

IHA COVID Resources and Advocacy

April 1, 2020

The latest about COVID-19 from IHA

CMS updates

CMS provided several updates and guidance Monday, March 30:

- **Additional blanket waivers.** New [blanket waivers](#) include [physician self-referral laws](#) (Stark Law) and CMS has provided a [fact sheet](#) to help hospitals and providers. The waivers also include Medicare provider enrollment relief, cost-report delays and relaxing certain conditions of participation.
- **EMTALA guidance.** Revisions reiterate that emergency departments must conduct medical screening examinations for anyone who arrives in a hospital's emergency department. But if that hospital is being asked to receive a patient from another hospital without the necessary capabilities to treat the patient, the receiving hospital may refuse the transfer. IHA advises hospital leaders to review the revised guidance and contact IHA with questions.
- **Interim final rule.** An [interim final rule](#) provides hospitals with more flexibility including:
 - Amends Medicaid home health regulations to allow other licensed practitioners to order home health services.
 - Changes Medicare payment rules to conform to CMS' telehealth waivers.
 - Changes payment policies to allow independent laboratories to collect specimen collection fees.
 - Expands ambulance transportation under Medicare Part B.
 - Makes programmatic changes to the Medicare Diabetes Prevention Program and the Comprehensive Care for Joint Replacement Model.

Financial resources to help hospitals and health systems

The CARES Act includes new payment mechanisms for health care providers and several provisions relevant to hospitals and health systems as businesses and employers that may provide additional sources of needed revenue:

- **Business loans through the Federal Reserve.** The CARES Act authorizes \$500 billion in business loans using the Federal Reserve's emergency lending authority. Although these loans may be available to a range of businesses, the legislation directs the Treasury "to endeavor to implement" loan programs to nonprofit organizations and businesses between 500 and 10,000 employees.
- **Payroll tax delay.** Employers may delay payment of their share of the Social Security portion of the Federal Insurance Contributions Act between March 27 and Dec. 31, 2020. This delay is essentially an interest-free loan for nine months, to be repaid over the next two years. Most hospitals and health systems would be eligible for these delayed payments unless they had received and had forgiven a small business loan under the Paycheck Protection Program.
- **Small Business Administration loans through the Paycheck Protection Program.** This new loan opportunity is targeted to for-profit and nonprofit organizations with fewer than 500 employees and is intended to help businesses maintain their workforces through the economic downturn. Hospitals meeting the eligibility criteria may access funds to pay salaries and benefits, among other uses. Under certain circumstances, these loans (or a portion of them) may be forgiven.

Next CEO update call

The next hospital CEO call is scheduled 1 pm Wednesday, April 1. Click [here](#) to register.

COVID-19 cases in Iowa

IDPH reports 73 additional positive cases of Iowans with COVID-19, for a total of 497 positive cases. One death was reported in Muscatine County, a middle-aged (41-60) resident. A total of 6,888 negative tests to date; this number includes testing reported by the State Hygienic Lab and other labs.

Board of Pharmacy responds to DEA guidance for oral schedule II emergency prescriptions

The Drug Enforcement Administration recently published [guidance](#) for issuing oral schedule II prescriptions during the COVID-19 public health emergency. The guidance provides temporary exemptions to the criteria “to enable greater flexibility in oral prescribing.” Pharmacists should contact their compliance officers with questions.

CARES Act provision limits liability for certain volunteer health care professionals

The CARES Act limits liability for health care volunteers under federal and state law for any harm caused by an act or omission in the provision of health care services for the duration of COVID-19. This is intended to ensure liability protection for health care volunteers during COVID-19 and applies if the professional is providing health care services as a volunteer and the act or omission:

- Does not exceed the scope of license, registration or certification of a substantially similar health professional in the state where the act or omission occurs.
- Is in a good faith belief that the patient needs health care services.
- Occurs while providing health care services within the scope of the license, registration or certification of the volunteer, as defined by the state of licensure, registration or certification.

Iowa congressional members sign letter supporting rural hospitals

Sen. Joni Ernst and Rep. Cindy Axne joined 122 federal lawmakers Monday by signing a [letter](#) urging Health and Human Services Secretary Alex Azar to provide immediate financial assistance to rural health care providers. Lawmakers stressed that ending elective procedures and not seeing non-urgent patients have threatened the financial viability of rural hospitals.

IDPH medical director provides update on COVID-19 in Iowa

State Medical Director and Epidemiologist Caitlin Pedati, MD, MPH, FAAP, provided an update today about the epidemiology of COVID-19 and the response in Iowa. Presentation links: [slide show](#) and [video](#).

IHA COVID-19 resource webpage

Visit IHA's [coronavirus resource page](#) for current information about COVID-19.

Previous IHA Updates on COVID-19

[March 30 Update](#)

[March 27 Update](#)

[March 26 Update](#)

[March 25 Update](#)

[March 24 Update](#)

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Iowa Hospital Association
100 E. Grand Ave., Suite 100
Des Moines, Iowa 50309-1800

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