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Sent: Thursday, April 30, 2020 4:15 PM

To: Georgia Maheras <gmaheras@bistatepca.org>

Subject: Bi-State COVID-19 Business Implications Bulletin for CFOs and CEOs - Bulletin #4-including info on the new CMS telehealth guidance

Dear CFOs and CEOs,

This email contains financial/business-focused information. As you know, Bi-State has also been sending COVID-19 bulletins to CEOs and Medical Directors for the past couple months (archive of past bulletins can be found [here](#)).

A huge thank you to all of the CFOs and CEOs who provided detailed information to Bi-State staff this past week about the resources your organizations have already received and your daily operating costs (attached to this email is a nice template from HealthFirst- feel free to copy). This information is imperative for our federal strategy as we look ahead to the future stimulus packages.

Bi-State has developed a [handy table](#) (and offers an insight into how Georgia organizes information) to track the various available resources nationally and in VT and NH.

Toplines include: **NEW Telehealth info was released.** Federal funding, liability, and reopening discussions. Finally, things change, so we encourage you to click the links for updated guidance.

Today's PSA: You are all aware of the need for face coverings- we offer a special shout-out to all of the quilters, seamstresses, tailors, costumers, friends, colleagues, grandparents, etc. who are doing amazing work outfitting everyone with face coverings. We here are especially appreciative that they can keep track of threading the bobbins on their sewing machines (a challenge for many!). You may consider reaching out to your mask-makers to see if they can create gowns too.

Let us know if you have any questions or comments,

Georgia

FEDERAL FUNDING RELATED:

The various federal stimulus packages have provided a combination of grants, loans, advances, and other funding opportunities for health care providers. For ease of review, we are only including updates on those opportunities where there was a change since we last provided this information to you. This includes: HHS Provider Relief Fund, Medicare Accelerated and Advance Program, Paycheck Protection Program, EIDL Loans, HRSA funding, and FCC Telehealth resources.

Today, CMS released new guidance about audio-only billing for telehealth.

In [today's guidance](#), CMS provided additional flexibility for audio-only billing for telehealth. Unfortunately, the new flexibility does not allow FQHCs (and we think RHCs, but are still confirming that) to bill audio-only for telehealth. The codes that are allowed are not codes that FQHCs can bill. We are continuing to work on this issue for you.

HHS Provider Relief Fund

The CARES Act includes a \$100 billion provider relief fund to support health care-related expenses or lost revenue attributable to coronavirus and ensure COVID-19 testing for the uninsured. \$50 billion is for a general allocation; the remainder is for specific allocations defined by HHS. HHS began delivery of the \$50 billion general allocation (\$30 billion) on Friday, April 10, and is now beginning distribution of the remaining \$20 billion:

- Providers need to submit revenue information via the [General Distribution Portal](#) for verification purposes. *We suggest that providers not submit additional information into the portal until we have legal/financial information. Recent information indicates that HHS could reconcile/claw back some of the funds already paid to providers out of this fund. We are hoping to get clarification on this General Distribution for you quickly.*

Submit COVID-19 Claims Reimbursement for Testing and Treatment to Health Care Providers and Facilities Serving the Uninsured-\$10 billion of the \$100 billion fund

HHS will provide claims reimbursement to health care providers generally at Medicare rates for testing uninsured patients for COVID-19 and treating uninsured patients with a COVID-19 diagnosis. [Visit HRSA's COVID-19 Claims Reimbursement site to submit claims.](#)

The Stimulus Package passed on 4/24 includes an additional \$75B for this Provider Relief Fund. We are awaiting information from HHS on the distribution of this funding.

CMS Accelerated and Advance Medicare Payments

CMS ended this program on 4/26. For those who received Medicare advances already, please continue to follow the guidance sent by Medicare regarding repayment.

Paycheck Protection Program

The Stimulus Package passed 4/24 includes new resources for this program (an additional \$321.335 billion). Please be sure to submit your application as soon as possible if you have interest in this program (VT: ACCD has some helpful resources [here](#); NH: COVID-19 business resources are [here](#)).

Economic Injury Disaster Loans & Emergency Economic Injury Grants

These grants provide an emergency advance of up to \$10,000 to small businesses and private non-profits harmed by COVID-19. The latest stimulus package added \$10 billion (for a total of \$20 billion) to this fund.

BPHC – FQHC Funding: Activity Overview and Budget for H8D (Stimulus #3) Funds due 5/8/2020

FQHCs will need to submit their Activity Overview and Budget for the CARES Supplemental H8D (Stimulus #3) funding in EHB by 5/8/2020. HRSA has offered several Q&A sessions about these funds (recordings available), and has a lot of other helpful information about these funds on the H8D TA Page. recently developed a [FAQ page](#) specific to the H8C and H8D funding.

FCC will reimburse costs of telehealth equipment and services- still open!

The [FCC will provide \\$200 million](#) to help eligible health care providers purchase telecommunications, broadband and devices to provide telehealth services to COVID-19 patients. The application can be found [here](#). To date, the FCC has awarded \$13.7 million.

