

Advocacy Guidebook



| Introduction | 3 |
|--|----|
| Getting to know the U.S. Pain Foundation | 4 |
| Advocacy overview | 5 |
| Ways to advocate | 6 |
| Knowing our Advocacy Priorities & Interest Areas | 7 |
| How to tell your story | 9 |
| Contacting legislators | 10 |
| Requesting a meeting | 12 |
| How a bill becomes law | 14 |
| Resources | 17 |
| Glossary of legislative terms | 21 |
| Commonly used health & pain policy acronyms | 24 |



Introduction

Dear Advocate.

This guidebook can be used as a supplement to the information and training you receive during our Virtual Advocacy Training Series. Our hope is that you will refer to its contents throughout your journey as a representative for the chronic pain community. As always, we are available to help you identify opportunities to take action and to offer support as we work together to achieve policies that better support people with pain everywhere.

A promising time for pain

This is an exciting time to engage at the state and federal level. Chronic pain is increasingly being recognized by policymakers as a national health crisis worthy of funding and attention. Meanwhile, U.S. Pain Foundation continues to expand its opportunities to take action and its incredible network of volunteers.

The U.S. Pain Foundation depends on the passion and dedication of its volunteers to create positive policy change. Whether as easy as taking part in one of our online email engagements, or as involved as testifying at a hearing, you have the power to make a difference.

When we work together, our ability to improve life for all people living with pain grows exponentially.

Sincerely,



Cindy Steinberg
Director of Policy & Advocacy
cindy@uspainfoundation.org



Getting to know the U.S. Pain Foundation

We encourage you to familiarize yourself with the organization's mission and programs as well as some key facts about chronic pain in America. This can provide helpful background information when contacting policymakers.

Our mission

The mission of the U.S. Pain Foundation is to empower, educate, connect, and advocate for people living with chronic conditions and serious injuries that cause pain, as well as their caregivers and clinicians.

Some of our programs

- **INvisible Project,** a print magazine and traveling display that shares stories of people with pain
- **Pain Connection**, a network of support groups and support group leader trainings
- **Pediatric Pain Warrior program**, which provides support and education for children with pain and their families
- Volunteer Network, a network of individuals who represent the organization
- Advocacy Program, which advocates on pain-related issues at the state and federal levels
- **Pain Awareness Month Campaign**, every September we engage the pain community in a range of activities around a specific theme including webinars, blogs, in-person events, social media campaigns, surveys and more to raise awareness about the burden of chronic pain.

Talking points about U.S. Pain

- The U.S. Pain Foundation is an independent nonprofit 501(c)(3) organization.
- It is the largest patient organization dedicated to serving people with pain.
- Through our multiple programs and services, we work to enhance quality of life for people with pain, improve patient outcomes, address access and affordability issues, and increase public awareness and empathy for the issue of pain.
- U.S. Pain Foundation exists to offer hope and inspiration, share information and resources, advocate for improved care, and honor those whose lives have been affected by pain.

Talking points about chronic pain

- Chronic pain defined as pain persisting longer than 3 months affects 60 million adult Americans
- As of April, 2023, 21 million Americans live with high-impact chronic pain, or pain that substantially restricts work, social, and self-care activities
- In 2011, the last time this information was calculated, pain costs the nation up to \$635 billion each year in medical treatments, disability payments, and lost productivity
- Pain is the leading cause of long-term disability
- Pain is the number one reason Americans go to the doctor



Advocacy overview

What is advocacy?

Advocacy comes from the Latin word meaning "voice." U.S. Pain defines an advocate as an individual who supports a cause and tries to get others to support it as well. Being a patient advocate for the chronic pain community means speaking up, drawing attention to important issues, and directing decision makers toward solutions.

"ADVOCACY: THE ACT OF PLEADING OR ARGUING IN FAVOR OF SOMETHING, SUCH AS A CAUSE, IDEA, OR POLICY; ACTIVE SUPPORT."

-American Heritage Dictionary

Things to remember

1. YOU HAVE POWER IN YOUR STORY.

Always remember that your elected representatives are obligated to help their constituents--including you! Your story is important to them and has the power to create change. You can share it electronically or in person.

