IHA Daily Briefing: May 29

Friday, May 29, 2020

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IHA Urges HHS to Provide Funds to High-Impact Areas

Today, IHA sent a letter to Health and Human Services (HHS) Secretary Alex Azar, urging additional provider relief funds appropriated by Congress be directed to hospitals in high-impact areas.

“As the number of COVID-19 cases continues to seriously impact Chicago, Cook County and other areas of the country we request an additional targeted distribution for high-impact areas be made from the Public Health and Social Services Emergency Fund. Specifically, funding is urgently needed to assist hospitals serving high numbers of Medicaid and uninsured patients, as well as communities of color, which have been disproportionately harmed by the virus. The Chicago Department of Public Health found that as of May 27, African-American and Latino individuals accounted for more than 77 percent of all positive cases and 75 percent of all deaths,” wrote IHA President & CEO A.J. Wilhelmi.

The CARES Act provided $175 billion to the Public Health and Social Services Emergency Fund to assist providers in preparing for and responding to COVID-19. A previous $12 billion allocation from the fund has been made to providers in high-impact areas who had at least 100 inpatient COVID-19 admissions by April 10.

Chicago HEAL Report Shows Hospitals’ Successes in Year 1

U.S. Senator Richard J. Durbin (D-IL) on Thursday released the first-year report of the Chicago HEAL Initiative (Hospital Engagement, Action and Leadership), which he launched in October 2018 with 10 health systems to reduce violence and improve health by engaging residents in 18 vulnerable neighborhoods.

HEAL participants are: Advocate Aurora Health, AMITA Health, Ann & Robert H. Lurie Children’s Hospital of Chicago, Cook County Health and Hospitals System, Loyola Medicine, Northwestern Medicine, Rush University Medical Center, Sinai Health System, UChicago Medicine and University of Illinois Hospital & Health Sciences System.

With strong commitments from participating HEAL hospitals, the first report shows significant progress in local hiring and procurement, job training and mentorship, housing, and mental health activities. Between 2018 and 2019:

- 3,742 individuals were hired from the HEAL neighborhoods;
- 5,177 patients were paired with trauma-informed, post-injury counseling services;
- $134 million was spent in local procurement of supplies and services;
- 11,688 students benefited from apprenticeship and healthcare career development programs; and
- 75,625 patients were screened for trauma and social determinants of health, with 1,099 hospital staff trained on these
"These hospitals are world class centers of healing, but the neighborhoods surrounding these hospitals often face poverty, lack of opportunity, trauma and chronic disease—all contributing to a gap in life expectancy of 16 years," Sen. Durbin said in a video message. "We launched the HEAL Initiative to use the economic footprint of these hospitals and their healthcare expertise to address the root causes of violence in 18 neighborhoods across Chicago."

Sen. Durbin also identified COVID-19 as magnifying racial and economic disparities and reinforcing the role of hospitals as anchors in the neighborhoods they serve.

In lauding the hospitals’ efforts, he said, "I’ve seen so many of these programs in action. I want to commend these hospitals for their dedication, for lifting up the health and economic conditions of the neighborhoods around them."

IHA worked closely with HEAL hospitals and Sen. Durbin to deliver an inspiring first-year report, as we continue to partner to advance health and opportunity in Chicago and throughout the state. Read the full report.

Register for June 1 Webinar on Fair Workweek Rules
Chicago hospital leaders are encouraged to participate in Monday’s webinar on rules pertaining to the city’s Fair Workweek ordinance. Held from 10-11:30 a.m., the program is co-hosted by IHA and the Chicago Office of Labor Standards (OLS).

During the program, OSL Director Andrew Fox will explain the new rules and answer questions from hospital leaders. On May 12, OLS published Fair Workweek rules, which include rules related to COVID-19.

The Chicago City Council passed the Fair Workweek ordinance (O2019-3928) last July and amended the rules (O2020-2370) on May 20 to delay until Jan. 1, 2021 the private right of action provision (i.e., an employee’s right to sue) for an employer’s noncompliance with the scheduling requirements.

Webinar registration is through the city’s Webex platform.

PPP Flexibility Act Passes U.S. House
The U.S. House of Representatives yesterday passed legislation to provide additional flexibility for borrowers who received loans through the Paycheck Protection Program. The Paycheck Protection Program Flexibility Act (H.R. 6886) would give borrowers 24 weeks (instead of eight weeks) to spend loan funds, allow them to delay paying payroll taxes, and only require that 60% of loan expenses be spent on payroll costs, rather than 75%, as stipulated in the CARES Act.

A related bill failed to pass the Senate in recent days; however, several reports suggest that the chamber may consider the House-passed bill next week. PPP loans are available to businesses, including hospitals, who meet eligibility criteria, including having 500 or fewer total employees.

IDPH Mandates COVID-19 Testing in Long-Term Care Facilities
IDPH has filed emergency rules mandating long-term care facilities comply with infection control practices, including testing all residents and staff for COVID-19. Each long-term care facility will collect specimens and arrange with a laboratory to have them tested. IDPH will provide training and assistance with testing if needed and help identify laboratory services if requested. Each facility will be required to report to public health officials the number of residents and staff tested, and the number of positive, negative, and indeterminate test results. For more information, see IDPH’s press release.

