

January 10, 2017

The Honorable Mitch McConnell  
Majority Leader  
U.S. Senate  
317 Russell Senate Office Building  
Washington, D.C. 20510

The Honorable Paul Ryan  
Speaker  
U.S. House of Representatives  
1233 Longworth House Office Building  
Washington, D.C. 20515

The Honorable Chuck Schumer  
Minority Leader  
U.S. Senate  
322 Hart Senate Office Building  
Washington, D.C. 20510

The Honorable Nancy Pelosi  
Minority Leader  
U.S. House of Representatives  
233 Cannon House Office Building  
Washington, D.C. 20515

Dear Senate Majority Leader McConnell, Speaker Ryan, Senate Minority Leader Schumer and House Minority Leader Pelosi:

On behalf of the Emergency Nurses Association (ENA) and our more than 43,000 members, I am writing to set forth our position regarding possible changes to the U.S. health care system during the 115<sup>th</sup> Congress.

As you know, emergency departments (EDs) are on the frontline of our nation's health care system. According to the Centers for Disease Control and Prevention, more than 130 million persons visit EDs each year. Emergency nurses provide care for patients with a multitude of injuries and illnesses, and demonstrate expertise in all aspects of emergency care, including triage, acute patient care, public health emergency response, injury prevention, trauma care and disaster preparedness.

Founded in 1970, ENA is a leading authority on patient safety, industry practice standards and emergency health care policy. Our expertise derives from our commitment to providing the highest level of safe, quality care to every patient who presents in hospital emergency departments. As such, as you consider potential changes to the U.S. health care system, ENA is urging you to adhere to the following principles:

**Ensure access to affordable, meaningful and effective healthcare coverage**

- The uninsured are more likely to delay primary care treatment, which can exacerbate existing acute and chronic conditions, increasing the likelihood of needing emergency care.
- Patients who are uninsured are also more likely to seek primary care services in the ED, placing disproportionate strain on hospitals and the emergency health care system.
- The availability of coverage options through marketplace exchanges and expansion of Medicaid has contributed to substantial reductions in the number of uninsured individuals.
- Maintaining the availability of affordable coverage options is essential to ensuring EDs across the country experience no unintended consequences resulting from large numbers of uninsured.

**Continue the drive toward increased community options and coverage parity for mental healthcare services**

- The historic lack of community-based mental health services and options drives the uninsured and underinsured to their local ED for care.
- Mental health patients who present to an ED have an average stay of 18 hours, compared to an average of only four hours for all ED patients.
- EDs are not the most appropriate setting for mental health patients to seek primary care for their conditions or symptoms.
- Critical improvements to the mental health system and parity requirements resulting from provisions in the recently-enacted 21<sup>st</sup> Century Cures Act and the Affordable Care Act (ACA) must be maintained and enforced.

**Promote the role of advance practice registered nurses (APRN) in primary and emergency care by supporting full practice authority for these professionals**

- Reliance on the ED for primary care – even for the insured – is often a result of inadequate access to primary care services, especially in rural and medically underserved areas.
- Promoting full practice authority for APRNs helps ensure the timely delivery of high-quality primary care to all Americans.
- APRNs can practice effectively in an emergency environment and use their abilities, knowledge and specialized skills to meet the needs of patients and their families at the point of crisis or need.
- APRNs can effectively promote safe practices, healthy behaviors and prevent injury and illnesses to individuals and throughout the communities in which they serve.
- Recently, the Department of Veterans Affairs (VA) finalized a rule expanding access to primary care by allowing three categories of APRNs to practice to the full scope of their education and training while employed by the VA. Full practice authority for APRNs should be extended beyond VA facilities to other parts of our health care system.

**Ensure that hospital emergency departments do not experience undue hardship that any systemic changes might bring as a result of decreased access to affordable coverage or care**

- Since 1986, the Emergency Medical Treatment and Labor Act (EMTALA) has guaranteed access to care to anyone arriving at an ED, regardless of their coverage status or ability to pay.

- Uncompensated care is a significant burden on EDs and other health care facilities and has contributed to the closure of emergency departments around the country. This leaves patients vulnerable to critical gaps in the availability of emergency care services during a crisis.
- States that expanded Medicaid under the Affordable Care Act (ACA) saw a 31 percent drop in uninsured visits to EDs compared to non-expansion states. While ED care only accounts for about four percent of all Medicaid spending, nearly 32 percent of monthly ED visits since 2014 were covered by Medicaid.
- Any potential changes in health policy should avoid burdening hospital emergency departments and other emergency care providers with sharp increases in uncompensated care.

**Encourage the development of an appropriately educated and trained workforce by fully funding federal nursing workforce development programs**

- Reauthorization of nursing workforce development programs under Title VIII of the Public Health Service Act is critical to maintaining an adequate supply of nurses throughout our health care system.
- Support for workforce development, loan repayment and tuition assistance programs that increase the primary care workforce are essential components to maintaining access to care and managing spiraling health care costs.

As you consider legislation to reform our health care system, we look forward to working with you to improve our health care system, especially with respect to the care received by millions of Americans requiring care in our nation's emergency departments.

Sincerely,



Karen Wiley, MSN, RN, CEN  
2017 ENA President

cc: Senator Lamar Alexander  
Senator Patty Murray  
Senator Orrin Hatch  
Senator Ron Wyden  
Rep. Greg Walden  
Rep. Frank Pallone  
Rep. Robert Brady  
Rep. Richard Neal