2. ADVOCACY IS EASIER THAN IT SEEMS.

Your story is really all you need to know. There is a team of skilled advocates working or volunteering for the U.S. Pain Foundation who will educate and train you. You don't need to be an expert, but knowing the basics will make you feel more comfortable and confident.

3. STAYING INFORMED IS KEY.

Understanding the issues and knowing when to act is essential. In addition to the Advocacy Training Program, take time to review our priority issues (see $Programs \rightarrow Advocacy \rightarrow Priorities \ and \ Positions$). Be sure to register for action alerts (under $Programs \rightarrow Advocacy \rightarrow Action \ Opportunities$) and watch for other learning opportunities, such as webinars.

4. ADVOCACY IS REWARDING.

Being an advocate is empowering and simply makes you feel good!



Ways to advocate

Proposed policies and recommendations that directly affect the pain community are being debated by state and federal lawmakers every day. That means there are a multitude of opportunities to have our voices heard and create positive change. Even if your time and energy is limited, you can still be involved. Only a few of the examples below require in-person action. Most often, advocacy can be done from the comfort of your home, and many of these efforts require only a few minutes of your time. Every little bit helps.

Be informed and engaged personally

- Stay up to date on pain-related legislation and opportunities to act through our eAlerts and newsletters
- Respond to eAlerts, surveys, and any other calls-to-action from U.S. Pain
- Participate in U.S. Pain events and campaigns

Inform and engage the community around you

- Talk with friends, family and other members of your community about pain issues
- Share, retweet or repost information from U.S. Pain social media accounts
- Submit letters to the editor or op-eds to local news about pain-related issues
- Host an information table or awareness event

eAlerts: email call-to-actions from U.S. Pain that make it easy to contact policymakers about an issue by providing templates and talking points.

Inform and engage public officials

- Tweet at public officials
- Email or send a letter to public officials
- Call public officials
- Visit public officials in-person
- Testify or participate in public hearings or forums
- Submit written comments to government agencies

We encourage you to come up with your own unique ideas for advocacy, though we do encourage you to keep us looped in on your efforts. Please note: if you do have a successful advocacy experience, always let us know and, ideally, share a photo with contact@uspainfoundation.org. We love hearing about your efforts!



Knowing our Advocacy Priorities & Interest Areas

U.S. Pain Foundation focuses its advocacy with these basic goals:

- → To <u>advocate</u> for policies that will improve the care of people living with chronic pain at the state and federal level.
- → To <u>educate and empower</u> U.S. Pain's Advocate volunteers and members to advocate for public policies that will improve care for people with pain.

Each year the Director of Policy and Advocacy creates a strategic plan for all of our advocacy efforts that year. The plan includes the organization's key priorities for that year as well as establishes interest areas on which we may engage when opportunities arise.

Our key priorities are:

- 1. Promote movement toward integrated, multidisciplinary pain care as best practice. (federal and state)
- 2. Work to improve access to therapies for chronic pain especially integrative and complementary modalities such as acupuncture, massage therapy, PT, chiropractic and behavioral health; innovative medical devices and novel therapeutics. (federal and state)
- 3. Advocate for dissemination of the HHS Pain Management Best Practices Inter-Agency Task Force report to front-line clinicians and implementation of specific recommendations including a national pain awareness campaign. (federal)
- 4. Advocate for epidemiology collection, analysis and reporting on chronic pain as a primary vehicle to raise public awareness about chronic pain. (federal)
- 5. Advocate to continue telehealth coverage of provider visits at parity with in-person appointments beyond the PHE including prescription renewal appointments, chronic care management and behavioral health. (state and federal)



Interest Areas

We will maintain an interest in other areas that impact pain care and support and act on them as time, importance and resources allow. These include:

- Medical Cannabis
- Issues impacting headache disease
- Novel therapeutics for chronic pain
- Opioid prescribing and dispensing
- Access to medical devices for the treatment of chronic pain
- Pharmacy benefit and utilization management impact on patient cost and access including step therapy, prior authorization, non-medical switching copay accumulators, medical devices
- Access to medical foods as a treatment approach to chronic pain
- Investment in basic, translational and clinical research in pain
- Provider pain education
- Coverage of Biologics and Biosimilars
- Medicare Part B and D access and cost
- COVID-19 impacts on people with pain and their providers
- Overall drug pricing



How to tell your story

Your voice matters. Don't be intimidated when meeting with your policymaker. Remember, you are an expert when it comes to your pain journey. Openly sharing your story allows legislators the unique opportunity of learning about the various challenges faced by Americans with chronic pain.

