IHA's Daily Briefing: June 8

Monday, June 8, 2020

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FDA Reissues Respirator EUAs

On Sunday, the Food and Drug Administration (FDA) reissued emergency use authorizations (EUAs) to specify which respirators are appropriate for decontamination for reuse. Based on the FDA's increased understanding of the performance and design of these respirators, the FDA has decided that certain respirators should not be decontaminated for reuse by healthcare personnel.

The FDA has reissued the EUAs for:

- **Non-National Institute for Occupational Safety and Health (NIOSH)-Approved Disposable Filtering Facepiece Respirators Manufactured in China** by revising the Scope of Authorization such that authorized respirators listed in Appendix A will no longer be authorized if decontaminated.
- **Multiple decontamination systems so that they 1) are no longer authorized to decontaminate respirators manufactured in China, where applicable, and 2) only authorize decontamination of non-cellulose respirators that do not have an exhalation valve that are either authorized in the NIOSH-Approved Air Purifying Respirators for Use in Health Care Settings During Response to the COVID-19 Public Health Emergency EUA or that are authorized and identified in Exhibit 1 of the EUA for Imported, Non-NIOSH-Approved Disposable Filtering Facepiece Respirators to be decontaminated.**

The FDA also notes that according to Centers for Disease Control and Prevention’s recommendations, decontaminated respirators should only be used when new FDA-cleared N95 respirators, NIOSH-approved N95 respirators or other FDA authorized respirators are not available. The FDA will hold a webinar on this issue on Tuesday, June 9 at 11 a.m. CDT. Click here for more information (registration is not required).

Register for Webinar: COVID Funding Reporting Requirements

On Thursday, June 11, IHA will host a webinar at 10 a.m. with Health Management Associates (HMA) to assist member hospitals and health systems with coronavirus response funding reporting requirements, which begin with the quarter ending June 30. **Registration** is required, and the webinar will be recorded if you are unable to join. The webinar will review the Terms and Conditions associated with the main sources of coronavirus response funding, provide guidance on COVID-19 related expenses and lost revenue projections, and discuss best practices related to the quarterly reporting process.

Updated COVID-19 Provider Relief Fund FAQs

The U.S. Dept. of Health and Human Services (HHS) has updated the CARES Act Provider Relief Fund Frequently Asked Questions (FAQs), providing more clarity concerning eligible COVID-related expenses and COVID-attributable lost revenues. The updated FAQ explains that “health care related expenses attributable to coronavirus” may cover a wide range of items and
services, including:

- Supplies used to provide healthcare services for possible or actual COVID-19 patients;
- Equipment used to provide healthcare services for possible or actual COVID-19 patients;
- Workforce training;
- Developing and staffing emergency operation centers;
- Reporting COVID-19 test results to federal, state, or local governments;
- Building or constructing temporary structures to expand capacity for COVID-19 patient care or to provide healthcare services to non-COVID-19 patients in a separate area from where COVID-19 patients are being treated; and
- Acquiring additional resources, including facilities, equipment, supplies, healthcare practices, staffing, and technology to expand or preserve care delivery.

Providers may use the Provider Relief Fund for expenses incurred on any date, though HHS notes that eligible expenses prior to January 1, 2020 would be viewed as highly unusual.

Additionally, HHS notes that the term “lost revenues that are attributable to coronavirus” means any revenue that a healthcare provider lost due to coronavirus, including lost revenue associated with fewer outpatient visits, canceled elective procedures or services, or increased uncompensated care. Such costs do not need to be specific to providing care for possible or actual coronavirus patients. HHS also elaborated that funds should be used so that providers can respond to the coronavirus public health emergency by maintaining healthcare delivery capacity. HHS lists the following as eligible expenses that Provider Relief Fund payments may cover:

- Employee or contractor payroll;
- Employee health insurance;
- Rent or mortgage payments;
- Equipment lease payments; and
- Electronic health record licensing fees.

HHS updates the CARES Act Provider Relief Fund FAQs regularly, and IHA encourages member hospitals and health systems to review the Provider Relief Fund website periodically for updates and clarifications.

**New Report re: Cleansers, Disinfectants**

About one in three adults in the U.S. have used chemicals or disinfectants unsafely while trying to protect themselves against COVID-19, according to a new Morbidity and Mortality Weekly Report issued Friday by the Centers for Disease Control and Prevention (CDC). The CDC report follows up on previous reports that calls to poison centers, including the Illinois Poison Center, regarding exposures to cleaners and disinfectants have increased since the onset of the COVID-19 pandemic.

The new report says an Internet survey of 502 adults identified gaps in knowledge about safe preparation, use, and storage of cleaners and disinfectants. Approximately one-third of survey respondents engaged in non-recommended high-risk practices with the intent of preventing COVID-19 transmission, including using bleach on food products, applying household cleaning and disinfectant products to skin, and inhaling or ingesting cleaners and disinfectants.

The CDC says public messaging should continue to emphasize evidence-based, safe cleaning and disinfection practices to prevent COVID-19 transmission in households, including hand hygiene and cleaning and disinfection of high-touch surfaces.

