SITREP

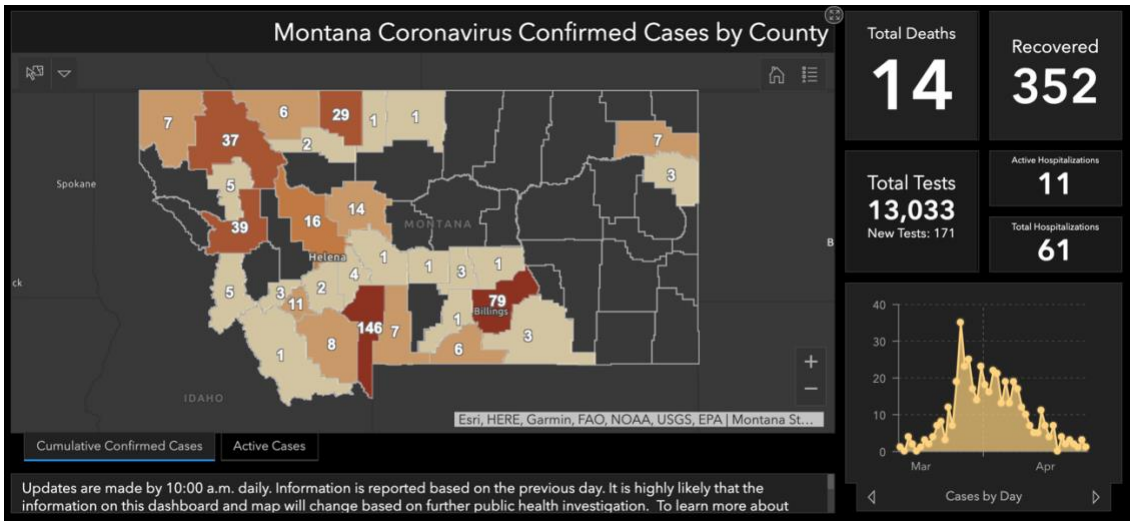
MHA Montana Hospital Association

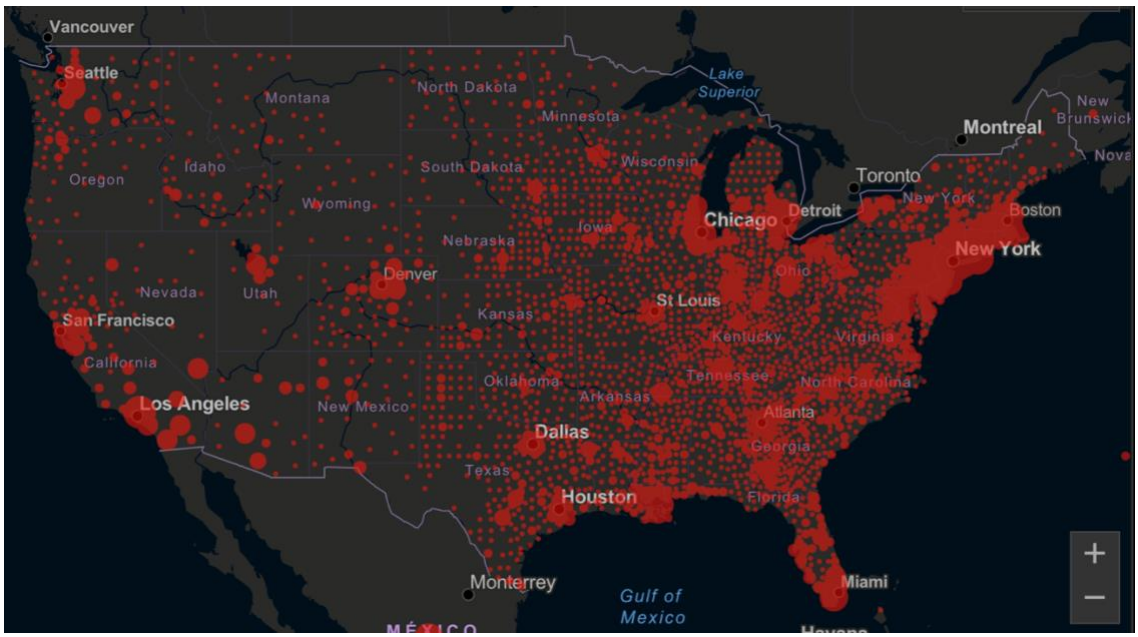
Montana Hospital Association - Situation Report