Storytelling tips

- 1. **Keep it brief** Outline your pain journey story on a piece of paper, making sure to highlight key points you want to make. This may include the name of your disease, a quick one-line sentence about what your disease is (E.g. "This is a connective tissue disorder that affects all the systems of the body and causes daily pain."), how long you have lived with chronic pain, etc.
- 2. **Be open and honest** Sharing your personal pain journey with others may be an emotional experience, and that's okay! Just try to maintain that balance between expressing emotions and staying on-task and calm. Your story may be emotional to tell; but try to avoid getting too caught up in anger or frustration. Stay professional and focus on getting your point across.
- 3. **Know your purpose and the facts** Tell your legislator why you requested the meeting, and discuss facts about the policy issue/proposed bill. Note how it does or would impact you, if enacted. Integrate your personal experiences relevant to the topic when sharing your story.
- 4. **Make an "ask"** An "ask" is what you want the legislator to do as a result of your meeting. Don't forget that one of the main reasons you have offered your time and energy to meet with the legislator is to inspire change.



Contacting legislators

There are several effective ways you can positively interact with a policymaker. The main outreach methods for expressing your support or opposition on a policy is through email and phone calls. Keep in mind that you can always reach out to a member of the U.S. Pain Foundation advocacy team should you have questions about creating your messaging.



Sending an email

Sending an email is an effective and efficient way to communicate with legislators; in fact, many offices now prefer to receive communication electronically.

Email is a great way to make sure your voice is heard in a timely fashion, right up until your legislator votes on an issue. Remember:

- → Be courteous, even if you disagree with the legislator's position.
- → Be brief. As a guick form of communication, emails should be shorter than a letter.
- → Express yourself clearly. Only discuss one issue and limit yourself to a few key points.
- → Follow up! Your legislator is likely to respond to your email. If he or she does what you requested, respond immediately to say thank you.
- → CC contact@uspainfoundation.org so that we can track our advocacy efforts.

Subject line and greeting

- Nail the subject line. In case your email is not opened, creating a clear subject line can still make an impact. The subject line should be the action you request in the email ("...vote YES on H.B. 5678").
- Use a formal business style. Use the proper address and salutation to begin your email (*Dear* Senator/Representative Jones).

First paragraph

- Identify yourself as a constituent and include your name and hometown in the email.
- If taking action on a priority issue related to U.S. Pain Foundation, state that you are a volunteer advocate for the organization. (E.g. "As a constituent and advocate for U.S. Pain Foundation, the largest nonprofit for Americans living with chronic pain...")
- State the problem in the first paragraph. Include a bill number and title whenever relevant.
- State what you would like the legislator to do. Make your request for action as specific as possible (e.g. "I urge you to vote in favor of SB 1083: An Act relative to Step Therapy").

Second paragraph

- Be informative. Explain why this issue is personally important to you. Explain how the issue affects you, your family, etc.
- Provide a few facts about the issue/bill or what it would mean for constituents like yourself, if passed.

Closing

Restate your request (e.g. I urge you to vote in favor of SB 1093).

Tip: Research the issue you wish to discuss with your lawmaker

recommend utilizing some of our

before initiating contact; we

resources and online tools.



- Ask for a response. Ask for a commitment from your legislators on the issue, and request that they explain their position to you. If he or she sends you a response that does not directly say what the legislator has done about the issue, feel free to email again and politely ask for clarification.
- Thank the policymaker for devoting time to your issue and for past action.



