

# SITREP



MONTANA  
HOSPITAL  
ASSOCIATION

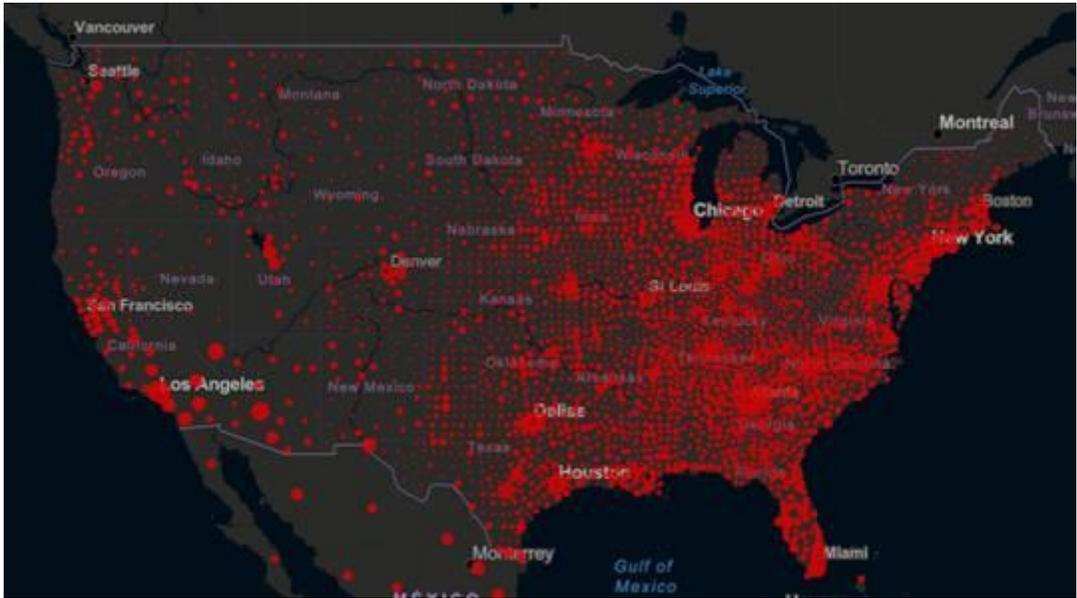
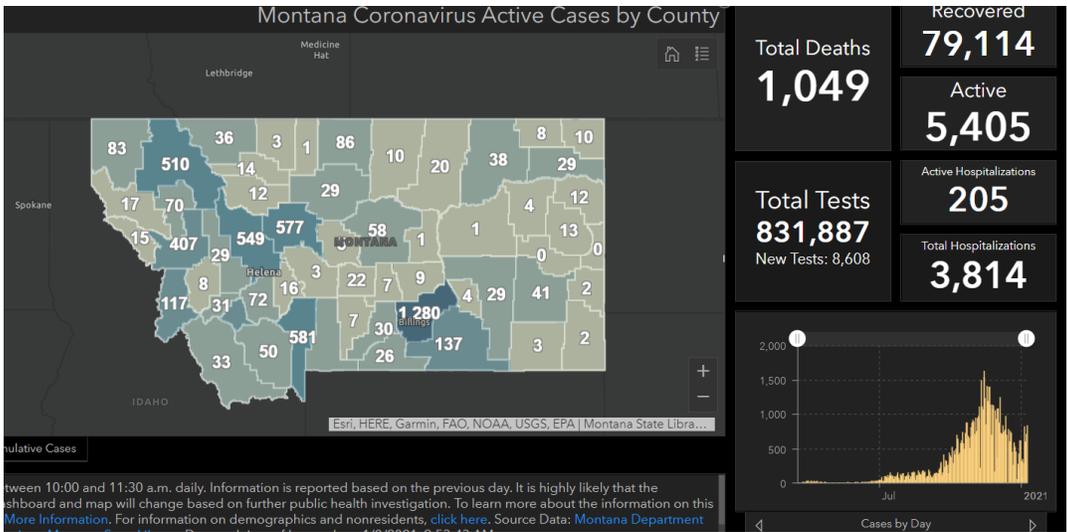
Montana Hospital Association - Situation Report

