of all services requiring prior authorization, to the plans’ websites. The guidance clarifies that prior authorization of information is available on a webpage that can be reached easily through the course through typical navigation and without password-protection. CMS’ new guidance also asks for plans to publish a single, comprehensive list of services requiring prior authorization, organized by uniform service categories.

HHS Secretary Continues Scrutiny of AMA’s CPT System

In a video released on X on August 28th, Health and Human Services Secretary Robert F. Kennedy said that the American Medical Association (AMA) received more than $300 million last year from entities for permission to use its Current Procedural Terminology (CPT) codes. According to Kennedy, “Those costs don’t disappear. Health care providers and insurers and employers pass them on to their patients.” In its proposed 2027 Medicare Physician Fee Schedule, CMS included a request for information asking stakeholders whether the federal government should develop a CPT alternative. However, the administration has not proposed replacing CPT or ending the AMA’s ability to charge licensing fees. Policymakers also have not announced specific plans to dismantle the current system.

State Activity

This year, I Street has tracked more than 100 bills and has engaged on eight leading up to hearings in their respective states. I Street is tracking these bills through the State Bill Tracker Spreadsheet and the AAEM Dashboard, serving as your most up-to-date resources regarding AAEM’s state-based advocacy.

Most states have adjourned except for Michigan, Ohio, New Jersey, and Massachusetts who have year-round sessions and Pennsylvania who has adjourned but might come back in session. It's unlikely but not impossible that bills will move at this point in the year.

During our time on the Hill working on the corporate practice of medicine bill introduction, we heard that Oregon policymakers and other interested parties will be working proactively for introduction of their bill in other states in 2027.

Additional Updates

Patient Group Brings Still Against AMA on CPT Codes

On August 13th, PatientRightsAdvocate.org (PRA) sued the AMA to make its CPT codes free and publicly available. The lawsuit, filed in federal court in Illinois, asks a judge to rule that the AMA cannot use copyright law to stop the organization from publishing the full CPT code set online for free. The press release and a link to the lawsuit can be found here.

Axios Publishes a Report on ER Wait Times

On August 25th, Axios published a report on emergency room wait times. The report found that patients now wait more than two and a half hours in emergency departments. The report also noted that median visit lengths increased in 24 states and Washington, D.C.

This newsletter content was provided by I Street Advocates, the advocacy partner of the American Academy of Emergency Medicine (AAEM). I Street Advocates works closely with AAEM to advance policy solutions and legislative efforts that impact emergency medicine, ensuring that your voice is heard on the issues that matter most.