

MMHPI COVID-19 Regulatory & Reimbursement Newsletter

Letter to Providers #35: State and Federal Updates – November 20, 2020

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With federal and state health care policies changing in response to COVID-19, the Meadows Mental Health Policy Institute (MMHPI) is issuing *COVID-19 Regulatory & Reimbursement Newsletters* to support providers. In these newsletters, we highlight recent changes and extensions to regulatory and reimbursement rules, as well as newly published or updated guidance and answers to frequently asked questions.

These newsletters, along with additional information on mental health resources during a pandemic, are posted here: <https://www.texasstateofmind.org/covid-19/>. If you would like to have additional organizations added to our distribution list or have follow up questions on the content, please email Catie Hilbelink at chilbelink@mmhpi.org.

Texas Updates

State Issues New Survey Related to Vaccine Distribution

Summary	The Texas Department of State Health Services (DSHS) is urging Texas hospitals to participate in its new survey to determine the number of health care workers who have potential for direct or indirect exposure to COVID-19 patients or infectious materials. The results will be used to help inform COVID-19 vaccine distribution once the vaccine is available to high priority groups, such as health care workers. The Texas Hospital Association (THA) has also posted the questions in their entirety here , so hospitals can plan for their responses before taking the online survey.
Link	https://survey.alchemer.com/s3/6031210/Hospital-Healthcare-Worker-Population

Antibody Treatment Deliveries to Texas Hospitals

Date	November 13, 2020
Summary	<p>Texas hospitals will begin receiving allotments of bamlanivimab, the Eli Lilly monoclonal antibody that the United States Food and Drug Administration (FDA) approved last week. Texas is receiving 5,780 units, which can treat 5,780 patients. The medication is being distributed through AmerisourceBergen, similar to remdesivir. At the facility level, the doses were allocated by the state based on hospitalization rates, new admissions, and geography. As a reminder, last week the FDA announced its plan to ship cases of the treatment to states as allocated by the federal government. A few additional facts:</p> <ul style="list-style-type: none"> • The product will be provided free of cost, and hospitals will be able to charge an administration fee. • It is for people with mild to moderate COVID-19, and it should be administered as soon as possible after a positive viral test for SARS-CoV-2 and within 10 days of symptom onset. • Administered doses must be reported via ImmTrac2, similar to remdesivir; additional follow-up reports will not be required.

- It is anticipated that these drugs will need to be administered via a one-hour infusion process; patients will need to stay onsite for a period of time to ensure there is no hypersensitivity reaction.
- The medication is for certain kids ages 12 and older and for adults 60 and older with increased risk for adverse outcomes.
- Note that for every 20 people who receive this transmission, it prevents one hospitalization.
- This initial allocation, known as phase 1, is focused on hospitals; phase 2 will be broader and include other facilities.
- Here is a [fact sheet](#) with additional details.

Link

<https://gov.texas.gov/news/post/governor-abbott-dshs-announce-distribution-of-covid-19-antibody-therapy-to-hospitals-across-texas>

New State Reporting Requirements for Facilities Currently Reporting COVID-19 Lab Data to the National Healthcare Safety Network

Date	November 17, 2020
Summary	<p>Effective November 14, 2020, long-term care facilities that are currently submitting COVID-19 laboratory data to the National Healthcare Safety Network (NHSN) should discontinue their direct reporting to the Department of State Health Services' National Electronic Disease Surveillance System (NEDSS). Any long-term care facilities that are not reporting to NHSN must continue to report to NEDSS.</p> <p>Reporting through NHSN will fulfill the state reporting requirement for facilities actively entering data into NHSN.</p> <p>Important: Facilities must continue to comply with their local health authority directive for reporting.</p>
Link	https://www.tmhp.com/news/2020-11-17-new-state-reporting-requirements-facilities-currently-reporting-covid-19-lab-data

FAQs: Assisted Living Facilities

Date	November 17, 2020
Summary	The Texas Health and Human Services Commission (HHSC) has published updated COVID-19 frequently asked questions for assisted living facility providers.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/hhsc-publishes-updated-covid-19-frequently-asked-questions-alf-providers

Incorrect Training Link for the BinaxNOW COVID-19 Test Kits

Date	November 13, 2020
Summary	<p>HHSC posted an incorrect training link in an alert issued on October 15, 2020. The link provided to the Binax 100 training and offered by the Texas Division of Emergency Management is incorrect and not meant for long-term care providers.</p> <p>Due to the error, HHSC pulled down provider letter (PL) 20-49 and several webinar recordings that referenced the training. When the link is corrected and available, HHSC will repost the documents and issue an updated alert with the correct link.</p>
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/11/incorrect-training-link-binaxnow-covid-19-test-kits

