

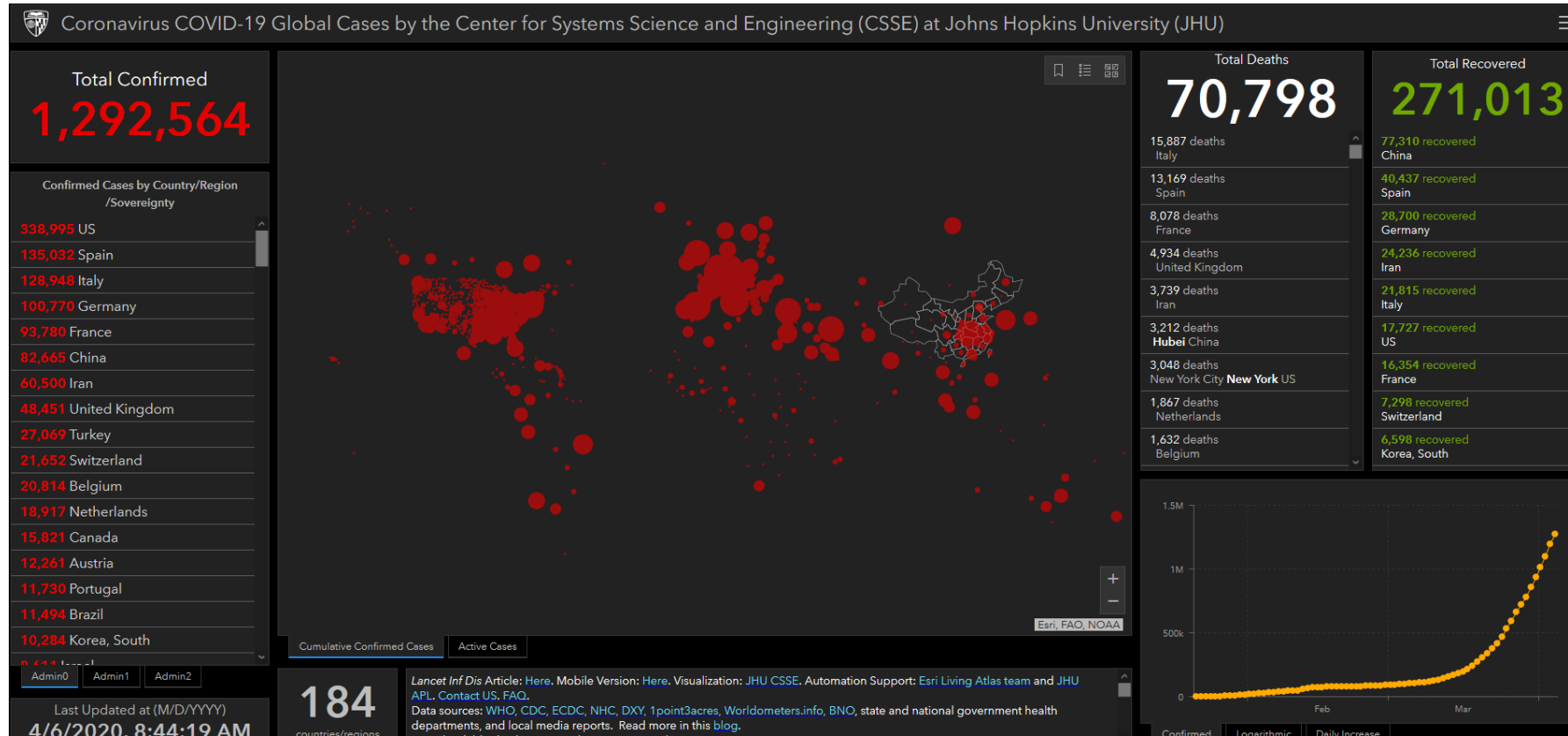
# Preferred Provider Network Weekly Broadcast

- **COVID-19 Weekly Update**
- **April 8, 2020**

# Agenda

- COVID-19 update
- Executive order from our Governor
- CMS updates
- Community updates
- PPE updates
- Update from HonorHealth