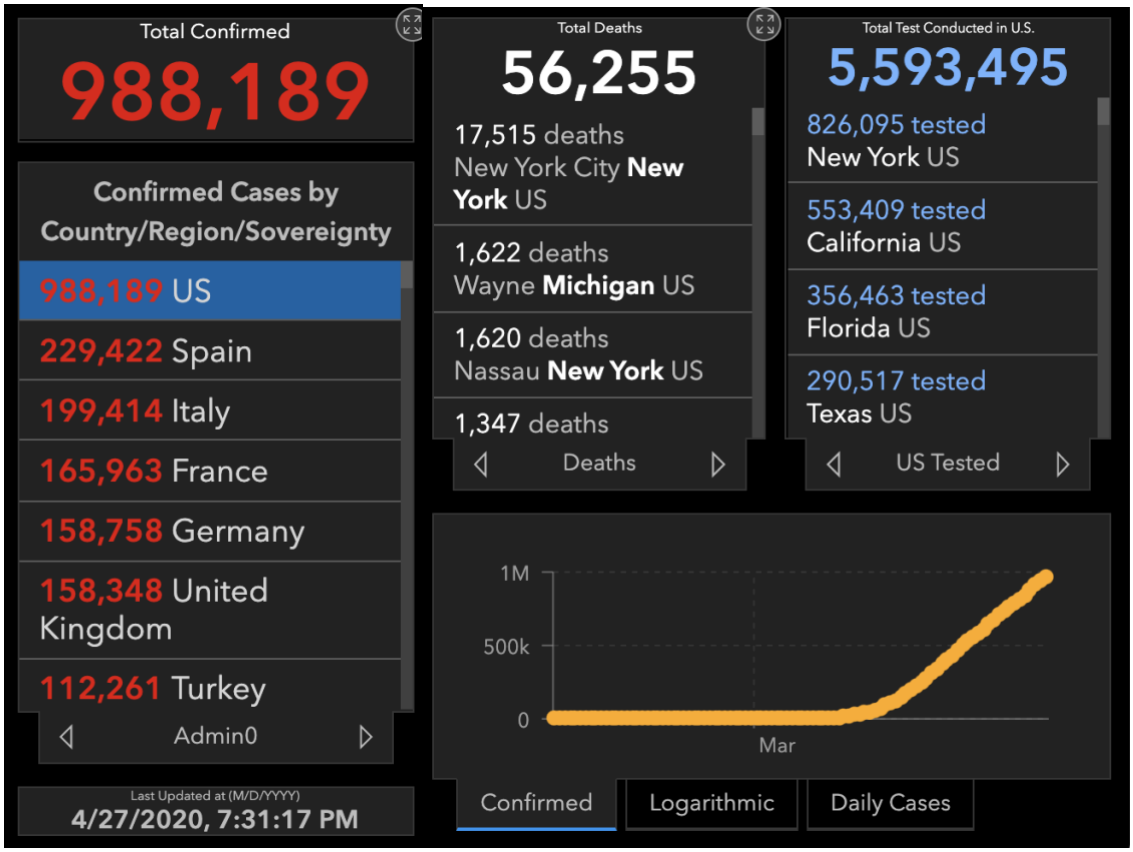
April 27, 2020

COVID-19

REPORTED CASES	
Montana ***New in last 24 hours: 1 (+less than 0.5%)*** ***Hospitalizations, Total: 61 (Last 24hrs: +0)*** ***Hospitalizations, Active: 11 (Last 24hrs: +0)*** ***Recovered: 352 (Last 24hrs: +13)*** ***Deaths: 14 (Last 24hrs: +0)*** **Source: Montana COVID-19 Dashboard**	**449**
United States ***New in last 24 hours: 22,247 (+2%)*** **Source: Johns Hopkins CSSE Global Outbreak Dashboard**	**988,189**
WA	**13,686**
ID	**1,897**
WY	**520**
ND	**942**
SD	**2,244**







OPERATIONS

CMS updates infection control guidance for home health agencies. Revised guidance includes additional information about CMS waivers and regulations; CDC guidance for optimizing personal protective equipment; CDC return-to-work criteria for healthcare personnel with confirmed or suspected COVID-19; and recommendations for home health personnel who care for patients in assisted and independent living facilities.

