



COVID-19 Weekly Compendium #35

CLINICAL UPDATES

- [Aspirin Use is Associated with Decreased Mechanical Ventilation, ICU Admission, and In-Hospital Mortality in Hospitalized Patients with COVID-19 - Anesthesia & Analgesia \(October 21\)](#)
- [AAP Interim Guidance on Children's Emotional and Behavioral Health During the COVID-19 Pandemic - American Academy of Pediatrics \(October 26\)](#)
- [Transmission of SARS-COV-2 Infections in Households - Tennessee and Wisconsin, April–September 2020 - USCDC \(October 30\)](#)
- [COVID-19 Science Update released - USCDC \(October 30\)](#)

INTERESTING READS

- [Eli Lilly's antibody treatment proves unhelpful for advanced COVID cases - Fortune/Health \(October 26\)](#)
A paused clinical trial of an Eli Lilly & Co. experimental antibody therapy won't resume after federal researchers concluded the drug likely wouldn't help hospitalized Covid-19 patients with advanced cases.
- [Why Has COVID-19 Hit Minorities Harder? - Medscape \(September 8\)](#)
Black Americans make up about 13% of the US population, but in some states they represent 30% of COVID-19 cases. Their death rate is also two to four times higher.
- This week the USCDC received [forecasts of new reported COVID-19 cases](#) over the next 4 weeks from 32 modeling groups. (Updated November 1)
 - This week's national ensemble forecast indicates an uncertain trend in new COVID-19 cases reported over the next four weeks and predicts that 310,000 to 710,000 new cases will likely be reported during the week ending November 21, 2020.
 - Over the last several weeks, more reported cases than expected have fallen outside of the forecasted prediction intervals. This suggests that current forecast prediction intervals may not reflect the full range of future reported case numbers. Forecasts for new cases should be interpreted accordingly.
- [With Cases Rising in Maine & Nationwide, Mills Administration Announces Measures to Prevent Spread of the Deadly COVID-19 Virus - maine.gov \(November 1\)](#)
 - Extending funding for response efforts by municipalities and tribes;
 - Postponing the start of indoor service in bars and tasting rooms;
 - Effective Nov. 4, returning indoor gatherings to the prior limit of 50; and
 - Ending the testing/quarantine exemption for travel to/from Connecticut, New York and New Jersey.

Rural Healthcare Surge Readiness for Ambulatory Care

Compilation of essential resources for ambulatory settings such as outpatient primary care, subspecialties, surgical, dental, mental health, and school-based clinics.

Upcoming NACHC Webinar

Finance Office Hours for Health Centers: Strategies to Manage Operations During COVID – 19

November 18 | 2:00 PM – 3:00 PM ET

[FOH Session 2: Fiscal Cliff, Provider Relief Funds and Cares Act Update](#)



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MPCA 2020 CLINICAL & ADMINISTRATIVE EXCELLENCE AWARD WINNERS

2020 Clinical and Administrative Excellence Award Winners

 <p>BEHAVIORAL HEALTH EXCELLENCE AWARD ★ Douglas Levesque, LCSW, LADC, CCS Fish River Rural Health</p>	<p>COMMUNITY CHAMPION AWARD ★ Sharyl White, Chief Information Officer Penobscot Community Health Care</p> 
 <p>UNSUNG HERO AWARD (CO-RECIPIENT) ★ Mallory Gilcrest, Community Health Worker Greater Portland Health</p>	<p>EXCELLENCE IN ORAL HEALTH AWARD ★ Abhay Ektare, DDS Eastport Health Care Inc.</p> 
 <p>UNSUNG HERO AWARD (CO-RECIPIENT) ★ Ed Farrell, Director of IT and Facilities Eastport Health Care, Inc.</p>	<p>HOLLY GARTMAYER-DEYOUNG PRESIDENT'S AWARD ★ Nirav D. Shah, MD, JD, Director Maine Center for Disease Control and Prevention</p> 
 <p>CAROL ECKERT, MD MEMORIAL AWARD ★ Renee Fay-LeBlanc, MD Greater Portland Health</p>	<p>NURSE PRACTITIONER EXCELLENCE AWARD ★ Amy West, MSN, FNP-C Penobscot Community Health Care</p> 
 <p>CLINICAL SUPPORT EXCELLENCE AWARD ★ Brandy Argir, RN, BSN Eastport Health Care, Inc.</p>	<p>MPCA STAFF RECOGNITION AWARD ★ Sarah Morrill, RN, BSN, HNB-BC Maine Primary Care Association</p> 



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Congratulations!





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POLICY UPDATE

Novartis Retreats, But Not Entirely, on 340B Contract Pharmacy: Last Friday, drug manufacturer Novartis announced changes to its policy on provision of 340B discounts on drugs dispensed by contract pharmacies. It said in a new [fact sheet](#) that Ryan White clinics, **community health centers**, and other federal grantee covered entities will continue to receive 340B discounts “exactly as they do today.”

Provider Relief Fund Latest Definition of “Lost Revenues”: On [October 22, 2020](#), HHS again revised the definition of “lost revenues,” which RFP funding may be used to offset, defining it as the difference between a provider’s actual patient care REVENUE in CY 2019 vs. CY 2020, calculated quarterly. This is tighter than the definition that HHS announced in June (any reasonable estimate offered by the provider), but looser than the definition announced in September (difference between net CY19 and CY20 income).

