



# IROQUOIS

Healthcare Association

**To:** IHA Members

**From:** Gary J. Fitzgerald, *President & CEO*

**Date:** April 8, 2020

**RE:** COVID-19 Member Update: State Update, New Guidance & Cost Survey Tool

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IHA continues to be in contact with our allied associations, DOH, the Governor's office and state lawmakers to address ongoing hospital concerns related to the coronavirus (COVID-19) pandemic.

We have created a dedicated email address - [covid@iroquois.org](mailto:covid@iroquois.org) - for you to **share REQUESTS, IDEAS, and CONCERNS that we will communicate directly to state and federal government.**

**Let us know** what best practices and processes your hospital has implemented to combat coronavirus.

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## FEDERAL COVID-19 UPDATE:

Below, please find the latest federal COVID-19 updates.

- **HHS to Waive Enforcement of certain HIPAA Provisions** - 4/2
  - The HHS Office for Civil Rights will not penalize health care providers or their business associates for good faith uses and disclosures of protected health information to CDC, CMS, state and local health departments, and state emergency operations centers will help with the exchange of information to flatten the curve. Current regulations allow a HIPAA business associate to use and disclose protected health information for public health and health oversight purposes only if expressly permitted by its business associate agreement with a HIPAA covered entity.
- **Medicare Payments**
  - The Centers for Medicare and Medicaid Services said it has distributed \$34 billion to health care providers and suppliers in the past week through its Accelerated and Advance Payment Program. It released a **fact sheet** explaining eligibility and repayment rules.

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## STATE COVID-19 UPDATE:

While the number of COVID-19 hospitalizations in New York have declined, the number of COVID-19-related deaths continue to rise. This week, New York has seen the highest one-day total of COVID deaths although the Governor announced today he believes New Yorkers are flattening the curve.

The Javits Center and USNS Comfort, originally designed to treat non-COVID patients, have been converted to COVID-19 facilities taking pressure off the healthcare system downstate.

Last week, Governor Cuomo announced he would be issuing an Executive Order taking 20% of unused ventilators and other equipment from upstate hospitals and deploying the National Guard to transport them to downstate entities with a critical need.

Since then, the Governor announced New York would be receiving 1,000 ventilators from China and hundreds more from California, Oregon and Washington.

At the same time, IHA collaborated with HANYS to avoid any Executive Order and initiated a voluntary effort among upstate hospitals. Through this effort, we have been able to identify an additional 300 ventilators available for downstate providers. However, no plans have been made to move these ventilators at this time.

Governor Cuomo did issue an [Executive Order](#) yesterday giving authority to DOH to shift urgently needed supplies held in inventory of any entity in the state to areas where there is immediate need; however, he made no reference to a 20% metric goal or the National Guard.

The Executive Order also includes a provision allowing recent medical school graduates from accredited programs, who have been accepted for residency, to begin practicing under the supervision of a physician.

The New York State Department of Health has released a new [COVID-19 tracker](#) including a county-by-county breakdown of testing and positive cases around New York State. The tracker includes demographics related to COVID-19 fatalities.

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## HOSPITAL FINANCING:

Earlier this week, IHA along with HANYS, Pandion Optimization Alliance, Suburban Hospital Alliance and Western NY Hospital Association, [sent a letter](#) to Governor Cuomo urging him to mandate commercial health insurers to financially support New York hospitals and health systems in the midst of COVID-19.

The letter provides recommendations for health plan cash flow including:

- Health plans should be required to pay a minimum percentage of hospital accounts receivables immediately;
- Health plans should be required to pay periodic interim payments to hospitals based on historic payment levels;
- Health plans should be required to suspend administrative denials.

Additionally, a dozen major insurance plans in the state with Medicare Advantage products will help reduce the administrative burden on hospitals during this time by following regulatory changes put forth in [DFS Circular Letter No. 8](#).

The DFS letter suspends a number of administrative requirements for the duration of the COVID-19 emergency, including certain utilization review and emergency admission notification requirements for healthcare providers. Previously, these changes had only applied to insurance products regulated by the state.

The plans that are applying the circular letter guidance to their Medicare Advantage products include Aetna, CDPHP, EmblemHealth, Empire BlueCross BlueShield, HealthPlus, Fidelis, Healthfirst, HealthNow, Independent Health, MetroPlus, MVP, UnitedHealth and WellCare.

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## IHA/HANYS COVID-19 COST SURVEY TOOL:

HANYS, in coordination with IHA, reached out to Chief Financial Officers on March 27 to collect extraordinary hospital and health system cost information associated with the COVID-19 pandemic.

If you have done so already, please follow the below instructions to access the cost tool and begin your submission.

The cost reporting tool is web-based and login information from "Okta," our secure login vendor, was sent out to hospital and health system CFOs.

- **CFOs:** If you intend to complete the tool yourself, please create an account by following the instructions received in the March 27 email from Okta. If you prefer to designate someone else to fill out the tool, please send that individual's name and email address to HANYS at [covid19survey@hanys.org](mailto:covid19survey@hanys.org). Once received, login

information will be directed to the designee as required by the Okta security protocol.

