Two Weeks. One Voice. One National Plan for Epilepsy.

12-Day Campaign to Increase Congressional Cosponsors for S.494 / H.R.1189

TOOL KIT

EMAIL/LISTSERVE:

Subject Line: Take 5 Minutes to Advance a National Plan for Epilepsy

[ORG NAME] is proud to stand alongside 150 epilepsy organizations nationwide in advocating for the passage of a National Plan for Epilepsy.

This bipartisan legislation - introduced by Senators Schmitt (R-MO) and Klobuchar (D-MN) and Representatives Costa (D-CA-21) and Murphy (R-NC-3) in February 2025 (S. 494 / H.R. 1189) - would establish a coordinated federal strategy to improve early diagnosis, advance precision therapies, strengthen care delivery, and reduce avoidable hospitalizations and long-term public health costs.

Since the introduction, **20 bipartisan Senators and 62 bipartisan Representatives have signed on in support.** Momentum is building - but more support is needed.

Congress turns over every two years, and as the 2026 midterm approaches, Members will soon shift their focus. Securing additional co-sponsors now is critical to maintaining progress and positioning this legislation for advancement.

We Need Your Voice!

We are asking every member of our community to take **less than five minutes** to contact your Senators and Representative and urge them to co-sponsor S. 494 / H.R. 1189. **Take action here: https://bit.ly/NP4E.**

Using this easy advocacy tool, you can:

- Enter your street address and zip code
- Automatically identify your Members of Congress
- Send a pre-drafted message
- Personalize it with your story as a person living with epilepsy, caregiver, clinician, researcher, or advocate

Members of Congress are far more likely to act when they hear directly from their constituents. If your Members have already signed on, you can send a message thanking them for their leadership.

This concentrated campaign will run from **March 23-April 3, 2026** and we hope a strong surge of outreach during this window will generate additional bipartisan support.

Take Action Here: https://bit.ly/NP4E

Together, we can help ensure epilepsy receives the coordinated national attention it deserves — accelerating research, improving care, and strengthening outcomes for millions of Americans. Thank you for taking action.

SOCIAL MEDIA:

Download different sized graphic for social media posts (Facebook, Instagram, X, and LinkedIn) in this public folder: National Plan for Epilepsy Weeks of Action Social Media Graphics

Sample Social Content for Facebook, Instagram, and LinkedIn:

150 epilepsy organizations are united behind the bipartisan #NationalPlan4Epilepsy Act (S.494 / H.R. 1189). We need your help to keep building momentum to move this legislation forward.

This bill will enable necessary federal coordination to facilitate better outcomes for people with epilepsy and prioritize development of more effective treatments.

Take 5 minutes to contact your members of Congress and ask them to sign on.

Your voice matters.

👉 Take action here: https://bit.ly/NP4E

Sample Social Content for X:

Epilepsy organizations are united behind the bipartisan #NationalPlan4Epilepsy Act (S.494 / H.R. 1189). We need your help to keep building momentum. Take 5 minutes to contact your members of Congress & ask them to sign on. Your voice matters. Take action: https://bit.ly/NP4E

NEWSLETTER:

Take Action: Support the National Plan for Epilepsy

The bipartisan National Plan for Epilepsy Act (S.494 / H.R.1189) would establish a coordinated federal strategy to improve early diagnosis, strengthen care systems, and accelerate precision therapies.

20 bipartisan Senators and 62 bipartisan Representatives have signed on — but more support is needed to advance the legislation.

It takes less than five minutes to contact your Members of Congress.

👉 Use our easy advocacy tool here: https://bit.ly/NP4E

If your Members have already signed on, please send a message thanking them for their leadership.

Your voice makes a difference.

KEY TALKING POINTS & SCRIPTS BY MESSENGER

FOR ANYONE:

- 3.4 Million Americans including 456,00 children and youth live with active epilepsy in the U.S.
- 1 in 26 people will develop epilepsy at some point in their lifetime.
- More than 30% of adults and 20-25% of children with epilepsy do not respond to current treatments.
- There are no biomarkers for the vast majority of the epilepsies and few effective technologies to track real-time patient data.
- Clinicians cannot predict drug efficacy, adverse side effects or long-term prognosis for any given person with epilepsy.
- Epilepsy can be fatal, with 1 in 1,000 people with epilepsy dying from Sudden Unexpected Death in Epilepsy (SUDEP) every year.
- The annual economic healthcare burden of epilepsy and/or seizures in the U.S. is $54 Billion.

FAMILIES & PEOPLE WITH EPILEPSY	CLINICIANS & RESEARCHERS
Provide 2-3 quick examples of your experience with epilepsy, such as: • Early coordination reduces hospitalizations and crisis care. • Precision therapies require national infrastructure to reach patients.	• Early diagnosis and coordinated care reduce ICU utilization and readmissions. • Precision medicine requires harmonized data and trial infrastructure.

• A National Plan protects progress beyond political cycles.	• National coordination improves workforce sustainability and efficiency. • Harmonized registries and standards increase research efficiency. • Coordinated infrastructure improves return on federal research funding. • Clear federal roadmap strengthens collaboration and translation.
I’m a constituent and the parent/person living with epilepsy. We experienced *[share a little about your experience, such as: hospitalizations and years before diagnosis]*. A National Plan would support earlier intervention and coordinated care that prevents crisis and reduces long-term healthcare costs. I respectfully ask the Representative/Senator to co-sponsor H.R. 1189/S. 494.	I am a clinician practicing in your district. I treat patients with epilepsy and see how fragmented systems drive avoidable hospitalizations and cost. A National Plan would support early intervention, precision medicine infrastructure, and coordinated standards of care. I urge co-sponsorship of H.R. 1189/S. 494.