COVID Relief Update: Speaker Pelosi spoke with reporters late last week and made a convincing case for passing COVID relief in December. She highlighted various programs that expire by the end of the year – a clear need to get things done – and expressed the view that it would be better not to saddle an incoming president (she predicts) with unfinished business. “We want to have as clean a slate as possible going into January.”

CMS Releases Vaccine Administration Interim Final Rule: On [October 28, 2020](#), CMS issued an [Interim Final Rule](#) establishing vaccine-related coverage provisions for Medicare, Medicaid, CHIP, and private insurance. The [rule](#) has not been published in the Federal Register, but will have a 30-day comment period starting the day it is published. The rule states that as a condition of receiving free COVID-19 vaccines from the federal government, providers will be prohibited from charging consumers for administration of the vaccine. NACHC is reviewing and will follow up with more information. CMS issued toolkits aimed at [state Medicaid agencies](#), providers [who will administer the vaccine](#), and health insurance plans. Some important highlights include:

- States that receive the temporary FMAP increase must cover COVID-19 testing services and treatments for all Medicaid enrollees without cost sharing during the public health emergency (PHE). After the PHE, Medicaid programs must still be required to cover COVID-19 vaccines for several populations.
- Beneficiaries with Medicare will have no cost sharing for COVID-19 vaccines.
- Providers can be reimbursed for administering the COVID-19 vaccine to individuals without insurance through the PRF.

WORKFORCE UPDATE

Maine Revises Physician Assistant Licensing Requirements: This past spring, the Legislature passed “An Act To Improve Access to Physician Assistant Care” changing how physician assistants (“PAs”) are licensed and their relationships with physicians, and permitting them to practice independently in certain circumstances. The new statute eliminates the physician supervision requirement and opens the door for experienced PAs to practice more independently. MPCA is concerned that the proposed Rule to implement the statute has left out HCs - please see our response [here](#). For more information on the statute, [click here](#).

Readiness to Train Assessment Tool (RTAT): As a part of HRSA’s Health Professions and Education & Training (HP-ET) initiative, a link to the [RTAT](#) has been distributed to FQHC/look-alikes across the nation as a step toward improving health centers’ capacity, resources, and organizational abilities needed to launch or expand health professions training programs. This survey is important as it not only determines readiness or status of engagement in HP-ET programs at health center, state, and regional levels but also helps to identify barriers in implementing these programs. The survey results will direct future HRSA workforce investments.



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Is Your Health Center Hiring?

Click on the Job Board icon to utilize the new MPCA Job Board and list your openings on our website!

TELEHEALTH UPDATE

HITEQ Learning Collaborative - Hybrid Health Center: Building Systems that Sustainably Support both Telehealth and In-Person Care

This HITEQ Learning Collaborative will bring together health centers across the nation in a series of four structured virtual learning sessions in which participants engage with subject matter experts in didactic learning and discussion. Discussion topics will include a framework for telehealth services, application of the telehealth framework to hybrid care and defining a multi-stage approach to offering in-person care, barriers to accessing telehealth or in-person care and strategies to overcome barriers, and determining next steps to enhance hybrid care.

The session schedule is:

- **November 4** Session 2 - Developing a Multi-Stage Approach to Hybrid Care
- **November 18** Session 3 - Understanding Patient Barriers to Care due to the Pandemic and Beyond
- **December 2** Session 4 - Creating a Patient-Centric Approach for Telephonic and In-Person Hybrid Care

For more information and to register, [click here](#).

For updates from insurers and other relevant information concerning Telehealth, please visit the [Telehealth Resources](#) page on the [MPCA website](#).

RACIAL JUSTICE/HEALTH DISPARITY RESOURCES & INFORMATION

For resources and other relevant information, please visit the [Racial Justice/Health Disparities Resources](#) page on the [MPCA website](#).

Grief, Loss and Mourning in the Time of COVID

Thursday, November 19, 2020 | 4:00 - 5:00 p.m. EST

COVID has upended the ways in which we understand what it means to grieve and to mourn. We invite you to join us in reflecting on our experiences of grief, loss and mourning in the time of COVID.

For more information or to register, [click here](#).



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Please click on the calendar for a full listing of upcoming MPCA trainings and events. These events can be viewed by the day, month or as a list.

CHCNET UPDATE

Visit Volume Impact Dashboard Project: MPCA is continuing the *Visit Volume Impact Dashboard* project to understand how COVID-19 has impacted health centers and how health centers have responded. Please continue to report your monthly data via [this spreadsheet](#) and email it, or any questions, to gparent@mepca.org.

For the latest information concerning the MPCA's HCCN, **Community Health Center Network of Maine (CHCNet)**, or for support with health information technology needs, please visit the [CHCNet Member Portal](#) or contact Greg Parent: gparent@mepca.org.

RESOURCES ADDENDUM

For the **Stay Informed, Sign Up, Maine Helps**, and **Coping and Stress Resources** information, please visit the [Weekly Compendium Resources Addendum](#) page on the [MPCA website](#).

MPCA CONTACT INFORMATION:

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**** Join MPCA on SLACK!** We are building our communication outreach capacity between meetings using the Slack communication platform. Many of you are already connected with us in several peer groups including our **Clinical Channel** and our **Billing and Coding Chanel**. Please feel free to reach out to it@mepca.org for help with joining. ******