# Johns Hopkins tracker – link on ICP site

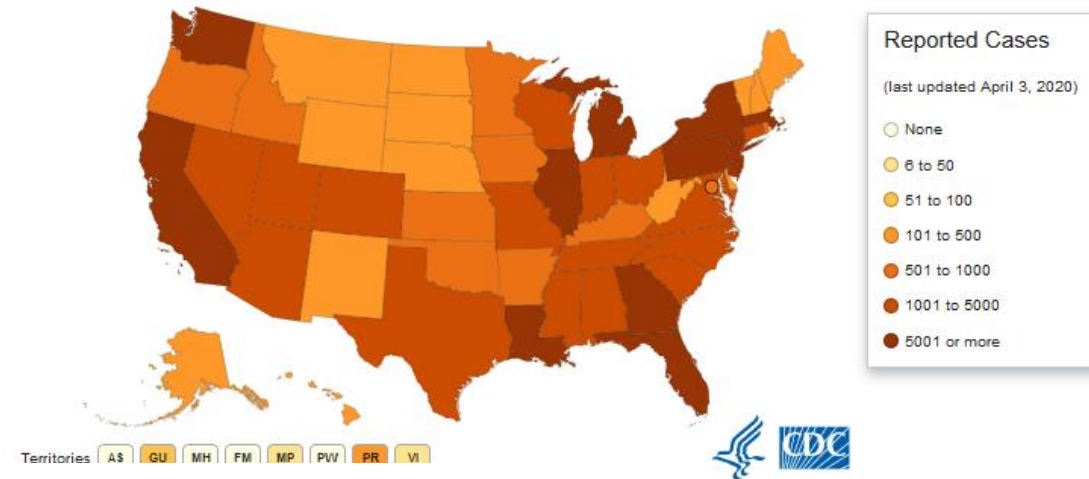


# CORONAVIRUS STATUS 4/6/20

- **World** 1.3m cases, 70,798 deaths
- **US** 338,995 cases, 9,683 deaths (US #1 in world for cases)

- **Arizona** 2,456 cases, 65 deaths

- **HonorHealth**

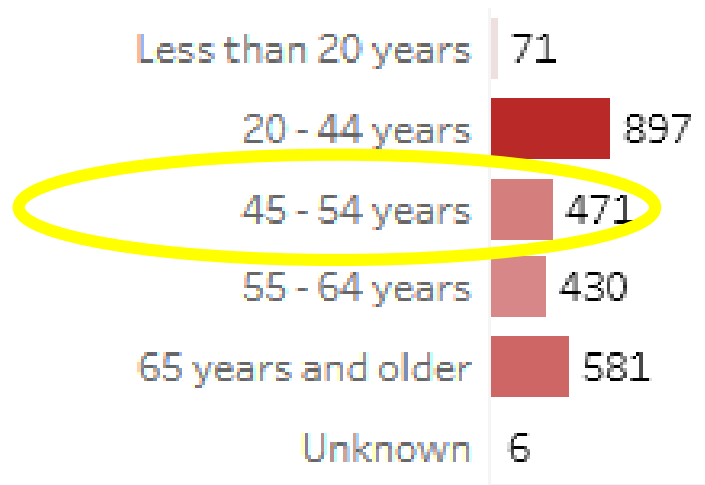


Updated: 4/6/2020

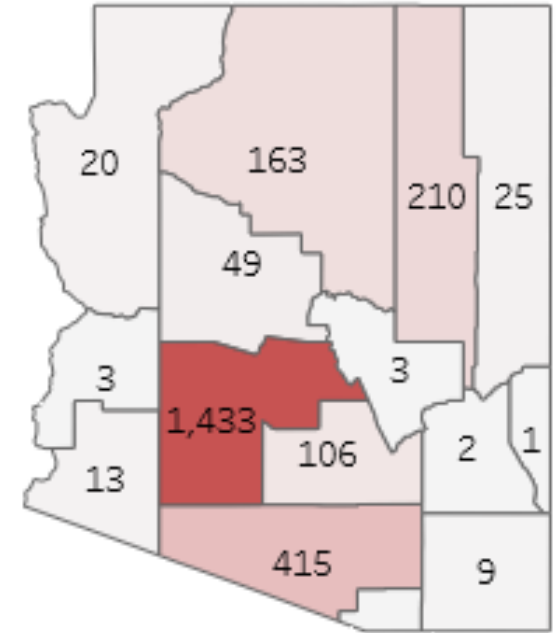
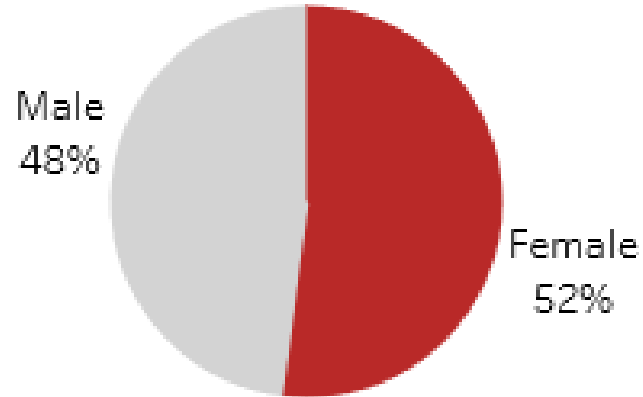
Current inpatients tested positive	Current inpatients pending results
31	16

