

COVID-19 WEEKLY COMPENDIUM

NOVEMBER 2, 2021 | YEAR 2, VOLUME 35

CLINICAL UPDATE

[3 takeaways from the emergence of the 'Delta Plus' coronavirus variant](#) - *STAT News (10/27)*

[If Covid tests are scarce, should vaccinated people test for Thanksgiving?](#) - *STAT Rounds (10/27)*

[FDA authorizes Pfizer Covid vaccine for kids 5-11, needs more time on Moderna's for adolescents](#) - *STAT News (11/1)*

INTERESTING READS

[The CDC added people with mood disorders to a list of high-risk individuals eligible for booster shots](#) - *Business Insider (10/27)*

The Centers for Disease Control and Prevention added mood disorders to a list of conditions that would put people at higher risk for severe symptoms of COVID-19, The Washington Post reported.

[Cheap, generic anti-depressant may reduce severe Covid-19 disease, study finds](#) - *CNN Health (10/28)*

A cheap, generically available anti-depressant may reduce the risk of severe Covid-19 disease by close to a third in people at high risk, researchers reported Wednesday.

POLICY & COMMUNICATIONS UPDATE

Biden Announces Build Back Better (BBB) Framework, Draft Bill Released

On October 28, 2021, President Biden outlined his \$1.75T framework for the BBB Act. The [draft bill](#) contains \$135B for an expansion of the ACA premium tax credits through 2025 to help close the Medicaid coverage gap; \$35B for an expansion of Medicare to cover hearing benefits and \$150B for Medicaid home health care. The framework also includes investments in combatting climate change, affordable housing, and childcare and is fully paid for through tax increases on corporations and wealthy Americans as well as repealing the prescription drug rebate rule. Health center highlights include:

- \$1 billion for health center capital;
- \$3.37 billion for Teaching Health Center GME;
- \$650 million for the National Health Service Corps;
- \$200 million for Nurse Corps; and
- Significant strengthening of Medicaid and ACA benefits, including continuation of ACA tax credits (especially for people in non-expansion states); permanent expansion of the CHIP program; expanded investments in outreach and enrollment; 12 months continuous Medicaid coverage for pregnant/postpartum individuals and 1 year of continuous Medicaid coverage for children; and expansion of 100% FMAP for Urban Indian Organizations (UIO) and Native Hawaiians to 16 quarters, among others.

A summary of other provisions is included [here](#). Notably, the bill does not include several popular provisions from the original bill, such as the authority for Medicare to negotiate prescription drug prices and Medicare dental coverage. It is unclear whether those provisions will ultimately be included but there is broad understanding that there will be a manager's amendment.

Judge Issues Decision in Eli Lilly 340B Litigation

Last Friday, the Indiana District Court issued a ruling vacating HRSA's May 17th violation letters and directed the agency to review the letters for further consideration in light of the Court's opinion. The Court found that the May 17th letters violated the Administrative Procedure Act (APA) because the letters represented a different position on HRSA's enforcement authority over contract pharmacies in the 340B program compared

to the 1996 and 2010 HRSA guidance and Government Accountability Office’s 340B report. This decision does not immediately impact health centers continued use of contract pharmacies.

It is important to note, the Court recognized evidence establishing that contract pharmacy arrangements with covered entities existed when Congress enacted the 340B statute. Additionally, the Court found that Eli Lilly’s restrictions, which limited covered entities to a single contract pharmacy based on Eli Lilly’s approval to receive the 340B price, were not in line with the intent of the 340B statute. The next step is for HRSA to issue guidance or new violation letters reasserting the same position and include an explanation detailing the agency’s reasons for taking a “new” position on contract pharmacies and their scope of enforcement.

No Surprises Act/Good Faith Estimate Requirements Toolkit

On September 30, 2021, HHS released its [second Interim Final Rule \(IFR\)](#) to protect consumers from surprise medical bills, implementing the “No Surprises Act” enacted in December 2020. This IFR establishes a requirement for health care providers (including CHCs) to provide uninsured and self-pay patients with a Good Faith Estimate (GFE) of their total out-of-pocket cost for services upon request or after they schedule an appointment (provided that it was scheduled at least 3 days in advance.)

There is now a [toolkit](#) to assist CHCs with understanding the new CMS requirement to provide all uninsured patients with a Good Faith Estimate of their expected costs, if they schedule an appointment at least 3 days in advance or otherwise request the information. The toolkit contains:

- A summary of the requirements and timelines;
- FAQs organized by topic;
- A draft template a GFE form that CHCs can adapt for their use;
- A flowchart outlining operational steps, such as if and when a GFE must be provided;
- A list of issues we will tentatively plan to raise in our comments to CMS; and
- A list of other resources being developed.

SAVE THE DATE
Maine is Not Prepared for the COVID-19 Mental Health Crisis
A SUMMIT TO REIMAGINE
COMMUNITY MENTAL
HEALTH SERVICES

Tuesday, November 30, 2021
10am- 3pm
Augusta Civic Center

Consumers - Clients - Advocates -
Family Members - Providers - Policy Makers

For more information: jjhmaine@maine.rr.com

**BROUGHT TO YOU BY: ALLIANCE FOR ADDICTION AND MENTAL
HEALTH SERVICES, BEHAVIORAL HEALTH COMMUNITY
COLLABORATIVE, CONSUMER COUNCIL SYSTEM OF MAINE,
NAMI, & PATHWAYS.**

WEBINARS OF INTEREST

**National Center for Equitable Care for Elders presents
Lessons Learned: COVID-19 Health Literacy in Special & Vulnerable Populations**

Wednesday, Nov 10 | 1:00 - 2:00 PM | [Registration](#)

This webinar will discuss lessons learned related to addressing low levels of health literacy and the spread of misinformation about COVID-19, and how health centers that serve farmworker families and community-dwelling older adults can effectively support patient healthcare engagement. This activity is co-facilitated with the [National Center for Farmworker Health \(NCFH\)](#).

NIHCM presents The Implications of Long COVID for Patients & the Health Care System

Thursday, November 17 | 12:00 PM | [Registration & Information](#)

As the COVID-19 pandemic continues, there is an increasing need to understand and respond to long COVID. This webinar will bring together experts to discuss the latest research on long COVID and strategies to support individuals with the conditions.

**Reminder! Starts November 10
The Winter Wellness Series**

Hosted by Maine Primary Care Association, this free series will cater to all member health center staff who are interested in receiving emotional support and stress management tools. Work Force EAP and StrengthenME will co-facilitate to provide clinical supports during this 3-month series of webinars and lunch and learns. For more information, [click here](#).

**Reminder! Weitzman ECHO Series on COVID-19
Back for a Limited Series!**

Second Session: Wednesday, November 3 | 12:00 PM | [Registration & Information](#)

Join us as we discuss updates to the pandemic, how organizations have shifted their workforce, vaccine boosters, and promising practices moving forward. We will be joined again by Dr. Stephen Scholand to give us COVID-19 (and variant) updates at the beginning of each session.

RACIAL JUSTICE/HEALTH DISPARITY RESOURCES & INFO

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



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!

BILLING, CODING & TELEHEALTH NEWS

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

CHCNET UPDATE

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 Michael Pancook: mpancook@mepca.org.

RESOURCES ADDENDUM

[AFTER HOURS](#) - MPCA OFFICE HOURS RESOURCES

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



Please click on the calendar for a full listing of upcoming MPCA trainings and events.

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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 Channel**. Please feel free to reach out to it@mepca.org for help with joining.