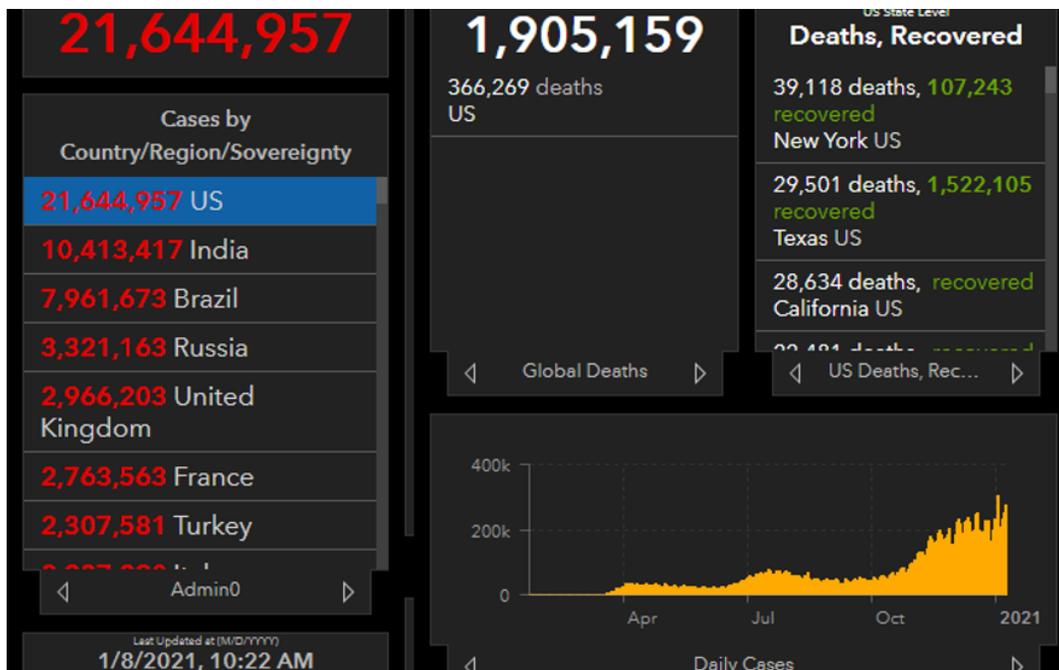
January 8, 2021

## COVID-19

REPORTED CASES	
<b>Montana</b> <i>New in last 48hrs: 1,508 (+less than 1% avg. growth per day)</i> <i>Active Cases: 5,405 (+474)</i> <i>Recovered: 79,114 (+1,000)</i> <i>Hospitalizations, Total: 3,814 (+76)</i> <i>Hospitalizations, Active: 205 (+14)</i> <i>Deaths: 1,049 (last 48hrs: +34)</i> Source: <a href="#">Montana COVID-19 Dashboard</a> (Updated 10:00 a.m.)	<b>85,568</b>
<b>United States</b> <i>New in last 48hrs: 575,515 (+1% avg. growth per day)</i> Source: <a href="#">Johns Hopkins CSSE Global Outbreak Dashboard</a>	<b>21,644,957</b>
<b>WA</b>	<b>264,012</b>
<b>ID</b>	<b>147,173</b>
<b>WY</b>	<b>46,168</b>
<b>ND</b>	<b>94,438</b>
<b>SD</b>	<b>102,132</b>

See the latest Montana reports on [COVID-19 in Schools](#), [COVID-19 in LTC and Assisted Living](#), [Hospital Occupancy and Capacity](#) and the latest [State COVID-19 Epi Profile](#).  
Source: [State of Montana DPHHS COVID-19 Demographics Webpage](#)





## OPERATIONS

**CDC reports on allergic reactions to COVID-19 vaccines.** The CDC on Tuesday Dec. 5 [reported](#) 21 cases of anaphylaxis, among the nearly 1.9 million people who received a first dose of the Pfizer COVID-19 vaccine between Dec. 14 and 23. About 71% of the 21 cases associated with the Pfizer COVID-19 vaccine occurred within 15 minutes of vaccination. One case of anaphylaxis was reported among more than 224,000 people who received a first dose of the Moderna COVID-19 vaccine over the same period, the report notes. Confirmed anaphylaxis cases for both vaccines currently total 29, officials said. CDC plans to release more information as it becomes available.