Catalogue of health agency guidance and government response. This newly updated catalogue from Wynne Health Group encapsulates and organizes relevant guidance for healthcare providers, insurers, state governments, public health agencies, and other stakeholders, as well as capture the status of major actions by the White House and Congress.

FDA reiterates need for caution in antimalarial treatments' off-label use for treating COVID-19. The FDA April 24 reminded healthcare providers of the need to closely monitor patients for serious and potentially life-threatening side effects of hydroxychloroquine and chloroquine when used off-label to treat COVID-19. In a Drug Safety Communication, FDA warned "adverse events were reported from the hospital and outpatient settings for treating or preventing COVID-19, and included QT interval prolongation, ventricular tachycardia and ventricular fibrillation, and in some cases death." FDA encourages healthcare professionals and patients to report adverse reactions or quality problems with any human drugs to the agency's MedWatch Adverse Event Reporting program.

LabCorp launches antibody tests nationwide. LabCorp has begun offering antibody tests for the virus that causes COVID-19 beginning, the company announced today. There will be no upfront out-of-pocket costs to people who receive an order for a test through a doctor or healthcare provider, including telemedicine providers. Antibody blood tests offered by LabCorp are administered across the U.S. at tens of thousands of doctors' offices and at LabCorp's nearly 2,000 patient service centers. Results will be available to the ordering healthcare provider within 1-3 days after the date of specimen pick up.

PLANNING

State of Montana announces changes, clarifies required data and resource reporting. In keeping with federal data reporting requests and requirements, and recognizing existing data collection systems already in place in Montana, DPHHS clarified data reporting by hospitals in this memo released April 16.

- Juvare/EMResource: Continue to report bed availability and ventilator capacity by 8:00 a.m. daily.
- PPE Survey Tool: PPE data will be reported to a new PPE Survey Tool instead of EMResource.
- COVID-19 Patient Survey Tool: Used to collect hospitalization data, and only to be used at the direction of DPHHS officials following acquisition of confirmed COVID-19 patient.

LOGISTICS

Postal Service revises mailing standards for certain substances. The U.S. Postal Service today released a temporary final rule updating its Hazardous, Restricted and Perishable Mail regulations for Category B infectious substances "to support the rapid deployment" of COVID-19 diagnostic tests through the mail during the public health emergency. In addition to updated packaging instructions, all shippers of COVID-19-related Infectious Substances Category B UN3373 must obtain authorization from the Postal Service prior to mailing, the rule states.

Submit PPE needs to DES coordinator in order to ensure allocation. In order to receive an allocation of emergency PPE, healthcare organizations MUST submit needs to their local DES coordinator. Allocation is ongoing and supplies are limited.

FINANCE & ADMINISTRATION

CMS reevaluates Accelerated Payment Program and Suspends Advance Payment Program. Over the weekend, CMS announced it is suspending its Advance Payment Program to Medicare Part B suppliers effective immediately. It is furthermore "reevaluating" the payment amounts to be paid through its Part A provider-focused Accelerated Payment Program (fact sheet). These programs—the latter of which having been recently expanded by the CARES Act—provide upfront loans to providers to expand cash flow that must ultimately be paid back.

The agency makes this announcement after having administered over $100 billion in funding through these programs since its initial expansion on March 28, 2020. The CARES Act directed CMS to expand the Accelerated Payment Program during the emergency period in terms of the range of providers eligible for payment and the payment amounts; however, the legislation did not explicitly require the agency to maintain the program throughout the entire duration of the public health emergency.