**New ASPR TRACIE COVID-19 Resources**

The Technical Resources, Assistance Center and Information Exchange (TRACIE) of the Dept. of Health and Human Services' (HHS) Office of the Assistant Secretary for Preparedness and Response (ASPR) has released several new COVID-19 related resources:

- Webinar Recording: ASPR TRACIE, in collaboration with the HHS/FEMA COVID-19 Healthcare Resilience Task Force,
recently hosted the **Ensuring Healthcare Safety Throughout the COVID-19 Pandemic webinar**, where speakers shared recent experiences and lessons learned while adjusting their healthcare systems to maintain safety within their organizations;

- **Alternate Care Site (ACS) Resources/Webinar Q & A**: Due to limited time, speakers were not able to respond to all questions at the end of the May 22 webinar, *Funding Sources for the Establishment and Operationalization of Alternate Care Sites*. The webinar Q & A document includes responses to all questions received; the **ACS Funding Summary Tip Sheet** includes more information; and
- **Rural Health and COVID-19**: *This document* discusses strategies for managing some of the challenges faced by rural areas specific to COVID-19. The challenges are grouped into two main categories: those specific to healthcare facilities, and those related to at-risk populations who reside in rural areas.

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**Data Deadline Today re: Remdesivir Distribution**

For the next distribution of Remdesivir, the U.S. Dept. of Health and Human Services (HHS) is requesting that hospitals submit data by 7 p.m. CDT, today, June 8. Hospitals should log on to the COVID-19 web portal at [https://teletracking.protect.hhs.gov](https://teletracking.protect.hhs.gov), using the same login information previously used to provide year-to-date coronavirus-related admissions. Once logged in, you will be asked to provide: the number of currently hospitalized coronavirus patients, and of those admissions, the number in an intensive care unit. Hospitals should record these values as of June 1, or the date they are submitting, prior to the June 8 deadline. For more information, see HHS’ updated letter and FAQ.

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**Tuesday Webinar on MIS-C**

A panel of pediatric specialists from New York-Presbyterian/Columbia University Irving Medical Center will hold a webinar at 5 p.m. CDT on Tuesday, June 9, on Multisystem Inflammatory Syndrome in Children (MIS-C), the new pediatric syndrome associated with COVID-19. These expert pediatricians will discuss symptoms to look out for, common questions from parents, current treatment options, possible long-term effects and the disease’s similarity to Kawasaki disease, and the latest research on MIS-C. To register, [click here](https://example.com).

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**LabCorp Webinars on COVID-19 Testing**

LabCorp, a leading COVID-19 testing manufacturer, will hold one-hour COVID-19 testing update webinars this Tuesday and Thursday. The webinar, which will feature LabCorp Chief Medical Officer and Senior Vice President Dorothy Adcock, will be held:

**Tuesday, June 9 at 3 p.m. CDT**

Meeting number: 160 100 7314  
Password: 465pyVCAqs  
Register and install meeting app [here](https://example.com)  
Join by phone: 1-404-410-4502, 1601007314#

**Thursday, June 11 at 11 a.m. CDT**

Meeting number: 160 502 5532  
Password: 5FsmNP7MDf8  
Register and install meeting app [here](https://example.com)  
Join by phone: 1-404-410-4502, 1605025532#

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**Weekly CMS COVID-19 Calls**

The Centers for Medicare & Medicaid Services (CMS) hosts recurring stakeholder sessions on COVID-19 to provide updates, share best practices, and offer attendees an opportunity to ask questions of CMS and other subject matter experts. Call recordings and transcripts are posted on the CMS podcast page. This week’s calls include:

**Tuesday, June 9:**

- Home Health and Hospice, 2:00 - 2:30 p.m. CDT. Dial-in: 833-614-0820; Passcode: 7359947; Webcast [Registration](https://example.com).
COVID-19 Office Hours, 4 - 5 p.m. CDT. Dial-in: 833-614-0820; Passcode: 4892554; Webcast Registration.

Wednesday, June 10

- Nursing Homes, 3:30 - 4:00 p.m. CDT. Dial-in: 833-614-0820; Passcode: 9782909; Webcast Registration.
- Dialysis Organizations, 4:30 - 5:00 p.m. CDT. Dial-in: 833-614-0820; Passcode: 6553907. Webcast Registration.

Thursday, June 11

- Nurses, 2:00 - 2:30 p.m. CDT. Dial-in: 833-614-0820; Passcode: 2863547; Webcast Registration.

State, National, Global COVID-19 Update

The Illinois Department of Public Health (IDPH) announced today 658 new COVID-19 cases and 23 deaths. The total number of cases in the state is 128,415 in 101 counties, with a total of 5,924 deaths. IDPH says that in the past 24 hours, 16,099 test specimens have been processed, with a positivity rate of 4%. The preliminary seven-day statewide positivity rate from June 1 to June 7 is 5%. Statewide COVID-19 hospitalizations in the past 24 hours decreased from 2,550 patients to 2,496 patients. Of that figure, 713 patients are in the ICU, with 443 patients on ventilators.

Current Centers for Disease Control and Prevention (CDC) figures show more than 1.93 million confirmed and presumptive positive cases of COVID-19 in the U.S., with 110,375 deaths.

As of Sunday, the WHO Situation Report showed nearly 6.8 million COVID-19 cases globally, with more than 397,000 deaths. The Region of the Americas (includes the U.S.) continues to lead the world with more than 3.2 million cases and over 179,000 deaths.

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