## PLANNING

**HHS issues updated COVID-19 data reporting guidance.** HHS on Nov. 9 updated its [guidance to hospitals](#) on the reporting of COVID-19-related data. The guidance includes two key changes stemming from the CMS' Dec. 2 [interim final rule](#) expanding the requirement for hospitals to report COVID-19 data. Influenza data fields will be mandatory starting on Friday, December 18. Therapeutic data fields are now mandatory beginning today, January 8.

**HHS data reporting platform - Single data entry fulfills state and federal requirements.** MHA has purchased a new HHS Data Reporting Platform with

COVID-19 grant funding. This creates a single, secure data entry point to fulfill both state and federal requirements, including state PPE resource allocation and HHS Teletracking mandates. This single-entry system is especially critical with CMS' rules that require such reporting as a Condition of Participation for Medicare and Medicaid. Hospitals will face possible termination of Medicare and Medicaid payments if unable to correct reporting deficiencies. See the complete details on the new platform [here](#).

**As of September 8, 2020 hospitals should utilize EMResource for statewide bed availability, PPE and Remdisivir data, as well as, all TeleTracking data points, including HHS lab testing.** Upon entering HHS data into EMResource, Juvare will automatically upload data to TeleTracking on behalf of your facility daily. Facilities may continue entering their own data into TeleTracking if they choose. All laboratories conducting COVID-19 testing and reporting patient-specific results – including hospital labs, nursing homes, and other facilities conducting testing for COVID-19 – will be required to comply. If a laboratory does not report the required information, CMS will impose a civil monetary penalty in the amount of \$1,000 a day for the first day, and \$500 for each subsequent day.

**As of October 1, 2020 long-term care facilities must report all PPE and bed reporting to EMResources.** The previous weekly is inactive on October 1, 2020. Facilities that need assistance should email [hppcoordinators@mtha.org](mailto:hppcoordinators@mtha.org).

For questions, please contact your [Regional Coordinator](#).

## 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 AND ADMINISTRATION

**CDC allocates \$22B for COVID-19 testing, vaccination; M.T. to receive over \$70M.** The CDC on Wednesday, Dec. 6 allocated \$22 billion in funding to states, localities and territories for COVID-19 testing and vaccination activities authorized in December by the Coronavirus Response and Relief Supplemental Appropriations Act. Most of the funding (\$19.1 billion) will [support testing](#), and

the rest [vaccination activities](#). Montana's allocation is listed as \$61,517,133 to support testing and \$9,657,321 for vaccination activities.

**CMS updates FAQs on maintaining Medicaid enrollment during COVID-19 emergency.** CMS on Wednesday, Dec. 6 released [updated guidance](#) in response to questions on maintaining Medicaid enrollment during the Public Health Emergency under its interim final rule implementing Section 6008 of the Families First Coronavirus Response Act, which authorizes states to claim a temporary 6.2 percentage point increase in the federal medical assistance percentage if they satisfy certain conditions.

**Study looks at impact of Medicaid expansion on hospital finances.** States' decisions to expand Medicaid may have important implications for their hospitals' financial ability to weather the COVID-19 pandemic, according to a study published Tuesday, Dec. 5 in Health Affairs. The [study](#) found that the early positive financial impact of the ACA's Medicaid expansion was sustained in fiscal years 2016 and 2017 as hospitals in expansion states continued to experience decreased uncompensated care costs and increased Medicaid revenue and financial margins.

"As COVID-19 has brought hospitals to a time of great need, findings from this study provide important information on what hospitals in states that have yet to expand Medicaid could gain through expansion and what is at risk should any reversal of Medicaid expansions occur," the authors said.

## COMMUNICATIONS

**New edition of AHA COVID-19 Snapshot highlights challenges facing hospitals.**

The AHA today released the latest edition of the [COVID-19 Snapshot](#), which highlights the critical needs of hospitals and health systems during the deepening public health emergency. The Snapshot combines important data points with news articles and testimonials from the field to underscore the importance of providing hospitals and health systems with additional resources and support so they can continue to deliver care to patients and families.

**CDC updates COVID-19 Vaccination Communication Toolkit.** The CDC recently updated its [COVID-19 Vaccination Communication Toolkit](#) for medical centers,

clinics, and clinicians. Resources include social media resources, videos and FAQs as well as other digital and print resources.

**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](mailto: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](mailto: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](mailto: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](#)

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