Dialing the office

Calling is another effective way to express your views to your representative—and it only takes a few minutes! If an issue is heating up and moving fast, calling is one of the best ways to make an impact.

Guidelines for making an effective call

- Prepare what you want to say prior to your call. You should limit your remarks to about a paragraph of text. You will most likely speak to one of the legislator's staff members, and that's okay! Ask to talk with the staff member responsible for health care-related legislation. If they are not available, you may leave a message with the receptionist or leave a voicemail. If they offer to connect you with another aide, that is fine. Agree to speak with that aide. Be sure you get the name of who you are speaking to.
- Identify yourself as a constituent. (E.g. "Hello, my name is Sally Smith, and I am a constituent from Middletown, CT.")
- If taking action on a priority issue related to U.S. Pain Foundation, state that you are a volunteer advocate for the organization. (E.g. "As a constituent and volunteer advocate for U.S. Pain Foundation, the largest nonprofit for Americans living with chronic pain...")
- State the issue that you are calling about. Include a bill number and title, if relevant.
- State what you would like the legislator to do. Be specific and have a precise request. (e.g. I urge you to vote in favor of Senate Bill 1083, An Act to Legalize Medical Cannabis for Pain).
- Briefly explain your position and reasoning in 1-3 sentences (e.g. "As a person living with pain, I believe that..." or "This bill is essential to my own personal health because...").
- Ask for your legislator's position on this issue. You may request that your legislator send you more information about his/her position.
- Be positive and courteous. Write down the name and contact information of the person you spoke with in case you decide to call back. Thank the person who takes your call. Leave your name, and phone number for any necessary follow up.



Requesting a meeting

As a constituent, you have the right to request a meeting with your lawmaker and/or his or her staff by writing/emailing a letter or placing a call. Please keep in mind that it is very rare for you to get to speak to the lawmaker. Lawmakers spend a lot of time in Committee meetings and rely on their staff to meet with constituents. Staffers are tasked with bringing every conversation with constituents back to their team and the lawmaker. Speaking with your lawmaker's staff members in-person or virtually is an effective way to educate them about pain issues, even if there is not a particular bill to discuss. They will think of you as someone who is knowledgeable on this issue and may contact you when a bill relating to pain care is being considered in the future.

Scheduling

It is most effective to request a meeting with the policymaker who represents your district. Placing a request for a meeting can be conducted via email, over the phone, or using the meeting request form on the lawmaker's website. Be sure to include the following details in your verbal or written request:



- The reason for wishing to schedule a meeting (E.g. "I'd like to request a date and time to meet with you and discuss House Bill 123.".)
- Be sure to mention that you are a constituent.

If you requested a meeting online, follow-up one week later to ensure your request was received by the individual in charge of scheduling; avoid sending multiple meeting requests through email.

Plan your meeting in advance

You will have limited time—maybe only 15 minutes—so it's important to be prepared. Review key talking points. Make an outline of what you want to present. This outline should include:

- An introduction and a statement of your meeting purpose with the legislator
- The issue you are supporting or opposing and how it impacts you (share your pain pain story)
- A request of the legislator. For example, asking him/her to support or oppose an issue or specific hill
- An offer to help the legislator. This is especially appreciated if they're committing to support legislation (they might ask you to testify at a hearing, find supporting facts or statistics, or help them identify other constituents with the same concerns)
- A thank you and closing statement

Personalize your message

When telling *your* story, emphasize how the issue at hand impacts you personally; note how a policy would benefit or hinder your life and chronic pain. Be prepared with a brief (90 second) "elevator speech"—one that explains your issue, the bill or issue you wish to discuss and what you want done. This will come in handy if the aide's schedule changes (which happens often) and only has a few moments to



hear your position. You may want to practice your personalized message out loud a few times so you feel comfortable speaking about your pain and the health care topic. Stand in front of a mirror or ask if you can practice with a friend/family member!

Be prompt and patient

Arrive on time. If meeting in person, ask ahead of time the exact meeting location (building, room/floor), parking information, mapping out how long it takes to arrive at the office and other logistical details. (If you have any mobility challenges or special accessibility needs, contact the office staff in advance to inquire about accommodations.)

