IHA’s Daily Briefing: June 3

Wednesday, June 3, 2020

IDPH Notice re: Elective Inpatient Surgeries and Procedures
Today is Deadline for Provider Relief Fund Application
CMS Guidance on Optional Uninsured COVID Testing Coverage
State, National, Global COVID-19 Update
Register: Free IHA Webinar Series on Antibiotic Stewardship
Briefly Noted

IDPH Notice re: Elective Inpatient Surgeries and Procedures
This morning, the Illinois Department of Public Health (IDPH) sent hospitals a notice (click here) via SIREN concerning the specific circumstances and metrics under which hospitals may perform elective inpatient surgeries and procedures as originally outlined in IDPH’s April 24 Guidance on Elective Surgeries and Procedures.

Individual hospitals must meet ALL three following requirements to perform elective inpatient procedures:

- Hospital availability of adult medical/surgical beds exceeds 20% of operating capacity for adult medical/surgical beds;
- Hospital availability of ICU beds exceeds 20% of operating capacity for ICU beds; and
- Hospital ventilator availability exceeds 20% of total ventilators.

IDPH will calculate a hospital’s availability/capacity as follows: A calculation of available beds/ventilators divided by total bed/ventilator capacity. Every Wednesday night, IDPH will run a report from EMResource to determine if hospitals meet the above requirements. Specifically, the report will show if a hospital is below the 20% threshold in any of the above three categories, calculated as a rolling average of the previous seven days. Beginning this Friday, June 5, IDPH will notify hospitals every Friday if they are under the 20% threshold in any of the three categories.

For more information, see IHA’s summary memo.

Today is Deadline for Provider Relief Fund Application
Providers have until today, June 3, to accept the Terms and Conditions and submit revenue information specific to the Provider Relief Fund $50 billion General Distribution. Submitted tax forms/financial statements serve as an application for additional funding from the $50 billion General Distribution. Revenue information, including tax forms or financial statements, should be submitted via the General Distribution Portal, which is here.

CMS Guidance on Optional Uninsured COVID-19 Testing Coverage
The Centers for Medicare & Medicaid Services (CMS) released guidance to states implementing the Optional COVID-19 Testing (XXIII) Group. This coverage, established by the Families First Coronavirus Response Act (FFCRA), is for testing and testing-related services provided to uninsured individuals.

The guidance provides details on implementation requirements related to coverage application, eligibility verification, hospital presumptive eligibility, patient notices, claims submission and data reporting. The guidance also outlines options and flexibilities within these requirements available to states participating in the Optional COVID-19 Testing Group.

In addition to this guidance, CMS published FFCRA and Coronavirus Aid, Relief, and Economic Security (CARES) Act Frequently Asked Questions (FAQs) on April 13. Section B of this FAQ document provides additional details on eligibility requirements, benefits, and the Federal Medical Assistance Percentage (FMAP) available for coverage provided under the Optional COVID-19 Testing Group.
State, National, Global COVID-19 Update

The Illinois Department of Public Health (IDPH) announced today 982 new COVID-19 cases and 97 deaths. The total number of cases in the state is 123,830 in 101 counties, with a total of 5,621 deaths. IDPH says that in the past 24 hours, 24,471 test specimens have been processed, with a positivity rate of 4%. The preliminary seven-day statewide positivity from May 27-June 2 is 6%. Statewide COVID-19 hospitalizations in the past 24 hours decreased from 3,238 patients to 3,173 patients. Of that figure, 844 patients are in the ICU, with 508 patients on ventilators.

Current Centers for Disease Control and Prevention (CDC) figures show more than 1.8 million confirmed and presumptive positive cases of COVID-19 in the U.S., with 106,202 deaths.

Today’s WHO Situation Report shows nearly 6.3 million COVID-19 cases globally, with more than 379,000 deaths. The Region of the Americas (includes the U.S.) continues to lead the world with nearly 3 million cases and over 165,000 deaths.

HFS Issues Notice on Hospital Billing Transition

The Dept. of Healthcare and Family Services (HFS) issued a provider notice informing hospitals that all hospital outpatient services billed on a professional claim (HFS 2360/837P) to Non-Institutional Provided Services (NIPS) and paid under the Practitioner Fee Schedule will be billed on an institutional claim (UB-04/837I) and reimbursed under the Enhanced Ambulatory Patient Grouping (EAPG) outpatient methodology, effective for claims with “From” dates on service (DOS) on or after July 1, 2020.

This change also applies to hospital outpatient services submitted on the professional claim form (CMS 1500/837P) to the Medicaid Managed Care Organizations (MCOs).

For more information, see IHA’s memo.

Register: Free IHA Webinar Series on Antibiotic Stewardship

Almost one-third of antibiotics prescribed in U.S. hospitals are either unnecessary or suboptimal. Learn how to develop an antibiotic stewardship program in small and rural hospitals by attending Antibiotic Stewardship: A Roadmap to Implementing Programs in Small & Rural Hospitals.

This two-part webinar series is complimentary to IHA members. The first webinar on June 16 will cover the core elements of antibiotic stewardship and practical strategies for small and rural hospitals to build their own program.

The second webinar on June 23 will address the second half of the Centers for Disease Control and Prevention’s core elements and review practical strategies, including tracking, reporting and opportunities to provide patient and staff education.

Jenny Winkler, MPH, CIC, CPPS, an IHA director of safety, quality and health policy, will lead webinars, both from noon to 1 p.m.

The series is designed for small and rural staff in:

- Antibiotic stewardship;
- Pharmacy;
- Nursing;
- Infection prevention; and
- Quality and patient safety.

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Antibiotic stewardship is a critical area for quality and safety improvement. Don’t miss this enlightening series. Register today.
Briefly Noted

As part of the city of Chicago’s move to Phase 3 (“Cautiously Reopen”) of its reopening plan, Public Health Commissioner Dr. Allison Arwady today issued an order (click here). The order keeps in place several restrictions and guidance; parks and recreational facilities near the Lakefront remain closed. As part of the reopening, Mayor Lori Lightfoot restored access to the Central Business District and Loop, with select closures and service interruptions staying in effect until further notice. Also, the citywide curfew for all residents and visitors, effective from 9 p.m. to 6 a.m., remains in effect until further notice.