Federal Updates

Mental Health–Related Emergency Department Visits Among Children

Date	November 13, 2020
Summary	The Centers for Disease Control and Prevention (CDC) reports that beginning in April 2020, the proportion of children’s mental health-related emergency department (ED) visits among all pediatric ED visits increased and remained elevated through October. Compared with 2019, the proportion of mental health-related visits for children aged 5-11 and 12-17 years increased approximately 24% and 31%, respectively. The implications for public health practice include: monitoring indicators of children’s mental health; promoting coping and resilience; and expanding access to services to support children’s mental health are critical during the COVID-19 pandemic.
Link	https://www.cdc.gov/mmwr/volumes/69/wr/mm6945a3.htm?s_cid=mm6945a3_w#suggestedcitation

Pharmacies to Administer COVID-19 Vaccine

Date	November 12, 2020
Summary	U.S. Department of Health and Human Services (HHS) recently announced that about 60% of the nation’s retail pharmacies have agreed to participate in a federal program to administer COVID-19 vaccines at no cost to patients once it’s approved. HHS last month issued guidance allowing state-licensed pharmacists and state-authorized pharmacy interns under their supervision to administer COVID-19 vaccines and tests authorized or licensed by the FDA, subject to certain requirements.
Link	https://www.hhs.gov/about/news/2020/11/12/trump-administration-partners-chain-independent-community-pharmacies-increase-access-future-covid-19-vaccines.html

CPT Codes for Two COVID-19 Vaccine Candidates

Date	November 10, 2020										
Summary	The American Medical Association (AMA) announced current procedural terminology (CPT) codes for Pfizer and Moderna’s COVID-19 vaccine candidates. The codes are effective for use once the respective vaccines receive FDA approval or an emergency use authorization (EUA). AMA announced the codes in advance to facilitate updating of U.S. health care electronic systems.										
	<table border="1"> <thead> <tr> <th>Vaccine Code</th> <th>Vaccine Code Descriptor</th> <th>Manufacturer</th> </tr> </thead> <tbody> <tr> <td>91300</td> <td>Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use</td> <td>Pfizer, Inc</td> </tr> <tr> <td>91301</td> <td>Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use</td> <td>Moderna, Inc</td> </tr> </tbody> </table>	Vaccine Code	Vaccine Code Descriptor	Manufacturer	91300	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use	Pfizer, Inc	91301	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use	Moderna, Inc	
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Link	https://www.ama-assn.org/press-center/press-releases/ama-announces-vaccine-specific-cpt-codes-coronavirus-immunizations										

Non-invasive Resuscitation Therapy

Date	October 30, 2020
Summary	HHS and Assistant Secretary for Preparedness and Response (ASPR) released guidance on considerations for health care providers exploring high-flow nasal cannula therapy, a less-invasive oxygen therapy than mechanical ventilation that has shown clinically useful in treating severe and critical COVID-19 patients.
Link	https://www.phe.gov/emergency/events/COVID19/SNS/Cannulation/Pages/default.aspx

Authorization of First COVID-19 Test for Home Self-Tests

Date	November 17, 2020
Summary	FDA issued an EUA for the first COVID-19 diagnostic at-home test, the Lucira COVID-19 All-In-One Test Kit, a molecular test that provides results in 30 minutes or less and is authorized for use by prescription only.
Link	https://www.hhs.gov/about/news/2020/11/17/secretary-alex-azar-statement-fda-authorization-first-covid-19-test-home-self-tests.html

CDC Resource and Reports

New Science on Masks

Date	November 10, 2020
Summary	CDC recently issued a scientific brief on community use of masks during the COVID-19 pandemic. The brief notes that the prevention benefit of masking is derived from the combination of source control and personal protection for the mask wearer.
Link	https://www.cdc.gov/coronavirus/2019-ncov/more/masking-science-sars-cov2.html

CMS/CDC Targeted COVID-19 Training for NF, ALF Providers

Summary

Nursing facility (NF) and assisted living facility (ALF) providers are reminded of the availability of CMS/CDC on-demand, pre-recorded, and live Q&A COVID-19 trainings. The available topics are those that NF and ALF staff and management must know to manage the COVID-19 pandemic.

The following trainings are available:

- [Targeted COVID-19 Training for Frontline Staff and Management](#)
- [CMS/CDC Fundamentals of COVID-19 Prevention for Management](#)
- [CMS/CDC Fundamentals of COVID-19 Prevention for Nursing Home Management - Bi-weekly Live Q&A Sessions](#)

Note: the training descriptions indicate that the trainings are geared toward NF staff, however, the key principals are also applicable to ALF staff.