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# IHA COVID Resources and Advocacy

December 10, 2020

# The latest about COVID-19 from IHA

## For lowa hospitals:

**Disaster preparedness hospital contacts:** IHA has been contacting members to identify the main contact person in their hospitals for COVID-19 and disaster preparedness. Please respond promptly.

CEO update calls: 1 pm Wednesdays are our regular calls with hospital CEOs. Click here to register for this week's call.

**Hospital operations guidance:** IDPH will send guidance to hospitals about elective surgeries, visitor restrictions and health care providers returning to work after exposure or having contracted the COVID-19 virus.

Personal protective equipment (PPE): lowa hospitals need to respond to the Heath Alert Networks (HAN) request for PPE supply volumes. This data is critical for IDPH to collect as to request and draw down supplies from the Strategic National Stockpile. Please check internally. If your hospital is not receiving HAN emails, please email HANofficer@iowahealthalert.org and provide the contact person for your organization. Hospital PPE requests need to be directed to your county's emergency manager.

**Surge bed capacity:** IHA is working to gather hospital bed-capacity information and has committed to the state that this information will be collected and shared. We anticipate the survey tool(s) will be ready soon for hospitals to report.

**Temporary OSHA guidance:** OSHA has issued temporary enforcement guidance about testing of general-use respirators to address supply shortages.

**Waivers:** The state will be submitting the 1135 waiver. When IHA receives the summary of the waiver, we will forward the information.

**Health care workers' childcare:** The lowa Department of Human Services is working to identify the number of health care workers' children who will need child care in each county because of school closures. County supervisors should reach out to their hospitals so hospital employee's children are included in the count. If you have not heard from your county supervisor or county emergency manager about child care needs, please contact them ASAP so your organization is included in the count.

**Education conferences and member meetings:** Meetings and conferences scheduled through May will be offered virtually or rescheduled because of CDC recommendations to mitigate the spread of the COVID-19 virus.

Governor Kim Reynolds today issued a State of Public Health Disaster Emergency effective today and expiring 11:59 p.m. on April 16, 2020, unless sooner terminated or extended.

The State of Disaster Emergency contains 23 sections mandating a variety of actions including closures of bars, restaurants, and other mass public venues and several changes to medical, health, and transportation processes. The sections directly applicable to hospitals are highlighted below. A more-detailed summary was sent to hospital CEOs earlier today.

### Certificate of Need, bed capacity

 All regulatory provisions of lowa Code sections requiring an institutional health facility to obtain a certificate of need prior to operating additional bed capacity are suspended for the duration of the proclamation.

### • <u>Telemedicine</u>

All the rules detailed in rule 653-13.11 are suspended for the duration of the proclamation. This would include: who can
provide telemedicine, and when and how telemedicine is provided, requirement of the physician to have an lowa
license, and on the type of technology that can be used, along with administrative rules establishing preconditions,
limitations, or restrictions on the provision of telehealth or telemedicine services.

### • Scope of Practice

The proclamation allows individuals to practice medicine and surgery, osteopathic medicine and surgery, nursing, respiratory care, and practice as a physician assistant if their licenses were inactive or have lapsed within five (5) years prior to the proclamation. These individuals are limited to providing treatment to COVID-19 patients and only for the duration of the proclamation.

### • Substance Use Disorder Programs

- o Rules relating to licensing of individuals who maintain or conduct substance use disorder programs are suspended.
- Additionally, rules which govern management of care and discharge planning for such programs, as well as those related to restrictions that such programs can place on a patient's use of the telephone are suspended.

### **Federal and National Updates**

**Telehealth:** CMS expanded guidance for both Medicare telehealth coverage and Medicaid today enabling beneficiaries to receive a wider range of health care services from their doctors without having to travel to a health care facility. Beginning March 6, 2020, Medicare will temporarily pay clinicians to provide telehealth services for beneficiaries residing across the entire country. For more detail, see the CMS FAQ for Medicare and the homepage for general Medicaid Telehealth Guidance.

The Joint Commission (TJC): All TJC surveying is suspended. The TJC has notified the Centers for Medicare & Medicaid Services of its decision and CMS has agreed, according to an email sent to stakeholders Monday. TJC said that it anticipates survey delays and other activities will be on hold at least until the end of April yet also drafting scenarios that assume longer periods of suspension. TJC is working with its field staff and customers on plans to redirect TJC resources to best assist customers.



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