# Arizona Cases – Demographics

COVID-19 Cases by Age Group



COVID-19 Cases by Gender



Date Updated: 4/6/2020

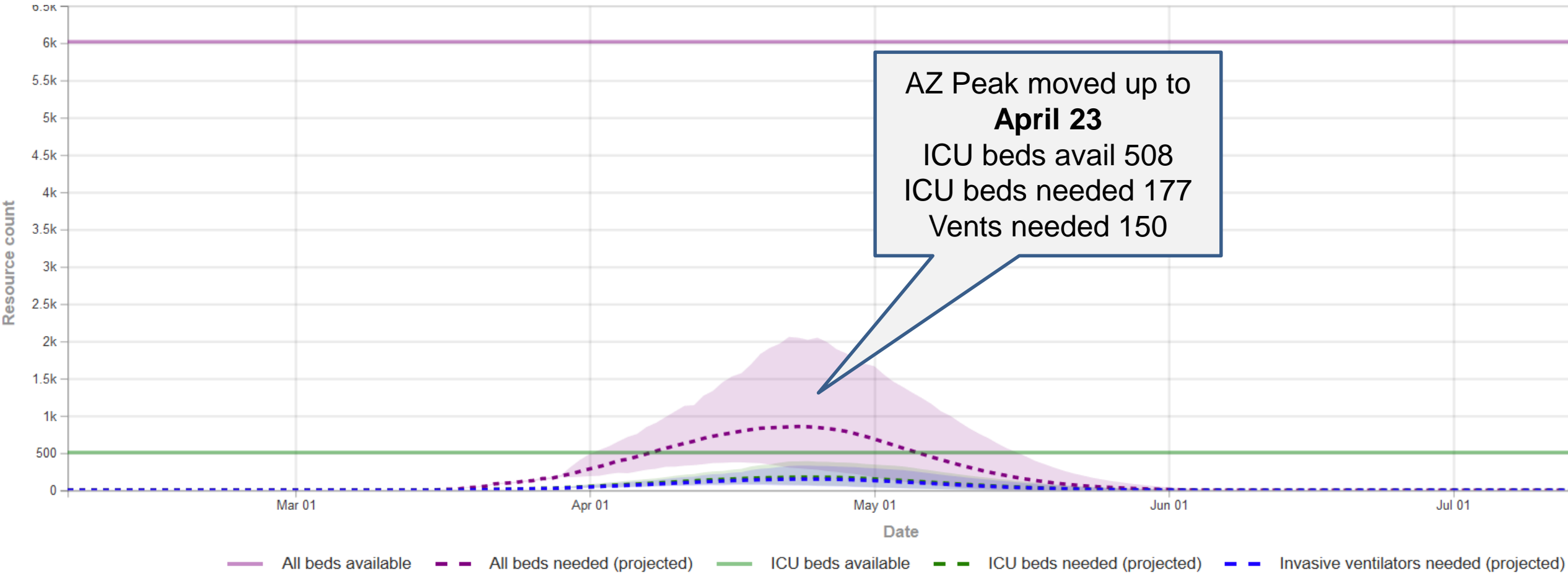
<https://www.azdhs.gov/preparedness/epidemiology-disease-control/infectious-disease-epidemiology/index.php#novel-coronavirus-home>