CMS states it is instead now looking primarily to the $175 billion in recently appropriated provider relief payments as a means for supporting providers' COVID-19 response efforts. By contrast, these provider relief payments will not need to be repaid. While the Accelerated and Advance Payment Programs were initially expanded as a means for increasing provider and supplier cash flow in the short term, CMS is opting now to prioritize administering payments through the provider relief fund, for which more detail on how the agency intends to direct funding is now available.

Of additional note, the agency has received considerable pushback from stakeholders on the interest rate of 10.25 percent attached to its Advance and

Accelerated Payment Program loans. Members of Congress and stakeholder groups both requested that CMS seek to waive or modify the interest rate amount. While CMS maintains it does not have the authority to make such changes, the agency, as stated above, is now aiming to support providers through funding awards that will not need to be repaid.

SBA resumes acceptance of PPP applications. SBA has resumed accepting PPP applications from eligible lenders, as of today at 8:30am MT. PPP loans are available through June 30, 2020, subject to funding. Updated FAQs (as of April 26) clarify SBA's interpretation of the CARES Act, which established PPP, and of PPP interim final rules on eligibility, lender and borrower requirements, maximum loan amount, use of PPP loans, and other issues.

HHS launches COVID-19 Uninsured Program Portal. Healthcare providers are eligible for reimbursement from the federal government for COVID-19 testing, treatment and related services provided to the uninsured. Starting today, providers, including hospitals and health systems, can register to participate with the Health Resources and Services Administration. This coverage of the uninsured was authorized and funded through the Families First Coronavirus Response Act and the Coronavirus Aid, Relief and Economic Security Act. More information regarding the program, including how to register, can be found here.

COMMUNICATIONS

Survey: Many older adults report delaying medical care. More than half of U.S. adults aged 70 and older have experienced a disruption in their medical care during the first month of social distancing for COVID-19, according to a new survey by NORC at the University of Chicago, the SCAN Foundation and John A. Hartford Foundation. An estimated 39% reported delaying or canceling a non-emergency medical treatment and 15% reported delaying or canceling an essential medical treatment. One in four said their healthcare providers had reached out to them since the outbreak began to check on their well-being outside of a normally scheduled appointment, and one in five reported having a telehealth appointment. Older adults viewed healthcare professionals and non-elected public health officials as the most trusted sources of information during the pandemic.

Call recordings and webinar playbacks. Missed a call or webinar promoted in MHA's daily COVID-19 Call & Webinar Alert? Many are recorded, and are posted here once available.

- New today: PARAHealthCare's COVID-19 Coding Q&A and Staying Financially Healthy whitepaper

COVID-19 Resource Library. MHA has built a library of helpful resources and sample material from other hospitals, healthcare organizations and states in their response to COVID-19. New additions today include:

- Infection Prevention & Control: CMS Infection Prevention & Control COVID-19 Surveys, COVID-19 Pandemic Plan
- General/Surge Planning: Surge SOP Staffing, Nursing Services Staffing Plan
- Clinical Care/Reopening: Guidance for Resuming Elective Procedures, AORN Roadmap for Resuming Elective Procedures
- Workforce Protection & Support: OSHA Reporting and Recordkeeping COVID-19
- PPE: CDC Donning-Doffing Videos

HHS hospital-specific COVID-19 questions: HospitalCOVID19@hhs.gov

SITREP Archive. Daily Situation Reports archived here.

State of Montana COVID-19 Hotline: 1-888-333-0461
Montanans can also email questions to covid19info@mt.gov. State public health officials will be responding to inquiries from 8 a.m. to 5 p.m. Monday to Friday.