Lawmakers' and aides' schedules are tight so be respectful of his or her time. In-district meetings offer better chances to meet face-to-face with the policymaker.

Be professional

First impressions are lasting. Dress business casual, even if you are meeting by videoconference! Greet the legislator or staff member with a smile. During the meeting, stick to the issue at hand, speaking calmly and with purpose; refrain from slang, jargon, or vulgar language. Legislators/aides are more inclined to listen to constituents who have a well-honed message and are courteous, and who call upon their own personal experiences to describe why the issue is so important to them. At the end, thank the legislator/aide for his or her time and consideration.

Follow up

Be sure to send a thank you email or letter to your legislator. A short, but meaningful message can let the legislator know that you are willing and available to work alongside them on a specific policy issue/bill, or future endeavors impacting the chronic pain community. This lets the elected official know that you can serve as an invaluable resource during the implementation of proposed measures and that he/she can call on you to weigh in on topics relevant to individuals living with chronic pain.



How a bill becomes law

The U.S. and state governments have three independent branches: legislative, executive, and judicial. You probably learned about the federal legislative branch, the U.S. Congress, in school. Although there are some commonalities, state legislative rules can vary widely. To find out more about your state's legislature, visit congress.gov/state-legislature-websites. However, the legislative process is basically the same at the state and federal level. All state legislatures except for Nebraska are bicameral meaning they have two chambers, a House of Representatives (or Assembly) and a Senate; both must pass legislation and be signed by the chief executive (President or Governor) in order for it to ultimately become law.

Drafting a bill at the state level

• A legislator must sponsor a bill in order for it to be considered by lawmakers. Additional legislators may co-sponsor the bill.

Introducing a bill

 When bills are formally introduced, they are assigned a bill number and referred to committee(s).

Bills referred to committee(s) of jurisdiction

- Committees may hold hearings on a bill, propose, and adopt amendments, and vote to report a bill favorably out of committee or they can let a bill die by failing to take action.

 Generally, most bills introduced in a state legislature have a hearing.
- If a bill is voted on and approved at the committee level, it is reported out to the next committee or to the full House or Senate for consideration.

Floor action on a bill

- Bills reported out of committee are placed on the House or Senate calendar for debate by the full chamber. Legislators that support and oppose a bill are given a chance to speak during the debate.
- If the bill is not placed on the calendar, then action may not be taken on the bill.
- When debate concludes, a vote is taken to either approve or defeat a bill.

Conference committee

- Conference committees work slightly differently in states, but the purpose is to ensure that the bills passed in both chambers of the state legislature are reconciled.
- Once differences are resolved, both chambers must again vote to approve the legislation.

Action by the executive

• When the governor receives a bill, he/she may sign, veto, and send it back to the legislature with suggestions for reconsideration, or take no action (this may lead to the bill becoming law after a

Four key times to advocate:

- During committee meetings
- Before key votes
- · During the budget process
- Before a bill reaches the executive



- specific period of time).
- If an executive vetoes a bill, the legislature may override the decision, often by a two-thirds vote in both the House and Senate.

Congressional process

Congress is the legislative branch of the federal government that represents the American people and creates laws that the nation must obey. It shares power with the executive branch, led by the president, and the judicial branch, whose highest body is the Supreme Court of the United States. The enactment of law always requires both chambers to separately agree to the same bill in the same form before presenting it to the President.

Introducing a bill at the federal level

 Only a member of Congress may introduce a bill. After it is introduced, the bill is assigned a designation number; only members of the House of Representatives may introduce bills concerning taxes.



Bills referred to committees

- The leader of the chamber in which the bill was introduced then refers the bill to an appropriate committee or committees.
- The committees can refer the bill to subcommittees for action, hearings, markup sessions, and votes; committees can also kill the bill by doing nothing at all ("pigeonholing").
- If the committee approves the bill, it is sent to the full House or Senate.

Floor debate and vote

- The full body debates the bill and then votes; the two houses differ in how they handle debate:
 - In the House, the Rules Committee has the power to limit debate and the number of amendments offered during debate. A vote in which every member's vote is recorded is called a Roll-Call Vote.
 - In the Senate, members are allowed to speak as much as they wish and to propose as many amendments as they wish. There is no Senate Rules Committee.