## U.S. Cases as of 4/6/20

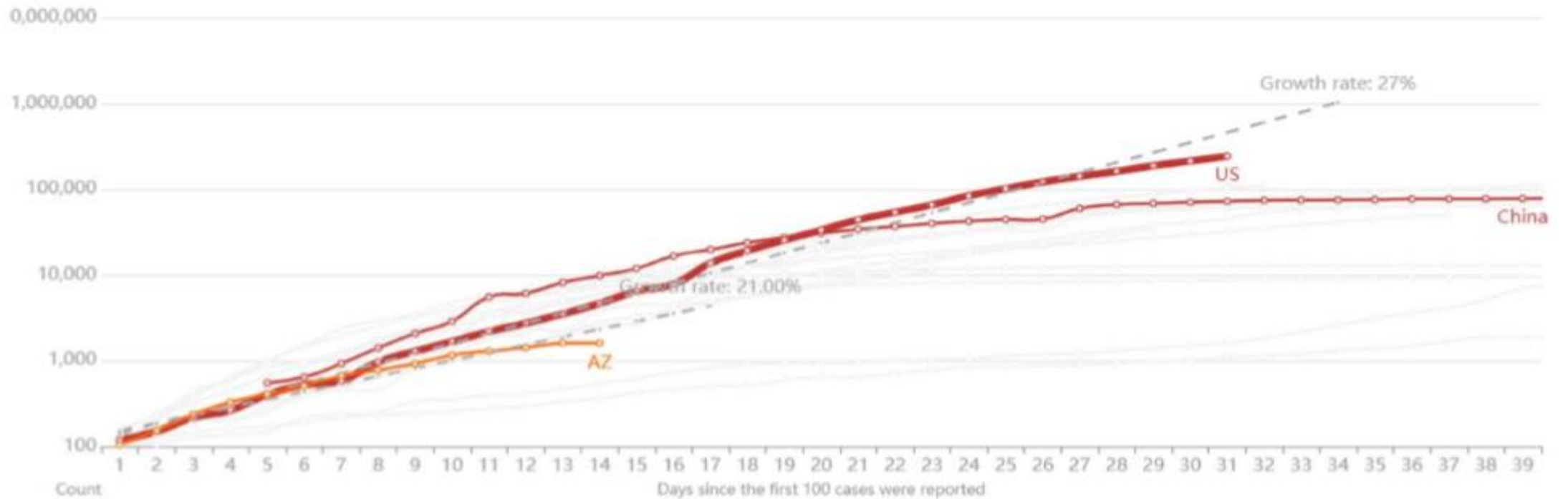
State	Cases	Deaths
New York	130,689	4,758
New Jersey	37,505	917
Michigan	15,718	617
California	15,240	351
Florida	13,324	236
Louisiana	13,010	477
Pennsylvania	12,980	162
Massachusetts	12,500	231
Illinois	11,256	274
Washington	7,984	338

Source: CDC; County Health Depts, Johns Hopkins resource center; Worldometers.info/coronavirus

# When will the peak hit Arizona?



# AZ Curve Appears to be Flattening



Counting each region from the first day when 100+ confirmed cases were reported. China/Hubei started on the 4 days after the first 400-500 cases were reported to align the graph. Data based on Johns Hopkins University [COVID-19 dataset](#). Inspired by [Coronavirus tracked: the latest figures as the pandemic spreads](#).



# Maricopa County Stats 1/22/20 - 4/5/20

	Cases	Hospitalized (19% of Cases)	ICU (6% of Cases)	Deaths (2% of Cases)
0-19 years	2%	0%	0%	0%
20-44 years	39%	18%	14%	0%
45-64 years	36%	35%	37%	23%
65 + years	23%	47%	49%	77%

# Patient Severity Highest with $\geq 65$ years old or $\geq 1$ chronic condition

Table 2. Severity of confirmed COVID-19 cases by age group

	Hospitalized		ICU		Deaths	
	Number	(%)	Number	(%)	Number	(%)
0-19 years	1	(0%)	0	(0%)	0	(0%)
20-44 years	56	(19%)	15	(16%)	0	(0%)
45-64 years	101	(35%)	34	(36%)	8	(23%)
65+ years	130	(45%)	45	(48%)	27	(77%)
<b>Total</b>	<b>288</b>	<b>(100%)</b>	<b>94</b>	<b>(100%)</b>	<b>35</b>	<b>(100%)</b>

