

DBHR COVID-19 Call| 6-16-2020

Several brief presentations :

- Jason - Provider Relief Fund: HHS portal for provider relief funding. Deadline July 2020.
- Nick Fradkin - Behavioral Health Impact Situation Report (see handout)— 1st of its kind in WA. Summarize impact on mental health and SUD for WA. Full report is handout. A few highlights – calls to Quit Line down, sales of marijuana and alcohol up. Overall trend in social media expression of loneliness and anxiety is upward.
- DOH – (see handout)— Guidance for BH - Inpatient and Residential Care facilities, break the chain of transmission. Background and guidance provided. See slide deck. EPA new List N for disinfectants that impact CoV-2.

ICAR – Infection Control, this group travels to health care settings and performs infection control assessment. Reviews policies & procedures, troubleshoot gaps, offers individualized attention and support. Can do in BH settings. Purely consultative. Email for more information or to set up a visit Patty.Montgomery@doh.wa.gov. (confirm email validity)

Q&A**Testing, screening, & environmental controls**

Q- Testing with inpatient– at admission or before admission? What about staff?

A – Non specific for BH health.. Testing scenarios under development, this question has not yet been addressed. Will follow-up when have an answer.

Q – Reason behind keeping log of visitors

A – For contact tracing and documentation of screening record

Q – Addressing virus on surfaces

A – Option for individual and group therapy structure time differently. Gives facilitator time to clean before and after the session.

A – Environmental cleaning one of several strategies to prevent transmission – use bundle of strategies for best outcome.

Q – Gloves and surfaces

A – Still learning a lot about virus. can live on different surfaces for varying amounts of time. CDC for health care settings – if you are interacting with client/resident/patient suspected of having COVID-19 wear gloves, gown, eye protection, and face mask or N95. For regular use outside of health care settings – no glove recommendation. Hand hygiene before and after putting on gloves and is very important.

Q – Testing – how long in-between tests?

A – Depends upon purpose of testing. Leaving isolation requires different testing guidance than other reasons for testing

Q – Log organization

A – No recommendations on how to organize. Keep record of who entered, who was screened, and screening results. Can be excel spreadsheet. A screening form for each individual acknowledging no symptoms and recording of temp. Whatever works best for facility.

Q – If visitor answers YES to any question on checklist may they enter?

A – If any symptoms concerning to COVID suggest don't allow them to enter. (DOH response)

Q – For outpatient BH any specific recs for environmental cleaning?

A – Outpatient BH setting – no specific recs for outpatient BH. High touch surfaces should be cleaned regularly (door knobs, switches, phones, chairs...).

Provider Relief Fund

Q – Terms and Conditions that provider relief payments will only be used for COVID-19 related expenses. What expenses and lost revenue are considered COVID related?

A – DOH asking HHS similar question. How DOH is understanding is whether or not you have experienced damage related to COVID, not if there is a specific PPE or other related expense. Has your revenue been effected because of underutilization, stay at home orders. DOH believes that is what has to be approved on the portal. They are working to help clarify questions like this. Can email Jason with add'l questions.

Q – Funds prevent/prepare for seems to rule out BH providers.

A – Jason believes BH qualified to provide if 1) have billed Medicaid this year and 2) experienced a loss r/t COVID. The 2% of total revenue limit is maximum amount can receive through this funding portal.

Q – Loss of revenue is difficult to quantify by July 20 deadline. Most likely to have impact over next 6-12 months.

A – If you haven't lost revenue at this time you don't qualify for this funding.

Q – Funding

A – Any provider who serves Medicaid and has experienced a loss thus far should qualify for funding (however if received previous funding from previously released Medicare unclear if this disqualifies for funding. They suggest to apply anyways.)

Telehealth & Waivers

Q – Telehealth changes r/t waiver ending?

A – No intent to d/c this approach. