

SITREP

MHA

MONTANA
HOSPITAL
ASSOCIATION

Montana Hospital Association - Situation Report

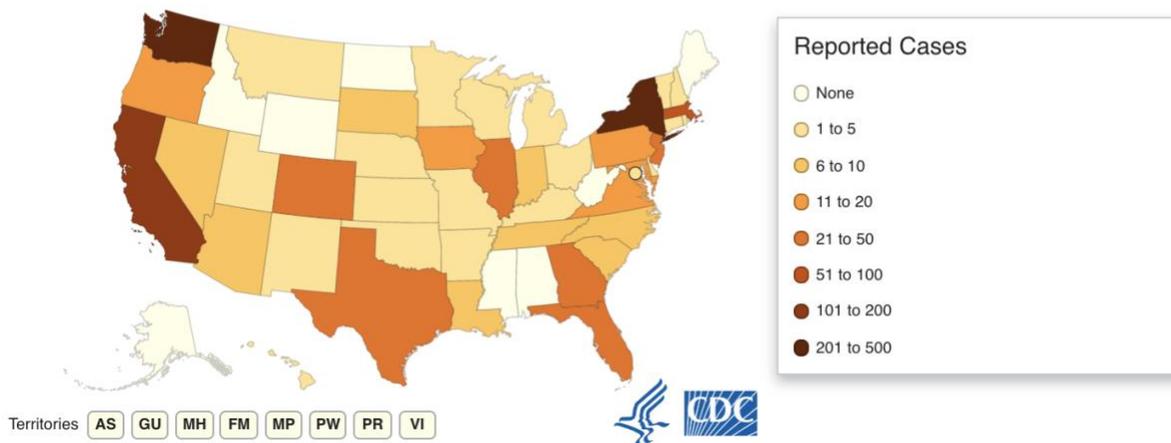
March 12, 2020

COVID-19

REPORTED CASES	
Montana <i>New since last report: 1*</i>	1*
United States <i>New in last 24 hours: +277 (+30%)</i>	1,215
WA	366
ID	0
WY	0
ND	0
SD	8

***The one case reported to date is a Montana resident with travel-associated illness and no documented exposures or close contacts in Montana.**

States Reporting Cases of COVID-19 to CDC*



Hospitals, nurses and physicians call for national emergency declaration. The AHA, American Nurses Association and American Medical Association today urged the president to declare the novel coronavirus (COVID-19) outbreak a disaster or emergency under the Stafford Act or the National Emergencies Act. This step is necessary to provide the Department of Health and Human Services (HHS) Secretary Alex Azar the authority to take critical actions, such as providing Section 1135 waivers, to ensure that health care services and sufficient health care items are available to respond to the COVID-19 outbreak.

OPERATIONS

Revised PPE Guidance. Based on local and regional situational analysis of PPE supplies, facemasks are an acceptable alternative when the supply chain of respirators cannot meet the demand. During this time, available respirators should be prioritized for procedures that are likely to generate respiratory aerosols, which would pose the highest exposure risk to healthcare professionals. Review the [new PPE recommendations](#) in the revised infection prevention and control recommendations released earlier this week.

Home Health & Dialysis Provider Guidance. CMS's [guidance to home health agencies](#) echoes recommendations set forth by CDC, with specific information on when it is safe to treat patients at home; when patients should be considered for hospitalization; and recommendations for family member exposure when evaluating and caring for patients with known or suspected COVID-19. For [dialysis centers](#), CMS advises the identification of high-risk individuals prior to appointments or upon arrival.

Community Mitigation Strategies. CDC [released strategies to slow the transmission of COVID-19](#), which will protect hospital capacity and access to patient care.

PLANNING

Hospitals are asked to enter bed availability and resource needs into the Juvare system. Please complete all daily updates by 10:00 AM each morning.

LOGISTICS

PPE: There are few if any remaining channels for providers to acquire additional PPE. Emergency stockpiles, when released, are limited and unlikely to cover all needs. Providers must take serious and severe steps to reduce need, control access and optimize use. Assess your PPE needs (try this [calculator](#) from DPHHS) and implement [N95 optimization strategies](#).

Staffing: The Montana Healthcare Mutual Aid System (MHMAS) exists to connect Montana hospitals in need of emergency staffing. Participation is completely voluntary. The Mutual Aid Agreement, which opens the door for being a partner in the system, establishes a standard process for requesting or providing assistance among Montana hospitals. The state recently revised the agreement and, as a result, hospitals must re-sign the new agreement to participate. Review the original spring [2019 MHMAS memo](#) for more info.

FINANCE & ADMINISTRATION

Cost-sharing for high-deductible health plans: IRS has released guidance to employers permitting the [waiving of cost-sharing for employees in high-deductible health plans](#).

No Telehealth? Virtual Check-ins Billable: Medicare [pays for “virtual check-ins”](#) for patients to connect with their doctors without going to the doctor’s office. These brief, virtual check-in services are for patients with an established relationship with a physician or certain practitioners where the communication is not related to a medical visit within the previous 7 days and does not lead to a medical visit within the next 24 hours (or soonest appointment available). Doctors and certain practitioners may bill for these virtual check-in services furnished through several communication technology modalities, such as telephone (HCPCS code G2012) or captured video or image (HCPCS code G2010).

COMMUNICATIONS

MHA’s Incident Management Team stands ready to connect you to the resources and information needed for your facility to respond and care for patients. Send an email to esf8@mtha.org.

REFERENCE LINKS

Contact Information: [Local & Tribal County Health Departments](#)

[State of Montana DPHHS COVID-19 Information](#)

[Centers for Disease Control and Prevention COVID-19 Information](#)

[Healthcare Professionals Preparedness Checklist](#) (CDC)

[Hospital Preparedness Tool](#) (CDC)

[Montana EMS Guidance](#) (DPHHS)

[EMTALA Requirements and Implications Related to COVID-19](#) (CMS)

Rev. 3/10: [Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed COVID-19 in Healthcare Settings](#)

Rev. 3/7: [Management of Healthcare Personnel with Potential Exposure to Patients with COVID-19](#) (CDC)

Rev. 3/7: [Clinical Guidance for Management of Patients with Confirmed COVID-19](#) (CDC)

Rev. 3/4: [Criteria for Evaluation and Reporting of Persons Under Investigation](#) (CDC)

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