Table 3. Confirmed COVID-19 cases in each age group and with at least one chronic medical condition who were hospitalized, admitted to the ICU, or died

	0-19 Years		20-44 Years		45-64 years		65+ years		1+ chronic medical condition	
	Total=36	(%)	Total=580	(%)	Total=538	(%)	Total=340	(%)	Total=372	(%)
Hospitalized	1	(3%)	56	(10%)	101	(19%)	130	(38%)	146	(39%)
ICU	0	(0%)	15	(3%)	34	(6%)	45	(13%)	51	(15%)
Deaths	0	(0%)	0	(0%)	8	(1%)	27	(8%)	24	(7%)

# COVID-19 in Long-term Care Facilities

- 26 facilities have residents with COVID-19 patients
- 77 residents with COVID-19
  - 26 (34%) hospitalized
  - 13(17%) deaths
- Enforce sick policies
  - Remove any disciplinary action for sick leave
  - NO ONE with respiratory symptoms should work
  - Fever alone is NOT a good screen tool
    - < 50% of patients in China who entered the hospital had fever (90% eventually developed)

# Testing for “clearance”

- Do NOT test patients to ensure they have cleared the virus
  - Not enough testing supplies
  - Virus can remain in nasopharynx up to 3 weeks even without symptoms
- CDC, ADHS, MCDPH have clinical definition to release infected patient from isolation
  - 7 days after last positive test AND
  - At least 72 hours symptoms-free
- Do not keep patients in the hospital for isolation

## **MASK updates for the Public**

### **Recommendation Regarding the Use of Cloth Face Coverings, Especially in Areas of Significant Community-Based Transmission**

- CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies) **especially** in areas of significant community-based transmission (Arizona is considered **WIDESPREAD**).

- <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html>

# AZ Exec Orders Updates

- 4/2/2020: Board of Pharmacy
  - Allows pharmacists to dispense emergency 90-day supply of maintenance medications with another 90-day refill
  - Controlled substances are not considered maintenance meds
  - Waive electronic prescribing requirements, extend follow-up paper prescription to pharmacy from 7 days to 15 days
  - Allow phone-in prescriptions for Schedule II meds via fax, scan or photo
  - Allows pharmacists to interchange therapeutic equivalents
  - For hydroxychloroquine and chloroquine:
    - The prescription must be presented with a diagnosis for COVID-19 from prescriber
    - Prophylactic prescriptions for the prevention of COVID-19 are strictly prohibited
    - This does not apply to patients these for treatment other than COVID-19

# Governor Executive Order

- ALL Nursing Care Institutions, Residential Care, Intermediate Care, Group Homes shall immediately ensure that they are complying with all infection control guidance from CMS and CDC, including:
  - Symptom and Temperature check, every individual regardless of reason entering facility (Does not apply to EMS)
  - Ensure All staff uses appropriate PPE when interacting with residents, to the extent that PPE is available and per CDC guidance to conserve on PPE
  - Ensure adherence to appropriate hand hygiene (per CDC guidelines)

## Governor Executive Order

- Facilities should cohort COVID-19 positive and COVID-19 unknown residents from COVID-19 negative residents to avoid transmission of the virus
- Facilities should ensure that separate, consistent staffing teams are utilized for each of these different cohorts
- COVID-19 positive units and facilities must be capable of maintaining strict infection control practices and testing protocols



# Governor Executive Order

- Develop policies, procedures to facilitate the admission and readmission of residents who are ready and safe for discharge from acute care hospital WITHOUT requirement of COVID-19 test result
- All COVID-19 positive and COVID-19 unknown residents admitted to facility will be placed in isolated in their room for 14 days (unless it's a COVID-19 positive resident in a COVID-19 positive facility)

## Governor Executive Order

- Every week the each health care institution, through EMResource or alternative form to the AZHD, will report number of COVID-19 positive residents, number of transfer to and from an acute hospital, number of PPE (N95 + surgical mask, surgical gowns, isolation gowns) and estimated use of each PPE used / week
- Facilities **MUST** offer an electronic visual form of communication, if visitation is restricted, in lieu of face to face visits to all residents