Conference committee

• The two houses often produce varied versions of a single bill. When this happens, both houses will appoint members to a conference committee, responsible for negotiating and reconciling the versions. Following the conference committee's report, both houses must vote on the new bill.

Action by the executive

• The president can sign or veto bills passed by Congress. If the president signs the bill, it becomes



law. If it is vetoed, it goes back to Congress, which can override the veto with a two-thirds vote in both chambers.

- If the president has not signed/vetoed after ten days while Congress is in session, the bill becomes law. If Congress has since adjourned the bill does not become law.
- Once law is enacted, Congress has the responsibility to provide oversight of policy implementation, and its committees take the lead in this effort.



Resources

U.S. Pain Foundation has compiled various templates and details specific to the legislative process at the state and federal level. As a leading volunteer that represents the chronic pain community, it is important to continue honing your skills and ability to serve as an effective advocate for the millions of Americans living with pain.

Online resources

- **Chronic Pain Fact Sheet** U.S. Pain Foundation's latest infographic relating to chronic pain facts. [bit.ly/2025painfactsheet]
- **Advocacy** Check the advocacy section of U.S. Pain's website for the latest online engagements, position statements, and more! [uspainfoundation.org/advocacy]
- **Events** Stay updated on upcoming events relevant to our volunteers and advocacy efforts. [uspainfoundation.org/events]
- **Living Well With Chronic Pain booklet** An educational guide aimed to help those within the chronic pain community, their caregivers, clinicians, and lawmakers understand the complex disease of chronic pain. [bit.ly/lwwcpain]
- **Resources** A collection of supportive resources can be found here. [uspainfoundation.org/resources]
- Materials Order free U.S. Pain Foundation educational materials and handouts to distribute.
 These can be especially helpful to bring to legislative meetings.
 [uspainfoundation.org/order-materials]

Social media platforms

Stay connected with the U.S. Pain Foundation and receive up-to-the-minute advocacy news and opportunities by liking and following us!



Facebook: @U.S.PainFoundation

Twitter: @US_Pain

Instagram: @us_pain_foundation

YouTube: bit.ly/USPainYT



Templates

| Sharing your story - template |
|---|
| My name is and I'm from [CITY/TOWN]. I live with, a [define the condition in or sentence]. I am also a volunteer advocate for the U.S. Pain Foundation. |
| *Give 1-2 examples of how you are affected by this condition; share how it impacts you on a personal, physical, social, emotional, and/or mental level. |
| I am here today to discuss [policy issue/bill]. As you may be aware, [insert 1-3 short facts about the issue/bill] |
| |

*If you've been personally impacted by this issue, if the proposed legislation would positively or negatively impact your life, express this here. (E.g. "If this legislation passes, I will be able to continue the medical treatment that has been keeping me stable and able to work, without negative interruptions to my therapy.")

As a person living with chronic pain and as your constituent, I'm asking that you [SUPPORT/OPPOSE] this [policy issue/bill]. This vulnerable population faces not only societal stigma, but daily challenges related to [policy issue/bill]. Your [SUPPORT/OPPOSITION] is a proactive step towards standing with children and adults living with debilitating and, in some cases, life-threatening diseases that cause pain. Thank you for taking the time to speak with me and hear my personal pain story. I am happy to serve as a resource as you consider making a decision on this topic.

*Should the legislator ask questions during or at the end of your story, don't be afraid to let them know that you'll get back to them with the information they are seeking.





Requesting a meeting - Letter/email template

[INSERT DATE]

The Honorable [INSERT LAWMAKER'S NAME] [INSERT OFFICE ADDRESS]

Dear [SENATOR/REPRESENTATIVE] [INSERT NAME],

I am a constituent and a volunteer advocate for the U.S. Pain Foundation. I am writing to respectfully request a meeting to discuss [**policy issue/bill number**] and how it impacts individuals like me, who live with a chronic condition that causes pain. As you may be aware, there are 50 million Americans living with chronic pain, including many in the state of [**insert state's name**]. I would greatly appreciate the opportunity to meet with you in person so you can learn more about this [issue/bill] and how it impacts the community you serve.