- Please note that in circumstances where there is an overarching health system CFO and a CFO at an individual hospital, both individuals are provided access to the tool and we are asking that you coordinate your submission(s).

We understand that your resources are limited, but ask that you make every effort to enter information into this tool **by Friday, April 10** (for the period Jan. 1 through Mar. 31).

If ongoing collection of cost data is required (as we expect), we will ask for cumulative to-date spending to allow initial estimates to be revised and new costs to be captured.

If you need any further assistance with the survey please contact Bob McLeod, HANYS Director of State Fiscal Policy and Special Studies at [bmcleod@hanys.org](mailto:bmcleod@hanys.org) or (518) 431-7908.

## CMS COVID-19 UPDATE:

Below, please find the latest CMS COVID-19 updates.

- [Letter to Clinicians Outlining Regulatory Flexibilities](#) - 4/7
  - A CMS letter to clinicians summarizes regulatory actions to reduce barriers to providing patient care during the COVID-19 outbreak. The summary includes information about telehealth and virtual visits, accelerated and advanced payments, and recent waiver information.
- [Guidance for Ambulatory Surgical Centers Temporarily Enrolling as Hospitals](#) - 4/3
- [1135 Blanket Waivers](#) - Updated 4/3

## FEMA FUNDING ASSISTANCE:

NYS DHSES is conducting additional [web briefings](#) describing FEMA Public Assistance funding eligibility and request process. Hospitals should submit a [request for public assistance](#) (RPA) form through the FEMA grants portal. If the facility does not have a FEMA grants portal account, RPA forms may be submitted to NYS DHSES via email to: [patricia.debboli@dhSES.ny.gov](mailto:patricia.debboli@dhSES.ny.gov). DHSES will create an account on the applicant's behalf. For additional information, see [NYS DHSES Disaster Declarations](#).

## HOSPITAL PREPAREDNESS PROGRAM GRANT:

NYSDOH has approved a contract amendment providing an additional \$5,000 to each participating hospital. Hospitals are now eligible for \$45,000 in reimbursement through their deliverable based contract.

In addition, the amendment waives all incomplete deliverables for the 2019-20 contract period ending June 30th. NYSDOH will reimburse hospitals instead for responding to COVID-19 HERDS surveys. Hospitals may submit a final voucher claiming the entire remaining balance of up to \$45,000.

## STAFFING/WORKFORCE:

IHA is hosting weekly calls with Human Resources professionals from our member hospitals and health care systems in order to prepare for the apex of COVID-19.

Below, please find an agenda and details for our next HR call taking place **April 10 at 1:00pm**.

- IHA COVID-19 Update
- Recap of April 3 Call

- Update on Workforce Staffing
  - Furloughs
  - Unemployment
  - Paid Family Leave
  - Staff Leasing
- New and Member-Identified Issues
- Open Discussion

Hospitals from the Pandion Optimization Alliance in Rochester have also been invited to participate.

## DIAL-IN INFORMATION:

- Topic: **Weekly COVID-19 Impact on Hospital Staffing & Workforce**
- Date: **Friday, April 10 at 1:00pm**
- Dial-in Number: **(855) 834-4733**
- Conference Code: **6269512**

Please note, you may wish to dial-in at least 10 minutes before the start of the call due to high call-in volume.

If you plan to participate in the call, please RSVP to Denise Foeder at [dfoeder@iroquois.org](mailto:dfoeder@iroquois.org) or (315) 410-6468 by 11am on Friday, April 10.

## PPE, SUPPLIES & OTHER EQUIPMENT:

### UISS/Premier Members

[Click here](#) to logon the website to get the latest Supplier updates from Premier's Disaster Preparedness and Response Community.

**Premier Letter to Suppliers** - On behalf of its members, Premier has asked its contracted suppliers for payment flexibility. Read [Premier's letter to its suppliers here](#).

### COVID-19 Weekly Update Call Reminder

Premier hosts a weekly call with the latest information relating to COVID-19. Wednesdays @ 1-2:00 p.m. EDT  
Dial-In Number: (800) 931-6428

### UISS/Premier & Non-Premier Members

Find information on Supplier updates below:

**Cardinal** - Updates to their inventory management of the following product categories: [Enteral Feeding Sets](#), Pumps & Tubes, [Hot & Cold Packs](#), [Protexis Surgical Gloves](#), and [Lab Products](#).

**B. Braun** - As a result of COVID-19, hospital staff do not have enough pumps to meet the increased patient population and acuity. Therefore they must move some of their patients off of Pumps and onto [Gravity Flow](#) and [Rate Flow](#) IV Sets. B. Braun has created the two documents listed below that clinicians can use when administering fluids/medications to patients on Gravity and Rate Flow IV Sets.

**TMG** - TMG's [rapid decontamination systems \(RDS\)](#) are now on contract. These systems prevent the spread of infections by terminating pathogens in 30 seconds. They are designed to clean electronics, patient tools, personal effects and patient supplies, including both fixed and mobile applications and wired and wireless devices.