# CMS COVID-19 Guidelines

- CMS urges State and local leaders to consider needs of PAC facilities (ICP doing its part)
- Medicare is now covering COVID-19 testing to eligible beneficiaries by certified laboratories
- Facilities should limit access points
- For duration of state of emergency, all personal should wear facemasks while they are in the facility
- If COVID-19 transmission occurs in the facility, HCP should wear FULL PPE for the care of all residents irrespective of COVID-19 Dx or symptoms

# CMS COVID-19 Guidelines

- Patients and residents who must regularly leave the facility for care (HD) should wear face masks when outside their rooms
- When possible, all long-term care facility residents, whether they have COVID-19 symptoms or not, should cover their noses and mouth when staff are in their rooms
- Long-term care facilities should exercise as best as possible consistent assignments
  - Assignment of staff to certain patients and residents
  - For all patients and residents, regardless of symptoms or COVID-19 status

# PAC Updates from AZHS - COVID-19

- COVID-19 positive patients do not need to be transferred to acute care hospital
- Facilities can care for COVID-19 patient
- Facilities should be willing and ready to accept COVID-19 patients
- No subsequent testing is needed to release patient from isolation.
- If facility is not comfortable with taking COVID-19 positive patients, the state will work with preparation and education
- PPE requests need to go to local county public health dept as they are prioritizing and able to assist

# PAC Updates from AZHS - COVID-19

- Encourage for facilities to keep track of all spending relating to COVID-19 response as there may be assistance from the state down the line
- Encourage facilities to reserve and prioritize gowns for high risk patient contact and possibly use alternative cloth gowns that are made of specialized material that can be laundered
- Face masks- anything that goes on head can be reused with same patients of same diagnoses as long as not touched or soiled

## PAC Updates from AZHS - COVID-19

- Gov. executive order- transition to EMResource for one stop shop for centralized COVID-19 data sharing
- HSAG had set up for bed availability & if PAC facilities are accepting COVID-19 patients- this will be transitioned to EMResource.
  - This will help the state look at patient loads and help offload acute care settings
  - All hospital systems have access to EMResource
  - Transfer/call center is being put into place to assist hospital transfers (Arizona Care Transfer – ACT line)
  - Use this line only if routine transfer process fails

# PPE Supplies

- ICP working to support to our PPN partners
  - Ability to share some PPE
  - Share vendor information
- MCDPH is trying to prioritize long-term care and nursing facilities for PPE distribution
  - Very limited county supply
- CDC: [https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html?utm\\_medium=email&utm\\_source=govdelivery](https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html?utm_medium=email&utm_source=govdelivery)





# PPE

## SUMMARY OF IMPORTANT FACTS

- There are not enough N-95 masks, facemasks, face shields, surgical gowns, coveralls or gloves to meet the current demand.
- Do not know if or when we will receive additional PPE or when the supply chain will catch up to the demand.
- Prioritizing efforts to reduce the number of severe cases of COVID-19 and to assure health care worker health and safety.
- Prioritizing PPE, except for N95 masks, for long-term care facilities to prevent severe cases among individuals at highest risk of severe disease.
- N95 respirators are being prioritized for acute care facilities.

• Maricopa County Department of Public Health 4/6/20 communication

# HonorHealth

- Please communicate any anticipated barriers to accepting patients from hospital for any reason (COVID-19 or not) as soon as possible so that we can discuss – prior to the time of discharge
- Humana has lifted prior auth requirements for COVID-19 – communication is on the ICP/Post acute website.

# ICP Post-Acute Communication Website

- Will continue to update ICP website
  - Broadcast audio
  - Broadcast slide deck
  - CMS and other important updates
  - ICP/HH important updates
  - Link to HonorHealth COVID-19 resource page

<https://innovationcarepartners.com/postacutecommunications>

**Questions – Type in Q & A section and we will respond and/or post Q & A on the website**



- If you have further questions or issues you would like to discuss
- Please contact:  
Elysha Lucero – Preferred  
Network Coordinator  
[elucero@icphealth.com](mailto:elucero@icphealth.com)