



Senators urge CMS to clarify cost reporting of PPP loans. Sens. Collins, Rubio, and Shaheen have sent a [letter](#) to CMS Administrator Seema Verma to address concerns regarding offsetting PPP funds on provider cost reports. "As the authors of the PPP, we assure you that such an offset would be directly contrary to Congressional intent and, if these reports are accurate, we respectfully request that you reconsider and reverse CMS' interpretation as soon as possible," they wrote.

Industry advocates are optimistic that concerns will be addressed either by guidance from CMS or a legislative solution.

OPERATIONS

HHS reports on Medicare primary care telehealth use during pandemic. Nearly 44% of primary care visits for Medicare fee-for-service beneficiaries were telehealth visits in April, up from 0.1% in February, according to a [report](#) released this week by HHS. Medicare fee-for-service telehealth visits for primary care climbed from about 14,000 per week before the COVID-19 pandemic to 1.3 million per week in April, HHS said. CMS has waived Medicare geographic and originating site restrictions on telehealth and expanded the list of telehealth-eligible services and practitioners during the emergency.

HHS Secretary Alex Azar [said](#) the report “shows that Medicare providers and beneficiaries rapidly embraced these new opportunities. The meteoric rise of telehealth during the pandemic has not only helped us combat the virus, but also prompted a new conversation around the future of patient-centered care.”

PLANNING

Assisted living data portal launched, submit data by August 3. A new [data collection website](#) enables licensed/registered/certified assisted living providers to share information requested by HHS for possible federal aid due to COVID-19. Please submit your data by 5 PM EDT August 3, 2020. Any licensed/registered/certified assisted living provider, including memory care and CCRCs, in the U.S. and its territories can submit data regardless of membership status.

HHS requests daily data reporting to TeleTracking. HHS recently [announced](#) significant changes to the process for hospitals to fulfill the agency’s request for daily data reporting on bed capacity, utilization, personal protective equipment (PPE) and in-house laboratory testing data. HHS notes it will no longer ask for one-time requests for data to aid in the distribution of remdesivir or any other treatments or supplies. This means that the daily reporting is the only mechanism used for the distribution calculations. For issues with accessing the TeleTracking portal or questions about the data, contact TeleTracking Technical Support at 1-877-570-6903.

Continue resource reporting to State. Until further notice, continue reporting the following data as follows. For questions, please contact your [Regional Coordinator](#).

- Hospitals: Continue reporting to Juvare/EMResource as follows:

- Daily: Bed and ventilator counts
- Weekly (every Friday): PPE
- Following treatment of COVID-19 patient(s): COVID-19 patient data, as directed by public health officials
- Long-Term Care Facilities: Bed and PPE counts to be reported weekly on Fridays. Use this [survey link](#) weekly to report bed and PPE data.

LOGISTICS

Submit PPE needs to DES coordinator in order to ensure allocation. Until further notice, healthcare organizations MUST [submit needs to their local DES coordinator](#) in order to receive an allocation of emergency PPE.

FINANCE & ADMINISTRATION

CMS releases ICD-10 codes for new COVID-19 therapies. CMS yesterday added [12 new ICD-10 procedure codes](#) to identify new therapies for COVID-19. These include remdesivir and convalescent plasma, as well as any future COVID-19 therapeutic that does not have a unique name. CMS also released a new ICD-10 Medicare Severity-Diagnosis Related Group Grouper software package ([Version 37.2](#)) to accommodate the new codes, effective for discharges on or after Aug. 1. The new codes will not affect the MS-DRG assignment.

Self-isolation counseling billable to CMS. CMS yesterday [announced](#) that payment is available for healthcare providers that offer self-isolation counseling to patients at the point of testing. CMS states providers will be able to bill existing evaluation and management (E/M) payment codes to receive reimbursement for these counseling services. Providers will be able to furnish such services regardless of where the COVID-19 test is administered (including, for example, doctor's offices, urgent care clinics, hospitals, community drive-thru pharmacy sites, etc.). Additional information and resources are available in the [Counseling Check List](#).

CMS extends deadline to submit occupational mix surveys. CMS has [extended](#) to Sept. 3 the deadline for hospitals to submit their 2019 occupational mix surveys and supporting documentation to their Medicare administrative contractors in response to continued COVID-19-related concerns about meeting the Aug. 3 deadline. Hospitals then may submit any needed revisions to their survey to their MAC by Sept. 10, CMS said.

COMMUNICATIONS

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.

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.

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 lists and general sources of information on a wide range of COVID-19-related issues

[MHA COVID-19 General Resources page](#)

CLINICAL OPERATIONS

Resources on infection prevention and control, EMS operations, telehealth operations and care for specific populations from federal and state resources

[MHA COVID-19 Clinical Operations page](#)

LONG-TERM CARE & RETIREMENT COMMUNITIES

CDC and CMS resources specific to maintaining safe conditions in long-term care and retirement communities

[MHA COVID-19 Long-Term Care & Retirement Communities page](#)

SUPPLY CHAIN RESOURCES

Resources from AHRMM, AHA, Intalere, CDC and other sources on sourcing, conserving and properly using PPE

[MHA COVID-19 Supply Chain Resources page](#)

WORKFORCE PROTECTION & SUPPORT

MT DLI, CDC, OSHA and NIH toolkits, FAQs and other resources to protect employees and allow staff to return to work

[MHA COVID-19 Workforce Protection & Support page](#)

COMMUNITY MITIGATION STRATEGIES

CDC resources on community mitigation strategies

[MHA COVID-19 Community Mitigation Strategies page](#)

FINANCE & ADMINISTRATION

Guidance, fact sheets and other resources on regulatory waivers and flexibilities in addition to catalogued financing information related to the CARES Act and other COVID-19 funding assistance

[MHA COVID-19 Finance & Administration page](#)

COMMUNICATIONS

Archive of MHA COVID-19 related communications as well as sample communications documents, toolkits and other resources from state and national levels

[MHA COVID-19 Communications page](#)

TESTING

FAQs, recommendations and other CDC, FDA and MT DPHHS resources related to COVID-19 testing

[MHA COVID-19 Testing page](#)

PLANNING

Best practices and planning documents from CDC, facilities on the front lines and MT DPHHS

[MHA COVID-19 Planning page](#)