Please let me know, based on your schedule, a date and time in the near future to hold a conversation at your office. I will follow-up with your office in the next week or so to confirm receipt of this request. In the meantime, should you have any questions concerning [insert policy issue/bill number], please don't hesitate to contact me at your convenience. My number is [INSERT PHONE NUMBER] and my email address is [INSERT PRIMARY EMAIL ADDRESS].

Respectfully,
[INSERT FULL NAME]
[INSERT MAILING ADDRESS]

*To include your volunteer role/title within your request, please contact a member of the U.S. Pain Advocacy team.



Thank you note - template

[INSERT MAILING ADDRESS]



Glossary of legislative terms

Act: Legislation that has been passed by a legislative body and signed into law.

Adhere: A step in parliamentary procedure whereby one house of the legislature votes to stand by its previous action in response to some conflicting action by another chamber.

Adjournment: Termination of a session for that day, with the hour and day of the next meeting being set.

Adjournment sine die: Final termination of a regular or special legislative session.

Adoption: Approval or acceptance, usually applies to amendments, committee reports or resolutions.

Advocate: A person who publicly supports or recommends a particular cause or policy.

Aide: An assistant to a public official.

Amendment: The proposal by a member of a legislature to alter the wording of a bill under consideration.

Appeal: A procedure for testing, and possibly changing, the decision of a presiding officer.

Appropriation: Legislation that directs the spending of public funds during a certain period, usually the fiscal year.

Author: The person, normally a legislator, who presents a bill or resolution for consideration; may be joined by others who are known as coauthors.

Authorization: An act that creates or extends a program.

Bill: A proposed law that has not yet been passed.

Bipartisan: Having an affiliation or association with both political parties or caucuses.

Carry-over legislation: Legislation that is held over from the first year of a legislative biennium to the second year or from one session to the next session.

Caucus: An informal meeting of a group of members of a legislative body; sometimes convened based on interest or party affiliation.

Chamber: Official hall for the meeting of a legislative body (House/Senate). Also general name for both legislative houses of Congress.

Committee: A specialized subgroup of a legislative body established to consider and report on a specific area of legislation and to monitor the implementation of programs enacted.

Committee report: Official release of a bill or resolution from committee with or without a specific recommendation, such as "pass", "pass as amended" or "do not pass."

Committee substitute: A bill offered by a committee in lieu of another bill that was originally referred to the committee for consideration; an amendment to the original bill by the committee.

Concurrence (to concur): Action by which one house agrees to a proposal or action that the other chamber has approved.

Conference: A meeting between members of the House and Senate to iron out a compromise between different versions of a bill. Once a compromise is worked out, the conference report is voted upon for approval.

Constituent: A voter or elector who an elected official represents; a citizen residing within the district of a legislator.

Convene: When members of a chamber gather for the meeting of the legislature daily, weekly and at the



beginning of a session as provided by the constitution or law.

Died in committee ("bill dies"): The defeat of a bill by not returning it from committee to the chamber for further action.

Effective date: When a law generally becomes effective or binding, either upon a specific date in the law itself or a fixed number of days (depending on the state) after the final adjournment of the session during which it was enacted or on signature by the governor.

Engross: The process by which a bill is updated; incorporating adopted amendments and other changes into a bill as it makes its way through the Senate or House.

Enroll: The process of changing a bill passed by both chambers into its final format so that it's ready for transmission to the governor.

Executive session: A session that excuses all persons from the room other than members and essential staff personnel.

First reading: The first presentation of a bill or its title for consideration; the first reading is done at the time of introduction in some states.

Fiscal: Dealing with government revenue, especially taxes.

Fiscal note: The estimated dollar amount of increase or decrease in revenue or expenditures; includes the present and future implications of a piece of pending legislation.

Fiscal year: An accounting period of 12 months.

Floor: A colloquialism describing the interior meeting room of a legislative body; matters before the body are referred to as "on the floor" or "going to the floor."