IDPH Guidance for Places of Worship
The Illinois Dept. of Public Health (IDPH) on Thursday issued guidance for places of worship and providers of religious services. IDPH says the guidance does not obligate or encourage places of worship to resume in-person activity but strongly recommends that places of worship continue to facilitate remote services, particularly for those who are vulnerable to COVID-19 including older adults and those with co-morbidities.

IDPH notes that even with adherence to physical distancing, multiple different households convening in a congregational setting...
to worship carries a higher risk for widespread transmission of the virus that causes COVID-19, and may result in increased rates of infection, hospitalization, and death, especially among more vulnerable populations. In particular, the high risk associated with activities such as singing and group recitation can negate the risk-reducing behaviors such as six feet of physical distancing.

Complimentary Teletherapy Sessions for Frontline Workers
The Chicago Psychoanalytic Institute, one of the nation's leading nonprofit organizations in providing psychoanalytic training and therapy via videoconferencing, is offering complimentary teletherapy sessions to frontline workers in Illinois.

Called the Frontline Responders program, the Institute is offering, on a pro bono basis, to treat workers enduring or struggling to deal with the challenges they are experiencing as a result of the COVID-19 pandemic. Illinois frontline workers who email FrontlineWork@ChicagoAnalysis.org or call (312) 897-1405 will be promptly put in touch with an appropriate clinician at no charge.

Up to 8 treatment sessions will be provided through secure HIPPA compliant videoconferencing. This program is available to all COVID-19 frontline workers in Illinois.

For more information, see the flyer here.

State, National, Global COVID-19 Update
The Illinois Department of Public Health (IDPH) announced today 1,622 new COVID-19 cases and 86 deaths. The total number of cases in the state is 117,455 in 101 counties, with a total of 5,270 deaths. IDPH says that in the past 24 hours, 21,796 test specimens have been processed, with a positivity rate of 7.4%. The preliminary seven-day statewide positivity from May 22-28 is 8%. Statewide COVID-19 hospitalizations in the past 24 hours decreased from 3,649 patients to 3,599. Of that figure, 980 patients are in the ICU, with 593 patients on ventilators.

At his daily press briefing this afternoon, Governor J.B. Pritzker said he is issuing a new executive order (click here), extending necessary legal mechanisms such as his disaster proclamation (click here), but lifting the stay-at-home order. He also announced that as the state moves into Phase 3 of his “Restore Illinois” reopening plan, the daily update will be replaced by briefings specifically dedicated to COVID-19, only on an as-needed basis starting Monday. IDPH will continue to send daily COVID-19 press releases and update Restore Illinois regional metrics.

Current Centers for Disease Control and Prevention (CDC) figures show more than 1.7 million confirmed and presumptive positive cases of COVID-19 in the U.S., with 101,711 deaths.

Today's WHO Situation Report shows more than 5.7 million COVID-19 cases globally, with over 357,000 deaths. The Region of the Americas (includes the U.S.) continues to lead the world with more than 2.6 million cases and over 151,000 deaths.

Part D Plans to Offer Lower Out-of-Pocket Insulin Costs
The Centers for Medicare & Medicaid Services (CMS) announced 1,750 standalone Medicare Part D prescription drug plans (PDP) and Medicare Advantage (MA) plans with prescription drug coverage applied to offer lower insulin costs through the Part D Senior Savings Model (Model) for the 2021 plan year.

Currently, PDPs may provide lower cost-sharing to beneficiaries in the coverage gap; however, lower cost-sharing results in higher costs for plan sponsors which are often passed on to beneficiaries via higher plan premiums. Under the Model, participating plans will provide enrolled Medicare beneficiaries a range of insulins at a maximum $35 copay for a month’s supply. This copay applies from the beginning of the year through the Part D coverage gap.

CMS estimates the Model will result in average annual out-of-pocket savings of 66 percent, or $446, with PDP or MA plans incorporating the Model offered in all 50 states, the District of Columbia, and Puerto Rico. Beneficiaries will be able to enroll in these plans during Medicare open enrollment (Oct 15 through Dec 7), and CMS' Medicare Plan Finder will include a filter to identify plans offering the Model. CMS anticipates releasing the premiums and costs for specific Medicare health and drug plans for the 2021 calendar year in September. For more information on the Model, see CMS' website.
Condition Code DR for Medicaid Institutional Claims

The Illinois Department of Healthcare and Family Services (HFS) recently posted a Provider Notice to instruct providers to use Condition Code DR (Disaster Related) to track claims associated with COVID-19 treatment. Condition Code DR must be present for service dates beginning January 27, 2020, on a claim that includes one of the following diagnostic codes:

- B97.29 - Other coronavirus as the cause of diseases classified elsewhere (for services provided prior to April 1, 2020);
- U07.1 - COVID-19 (for services provided on or after April 1, 2020);
- Z03.818 - Encounter for observation for suspected exposure to other biological agents ruled out; Z11.59 Encounter for screening for other viral diseases; and
- Z20.828 - Contact with and suspected exposure to other viral communicable diseases.

These instructions apply to Medicaid fee-for-service (FFS), Managed Medicaid (HealthChoice Illinois), and Medicare/Medicaid Alignment Initiative (MMAI) plans.

Briefly Noted

The Illinois Dept. of Public Health and the COVID-19 Equity Team's Intimate Partner Violence and Child Abuse Prevention Workgroup have compiled a list of available resources. The document will be updated as new information becomes available.

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