

IHA COVID Resources and Advocacy

August 20, 2020

HHS delays Provider Relief Fund reporting requirement instructions and data template

Last month, HHS issued a public notice about forthcoming reporting requirements for certain providers that accepted one or more payments exceeding \$10,000 in the aggregate funding from the Provider Relief Fund program. The reporting notice initially advised recipients that additional details about data elements would be provided by this week. But the Health Resources and Services Administration is continuing to refine its data elements and will provide those additional details later. Providers still will be given the detailed Provider Relief Fund reporting instructions and a data collection template before the reporting system is available Thursday, Oct. 1. For updates, click [HERE](#).

IDPH begins preparations to receive and distribute vaccine

The Iowa Department of Public Health (IDPH) is taking steps to prepare for the receipt and distribution of COVID-19 vaccine. It is anticipated IDPH will be responsible for directing the shipment of the vaccine and ancillary supplies in Iowa. IDPH is extending the opportunity to receive and administer pandemic vaccines to interested Iowa health care providers including hospitals, clinics, pharmacists, long-term care facilities and community vaccinators.

IDPH plans to use the Immunization Registry Information System (IRIS) and other federal systems for ordering, distributing and documenting pandemic vaccines. Providers interested in offering pandemic vaccines but not yet enrolled in IRIS should do so now by completing the:

- [Authorized Site Agreement – Organization.](#)
- [IRIS Authorized Individual User Agreement.](#)

The completed agreements can be emailed to IRISEnrollment@idph.iowa.gov or faxed to 800-831-6292. IRIS also supports connections with electronic health record systems. If facilities want to connect electronically to IRIS, complete and email the [IRIS Data Exchange Onboarding](#) form to the same address. Health care providers and organizations that enroll in IRIS are not obligated to provide COVID-19 vaccines, and enrollment in IRIS does not guarantee the receipt of vaccines.

IDPH anticipates health care organizations will need to complete a COVID-19 Pandemic Vaccine Provider Agreement to receive and administer the COVID-19 vaccine. A federal provider agreement is forthcoming and will be made available in the future.

More information about COVID-19 vaccines and plans will be distributed over the coming months. Contact Kim Tichy at 800-374-3958, ext. 4, or kimberly.tichy@idph.iowa.gov with questions about IRISD enrollment.

CMS issues new requirement for DRG add-on

The CARES Act provided for a 20% add-on to the inpatient prospective payment system diagnosis-related group rate for patients diagnosed with COVID-19. This week, the Centers for Medicare & Medicaid Services (CMS) updated its guidance for this add-on payment.

For inpatient admissions occurring on or after Tuesday, Sept. 1, claims eligible for the 20% add-on must have positive COVID-19 laboratory tests documented in patients' medical records. This requirement is in addition to the requisite International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM) diagnosis codes:

- B97.29 (Other coronavirus as the cause of diseases classified elsewhere) for discharges occurring on or after Jan. 27, 2020, and on or before March 31, 2020.
- U07.1 (COVID-19) for discharges occurring on or after April 1, 2020, through the duration of the public health emergency period.

Positive tests must be demonstrated using only molecular or antigen testing results. Tests may be performed during or before hospital admissions. A test performed within 14 days of the hospital admission, including a test performed by an entity other than the hospital (such as testing centers run by the local government), can be manually entered into the patient's medical record to satisfy this documentation requirement. In some rare cases, a positive test performed more than 14 days before the hospital admission may be considered.

Although the inpatient PPS Pricer will continue to apply the 20% adjustment based on appropriate diagnosis codes, CMS may conduct post-payment medical reviews to confirm the presence of a positive COVID-19 test in the medical record. If no such test is present, the additional payment resulting from the 20% add-on will be recouped.

For more information, click [HERE](#).

AHA releases new resources as part of 'wear a mask' initiative

As part of AHA's Wear a Mask initiative, the association is developing new content, collaborating to share resources and amplifying key public health messages. The elements of this national campaign are available for hospitals and health systems to adapt and use freely.

New content includes:

- A digital and social media toolkit encouraging college students to take protective measures – whether remote or on campus – to help keep COVID-19 out of schools.
- A [public service announcement](#) and complementary resources that build on the recent effort with the American Medical Association and American Nurses Association urging the public to wear masks, practice physical distancing and wash hands frequently.
- Social media messages that target a younger generation, with Instagram-specific content.

AHA members can access all of AHA's Wear a Mask resources [HERE](#).

CEO update call

The next CEO update call is scheduled from **1-2 pm Wednesday, Aug. 26**. Click [HERE](#) to register.

Educational opportunities

- **Noon-1 pm Thursday, Aug. 20, Leadership and Resiliency: Navigating Through and Beyond COVID-19 – Win When: The 21st Century Challenges of Health Equity** – From broken community partnerships to diminished funding, how do we overcome the 21st century challenges of health equity? This presentation motivates clinicians, researchers and health care leaders to explore the role, recognition and remediation of inequity in medicine. The presentation also teaches health care providers and biomedical researchers how to clinically confront the deadly "isms" that prevent quality care and public wellness. This session, and the entire series, is complimentary. Register [HERE](#).
- **2-3 pm Tuesday, Sept. 1, Implementing a Successful Rural Telemedicine Program** – This webinar will examine the value and benefit of inpatient telemedicine programs, with an emphasis on its use in rural hospitals. The Access Physicians team will discuss specific subspecialties that can be provided through telemedicine to help hospitals retain patients, improve clinical outcomes and be financially successful. The presentation also will provide a road map to implementing those programs. Register [HERE](#).
- **2-3 pm Thursday, Sept. 17, Gratitude: The Path to Resilience, Well-being and Joy** – Gratitude isn't just a practice that makes one feel good. It can boost resilience, improve sleep, be a buffer against anxiety and depression, and reduce burnout in health care professionals. This webinar will explore meditation, journaling and expressive art practices designed

to cultivate gratitude and boost resilience. Attendees also will learn how gratitude can enhance on-the-job effectiveness. Register [HERE](#).

- **8:30 am-12:30 pm Friday, Sept. 18, Iowa Society for Healthcare Engineering Virtual Conference** – The society's fall conference provides education to promote quality patient care, optimize facilities for the COVID-19 environment and prepare for health care's future through improved engineering practices. Register [HERE](#).

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COVID-19
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IOWA HOSPITAL
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