FEMA Public Assistance Program-NEW!

[FEMA's Public Assistance Program](#) provides federal grant assistance to help communities quickly respond to and recover from major disasters or emergencies declared by the President. Once FEMA approves funding for an Applicant, the Applicant becomes a Subrecipient. Attached are (1) a Quick Guide that provides an overview of the Public Assistance process for Applicants seeking assistance under COVID-19 declarations and (2) a COVID-19 Streamlined Project Application.

For Vermont applicants, find more information [here](#). NH applicants can find more information [here](#).

Other Stimulus #3.5 Funding-TBD

We are awaiting additional information about the disbursement of the additional Provider Relief and Testing funding. Stay tuned!

FEDERAL- BUSINESS UPDATES:

FTCA/Liability (see below for some VT-specific information in this area too):

Latest Guidance (from the HRSA FAQs): What are the requirements for coverage under the Federal Tort Claims Act (FTCA) in light of the declaration of a national public health emergency? (Updated: 4/17/2020)

HHS Secretary Alex Azar issued a [declaration of a national public health emergency regarding COVID-19](#) on January 31. As detailed in [PAL 2020-05: Requesting a Change in Scope to Add Temporary Service Sites in Response to Emergency Events](#) (PDF - 185 KB): "HRSA recognizes that during an emergency, health centers are likely to participate in an organized state or local response, including by providing primary or preventive care services at temporary locations." Health centers may set up temporary sites that are "within the health center's service area or a county, parish, or other political subdivision adjacent to the health center's service area" (for in-scope services) with notification made to BPHC within 15 days. [PAL 2020-05](#) (PDF – 185 KB) includes full details and requirements to ensure that the emergency response at temporary locations is considered part of the center's scope of project.

For purposes of FTCA coverage, patients served by covered individuals at temporary locations included in the covered entity's scope of project are considered the covered entity's patients. As such, the covered entity and its providers are covered by FTCA for services provided during the emergency at temporary locations." (See the [FTCA Health Center Policy Manual](#) (PDF – 408 KB) Section (I) F: A record of the services provided for each patient should be maintained.)

In addition, please see: Section (I) C.3 of the [FTCA Health Center Policy Manual](#) (PDF – 408 KB), Provision of Services to Health Center Patients, which states in part: "To meet the FTCA requirement of providing services to health center patients, a patient-provider relationship must be established. For the purposes of FSHCAA/FTCA coverage, the patient-provider relationship is established when: ... Health center triage services are provided by telephone or in person, even when the patient is not yet registered with the covered entity but is intended to be registered."

Please also see the [FTCA Health Center Policy Manual](#) (PDF – 408 KB) Section (I) C.4 regarding Coverage in Certain Individual Emergencies.

Additionally, please see [PAL 2017-07: Temporary Privileging of Clinical Providers by Federal Tort Claims Act \(FTCA\) Deemed Health Centers in Response to Certain Declared Emergency Situations](#) (PDF - 200 KB).

For questions about FTCA as it relates to emergency events, please contact [Health Center Program Support online](#)  or call for FTCA assistance at 877-464-4772, 8:00 a.m. to 5:30 p.m. ET, Monday-Friday (except federal holidays).

FTCA Deeming Application Deadline to be Extended to July 13th

BPHC extended the FTCA application deadline to July 13th. FQHCs are strongly encouraged to complete and submit their applications as soon as possible and those that apply early will receive an expedited review. For more information, see the [HRSA FTCA webpage](#). If you have additional questions, please contact [Health Center Program Support online or call](#) for FTCA assistance at 877-464-4772, 8:00 a.m. to 5:30 p.m. ET, Monday-Friday (except federal holidays).

CDC, DOL, and OSHA Guidance for Businesses and Employers

For the full list of employer and business guidelines from the U.S. Centers for Disease Control (CDC), please click [here](#). The U.S. Department of Labor also has some good resources [here](#), including updated guidance on how the Fair Labor Standards Act intersects with COVID-19 business response. OSHA guidance for employers was recently posted [here](#).

NEW HAMPSHIRE- GENERAL RESOURCES:

General NH COVID-19 Business Resources:

COVID-19 NH business resources can be found [here](#). Information about your insurance coverage, unemployment insurance, loans, etc. are all on this page. Things are changing quickly and we recommend you look here often.

NH Dept of Business & Economic Affairs Surveys State Businesses

To assist with re-opening the state's economy, the Department of Business and Economic Affairs is conducting a confidential [survey](#) of New Hampshire businesses to see how they are meeting the challenges of the COVID-19 pandemic. The information provided will assist efforts to help businesses, and the state's economy, recover in the weeks and months to come.

NH Reopening Task Force

The NH Economic Reopening Task Force (website [here](#)) is now meeting several times each week. They released [draft business guidelines](#) on 4/28.