MHA Incident Management Team: esf8@mtha.org

REFERENCE LINKS

GENERAL

Contact Information: County & Tribal Health Departments

Contact Information: County & Tribal DES Coordinators

MHA COVID-19 Member Resources

State of Montana COVID-19 Information

Centers for Disease Control and Prevention COVID-19 Information

Healthcare Professionals Preparedness Checklist (CDC)

Hospital Preparedness Tool (CDC)

COVID-19 FAQs for Healthcare Providers (CDC)

MHA Consensus Statement on the Cancellation of Elective Procedures

REV. 4/24/20: Summary of Funding Opportunities for Hospitals (MHA)

EMS

EMS Infectious Disease Playbook (ASPR/TRACIE)

Montana EMS Guidance (DPHHS)

REGULATORY

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

PHI Guidance for COVID-19 First Responders (OCR/HHS)

Summary of COVID-19 Emergency Declaration Waivers and Flexibilities (CMS)

Provider-specific Fact Sheets on Waivers and Flexibilities (CMS)

CLINICAL CARE

March 24 Memo to Montana Healthcare Providers on COVID-19 Testing (DPHHS)

Evaluating and Testing Persons for COVID-19(CDC)

Guidelines for Collecting, Handling and Testing Clinical Specimens (CDC)

March 26 Diagnostic Testing Update re: Swabs (FDA)

Clinical Guidance for Management of Patients with Confirmed COVID-19 (CDC)

COVID-19 and Underlying Medical Conditions (CDC)

FAQs: Higher Risk Persons & Underlying Conditions (CDC)

Discontinuation of Transmission-Based Precautions of Patients with COVID-19 (CDC)

Caring with Limited Resources during the COVID-19 Crisis (AHA)

Optimizing Ventilator Use during the COVID-19 Pandemic (HHS)

LONG-TERM CARE & RETIREMENT COMMUNITIES

Guidance for Retirement Communities and Independent Living (CDC)

Preventing the Spread of COVID-19 in Retirement Communities and Independent Living Facilities (CDC)

COVID-19 Checklist: Older Persons (CDC)

COVID-19 Long-Term Care Facility Guidance (CMS)

TELEHEALTH

Medicare Telehealth FAQ (CMS)

Montana Medicaid Coverage & Reimbursement Policy for Telehealth Services (DPHHS)

Telehealth Toolkit for General Practitioners (CMS)

Telehealth Toolkit for Providers of End-Stage Renal Disease Patients (CMS)

Watch: "COVID-19 Telehealth Waiver Made Simple" (PYA)

Telehealth Toolkit for Long-Term Care Nursing Home Facilities (CMS)

Informational Bulletin: Utilization of Telehealth for Treatment of SUDs (CMS)

Watch: CMS Telehealth FAQ video (CMS)

INFECTION PREVENTION & CONTROL

Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed COVID-19 in Healthcare Settings (CDC)

Additional Guidance for Infection Control and Prevention of COVID-19 in Home Health Agencies (CMS)

Additional Guidance for Infection Control and Prevention of COVID-19 in Dialysis Facilities (CMS)

Additional Guidance for Infection Control and Prevention of COVID-19 in Nursing Homes (CMS)

Additional Guidance for Infection Control and Prevention of COVID-19 by Hospice Agencies (CMS)

PPE

Strategies for Optimizing the Supply of PPE (CDC)

Strategies for Optimizing the Supply of N95 Respirators (CDC)

Extending the Use and/or Reusing Respiratory Protection During Disasters (APIC)

Temporary Enforcement Guidance – Healthcare Respiratory Protection (OSHA)

PPE Supply Equivalents & Price Guide (AHRMM)

Conserving Facemasks and Respirators During a Critical Shortage (TJC)

PPE Burn Rate Calculator (CDC)

PPE Emergency Use Authorizations (FDA)

Decontamination and Reuse of Filtering Facepiece Respirators (CDC)

WORKFORCE PROTECTION & SUPPORT

Management of Healthcare Personnel with Potential Exposure to Patients with COVID-19 (CDC)

Criteria for Return to Work for Healthcare Personnel (CDC)

Montana Hospital Mutual Aid System Memo & Agreement

COVID-19 Safety Training Resources (NIH)

COVID-19 and the American Workplace Toolkit (US Dept. of Labor)

Memo on Registration for Out-of-State Licensees (MT DLI)

FFCRA FMLA and Paid Leave FAQs (US DOL)

MHMAS Volunteer Registration System

COMMUNITY MITIGATION STRATEGIES

Mitigation Strategies for Communities with Local COVID-19 Transmission (CDC)

Tips to Keep Children Healthy While School's Out (CDC)

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