**Diversey** - Diversey acknowledges that all manufacturers are finding challenges with adequate inventories to manage the demand. Diversey has developed some guidance for cleaning if there are no disinfectants available.

- [Technical Bulletin](#) on recommendations for performing discharge cleaning of COVID-19 isolation patient rooms
- [Alternative cleaning options](#) with disinfectants are not available
- [Possible Protocols](#) for Limited Alcohol-based Hand Sanitizer and/or disinfectants
- [Recommended steps](#) for Isolation Room Discharge Cleaning

**Abbott Nutrition** - [Gravity Feeding Tool](#) offered by Abbott for gravity feeds.

## NEW COVID-19 GUIDANCE:

Below, please find the most recent guidance on infection prevention and control, reimbursement, patient evaluation, PPE and supplies, and other issues.

### Situational Awareness

- [CDC | COVID View](#)
  - Weekly surveillance report summarizes key indicators including outpatient and ED visits, hospitalizations, deaths, and laboratory data
- [NYS COVID-19 Tracker](#)
  - County-level breakdown of testing and positive cases in NYS

### Hospital Operations

- [NYSDOH | Advisory on Hospital Discharges and Admissions to ACFs](#) - 4/7
- [NYSDOH | eFINDS Web Application Training](#) - (On-Demand, 20 mins)
- [CDC | Strategies to Mitigate Healthcare Staffing Shortages](#) - Updated 4/3
- [HHS | Healthcare Management Checklist for Teleworking Surge](#) - 4/1
- [ASHE | Options for Converting Alternate Care Sites to Patient Spaces](#) - Updated 4/7

### Clinical

- [CDC | Clinical Care Guidance](#) - Revised 4/3
- [CDC | Training for Healthcare Professionals](#) - 4/6
- [CDC | Information for Healthcare Professionals: Underlying & High Risk Conditions](#) - 4/6
- [CDC | Healthcare Infection Prevention and Control FAQs](#) - Updated 4/1
- [NYSDOH | Weekly Update to Healthcare Providers](#) - 4/2
- [HHS | CHEMPACK Medications for ICU and Ventilator Care of COVID-19 Patients](#) - 4/2

### Diagnostic Testing

- [FDA | FAQs on Diagnostic Testing](#) - Updated 4/7
- [FDA | Diagnostic Emergency Use Authorizations](#) - Updated 4/7
- [CDC | Interim Laboratory Biosafety Guidelines](#) - Updated 3/31
- [CDC | Information for Laboratories](#) - Updated 3/31

### PPE & Medical Supplies

- [FDA | Guidance on Infusion Pumps and Accessories](#) - Issued 4/5
- [FDA | FAQs on Shortages of Surgical Masks and Gowns](#) - Updated 4/5
- [FDA | EUA: Non-NIOSH-Approved Respirators Manufactured in China - List of Authorized Respirators](#) - Issued 4/3
- [FDA | Guidance on Face Masks and Respirators](#) - Revised 4/2

- [CDC | PPE Burn Rate Calculator](#) - Updated 4/7
- [CDC | Strategies for Optimizing Supply of N95 Respirators](#) - Updated 4/3
- [HHS | CHEMPACK Medications for ICU and Ventilator Care of COVID-19 Patients](#) - 4/2
- [ECRI | Clinical Evidence Assessment: Safety of N95 Extended Use and Reuse](#) - 4/1

## Non-Acute Care

- [NYSDOH | Advisory: COVID-19 Guidance for Dialysis Treatment](#) - 4/7
- [NYSDOH | Advisory on 1135 Waiver for Nursing Home Feeding Assistants](#) - 4/7
- [NYSDOH | Advisory on 1135 Waivers for Nursing Home Staffing](#) - 4/4
- [NYSDOH | Guidance for Adult Care Facilities and Nursing Homes](#) - 4/4
- [CDC | Guidance for Outpatient and Ambulatory Care](#) - 4/7
- [CDC | Discontinuation of Home Isolation for Persons with COVID-19](#) - Updated 4/4
- [CDC | Guidance for Pharmacies](#) - 4/3

## Medicaid

- [NYSDOH | Suspended Health Plan Utilization Review Requirements](#) - 4/3
- [NYSDOH | Guidance for Medicaid Pharmacies](#) - Updated 4/6
- [NYSDOH | COVID-19 Guidance for Medicaid Providers](#) - Updated Frequently

## HERDS SURVEYS/CALLS:

The daily COVID-19 Patient and Bed Summary Survey opens at 12:00 noon and closes at 4:00 pm. DOH continues to hold a mandatory call once a day at 12:00 noon to brief hospital leadership and data reporters on issues with data and survey completion and communicate any changes or directions for that day's survey (**Call-in number: 844-467-8050**).

Survey questions continue to evolve to meet planning and operational needs. Please be sure to read the survey guidance each day for any new questions and information on how to enter data. Questions may be submitted by email to: [hospinfo@health.ny.gov](mailto:hospinfo@health.ny.gov).

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Iroquois Healthcare Association | (518) 383-5060 | [www.iroquois.org](http://www.iroquois.org)

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