Hearing: A meeting of legislators open to the public in which members of the public have the opportunity to voice support or opposition to a bill.

House: The generic term for a legislative body; shortened name for House of Representatives or House of Delegates.

Indefinite postponement: A motion used to kill a main motion without taking a direct vote on it;

Initiative: A proposal put directly before voters, bypassing the legislative process.

Legislature: The branch of state government responsible for enacting laws.

Lobbyist: A person paid to represent the interests of a group to the government.

Majority leader: A member of the majority political party designated to be a leader.

Measure: General term for a bill, resolution or memorial.

Minority leader: A member of the minority political party designated to be leader.

Motion: Formal proposal offered by a member of a deliberative assembly.

Officers: That portion of the legislature elected by its members to serve in positions of authority, such as Speaker of the House.

Petition: Formal request submitted by an individual or group of individuals to the legislature.

Policy: Courses of action, regulatory measures, laws and funding priorities concerning a given topic.

Postpone indefinitely: A means of disposing of an issue by not setting a date on which to consider it again.

Reading: The presentation of a bill before either house by reading the title thereof; a stage in the enactment of a bill.



Recess: Intermission on a daily session; intermission from one day to the next.

Referendum: The method by which a measure adopted by a legislature may be submitted to popular vote.

Repeal: A method by which a legislative action is revoked or annulled.

Resolution: A document that expresses the sentiment or intent of a legislature or a chamber that governs the business of the legislature or a chamber, or that expresses recognition by the legislature or a chamber.

Session: The period during which the legislature meets.

Sine die: Usually adjournment without a day being set for reconvening; final adjournment.

Special order: To set consideration of a bill or measure for a specific, future time of the session.

Sponsor: The person (usually a legislator) who presents a bill or resolution for consideration; may be joined by others, who are known as cosponsors.

Statute: A formal enactment of the legislature of a more permanent nature; used to designate written law. **Status of bill**: The progress of a bill at any given time in the legislative process. It can be in committee, on the calendar, in the other house, etc.

Strike out: The deletion of language from a bill or resolution.

Sunset: Expiration date of a measure.

Suspension of the rules: Parliamentary procedure whereby actions can be taken that would otherwise be out of order.

Testimony: A formal written or spoken statement given at a public hearing, forum or other meeting.

Title: The heading or preliminary part, furnishing the name by which the act is individually known.

Veto: An executive's formal disapproval of legislation, usually, an action of the governor or president to disapprove a measure.

Veto override: Vote by the legislature to pass a bill over a governor's or president's veto.

Vote: Formal expression of decision by the body.

Yeas and nays: Recorded vote of members on an issue.



Commonly used health & pain policy acronyms

ACA: Affordable Care Act

AHRQ: Agency for Healthcare Research and Quality

CARA: Comprehensive Addiction and Recovery Act passed by Congress in 2016. Legislation addressing substance use disorder with only one pain provision - Section 101, creating the Pain Management Best Practices Interagency Task Force.

CDC: Centers for Disease Control and Prevention **CMS:** Centers for Medicare & Medicaid Services

CURES Act: The 21st Century Cures Act passed in 2016 allocated funding for innovation at the NIH and FDA and state grants to tackle opioid abuse.

DOD: Department of Defense

FDA: Food and Drug Administration **FPRS:** Federal Pain Research Strategy

HEAL Initiative: Helping End Addiction Long-term Initiative - an investment to support pain and addiction research at the NIH that began in 2018.

HHS: Department of Health and Human Services

IOM: Institute of Medicine (now the National Academy of Medicine NAM)

IPRCC: Interagency Pain Research Coordinating Committee

NIH: National Institutes of Health

NPS: National Pain Strategy

PDMP: Prescription drug monitoring program

PMTF: Pain Management Best Practices Inter-agency Task Force - Congressionally mandated to write a report to Congress on current best practices in pain management delivered in 2019.

SUD: Substance Use Disorder

SUPPORT Act: The second large SUD legislation passed by Congress in 2018 with many pain provisions.

VA: Veterans Administration