NEW HAMPSHIRE-FUNDING RESOURCES:

NH Non-Profit Response Fund

[The NH Non-Profit Response Fund](#) (a partnership of the Community Development Finance Authority, the Business Finance Authority, and the NH Center for Non-Profits) has opened up an opportunity for NH non-profits. Requests for funds should cover no more than 90 days of expenditures and may be used for working capital, equipment purchases, program expenses, etc. Eligible organizations may apply for \$2,500 to \$100,000 in loan funds. The loan term is up to 24 months, with the first payment due 6 months after closing. A portion of the request may be forgiven, the forgiven portion will be outlined in the commitment letter. Interest for loans will be 0% for the first 12 months and convert to 2.75% in the 13th month. Loans will accrue simple interest at a rate of 2.75% for months 13 through payoff of the loan. There will be no prepayment penalty. Applications may be submitted through CDFA's online application site (<https://resources.nhcdfa.org>). Funds will be released on a rolling basis as funds are raised, continuing throughout the outbreak and recovery phases of the crisis.

Stabilization Payment Request to NH DHHS

We expect additional stabilization funds to flow through the MCO contracts, which could be on the G&C agenda as early as 5/6.

NH Health Care System Relief Fund – still open

Organizations must make clear in your application the impact of the COVID-19 has had on your finances, how it affects your ability to provide services, and what the impact will be to your patients and your community if you do not receive financial assistance. It seems clear that the priority is keeping the hospitals open, so while you always want to highlight how well you are serving your communities now, you need to make it clear that this situation is unsustainable. Providers can download an application for the COVID-19 Emergency Healthcare System Relief Fund at <https://www.dhhs.nh.gov/documents/covid19-relief-fund-app.docx>. Applications should be submitted by email to healthcarerelieffund@dhhs.nh.gov.

Long-Term Care Stabilization/Funding for Front Line

Unfortunately, the guidance that was released on the [Long-Term Care Stabilization Program](#) specifically disqualifies community health centers. This is contrary to the information we received from the Governor's Office and DHHS and is disappointing.

GOFERR: Want to learn more about NH's plans for federal stimulus money?

The GOFERR website is now up – <https://www.goferr.nh.gov>. We appreciate those of you who have already testified to them about your experience during COVID-19.

VERMONT-GENERAL BUSINESS:

New Work and Safety Requirements/VOSHA Trainings

As Vermont restarts its economy, there are [new work and safety requirements](#) on businesses and employers. All businesses (including those which remained open) must follow Vermont Department of Health and CDC guidelines. The most recent guidance regarding [Work Safe](#) practices can always be found on the [sector guidance](#) and [FAQs for businesses](#) pages.

VOSHA has developed an online training, "[Protecting the Safety and Health of Workers](#)" about COVID-19, prevention techniques, and employer responsibilities. This training (or one that exceeds it) is required for all employees, including those already working (except healthcare workers, first responders, and others already

trained in infection control, personal protection/universal precautions) by 5/4/2020. Employees who complete the training can download a certificate as documentation for their HR file. While health center staff are excluded from the requirement, it may be a good idea to require your staff to undergo the training as your non-clinical staff may be less familiar with the concepts, and as it will provide all staff with good information.

Liability

[Addendum 9 to Executive Order 1-20](#) clarifies that under protections afforded by 20 V.S.A. § 20, Health Care Facilities, Health Care Providers, and Health Care Volunteers would be immune from civil liability for any death, injury, or loss resulting from COVID-19 related emergency management services or response activities, except in the case of willful misconduct or gross negligence. For Health Care Facilities and Health Care Providers, an emergency management service or response activity, includes, but may not be limited to:

- i. Expedited postponement of non-essential adult elective surgery and medical and surgical procedures, including dental procedures, in the safest but most expedient way possible, as ordered by Addendum 3 of the Executive Order, if elective surgeries and medical and surgical procedures are performed at the Health Care Facility or by the Health Care Provider;
- ii. Cancelling or denying elective surgeries or procedures or routine care to the extent determined necessary for the health, safety and welfare of a patient or as necessary to respond to the COVID-19 outbreak;
- iii. Redeployment or cross training of staff not typically assigned to such duties, to the extent necessary to respond to the COVID-19 outbreak;
- iv. Planning, or enacting, crisis standard-of-care measures, including, but not limited to, modifying numbers of beds, preserving PPE, and triaging access to services or equipment as necessary to respond to the COVID-19 outbreak; and
- v. Reduced record-keeping to the extent necessary for Health Care Providers to respond to the COVID-19 outbreak.

Bi-State has been in touch with other provider associations who are interpreting emergency management activities broadly and for services that are not “front line,” but which support the collective COVID-19 effort.

VERMONT-FUNDING:

DVHA Value Based Care Option

DVHA is working with some health care providers, including FQHCs, on a [pilot value-based payment program](#) that approaches a fixed monthly payment based upon historical reimbursement, with a small portion of the reimbursement tied to performance on quality and access measures (claims-only).

OneCare Advances Funding

For May and June, OneCare Vermont will pay care coordination payments in advance to all primary care, home health, designated agencies, and area agencies on aging and will do so under the existing capacity-based model. The new payment model will be suspended until July 1, 2020. For May and June, OCV will pay all primary care practices their Population Health Management payment (\$3.25) in advance to make cash available to these practices sooner.

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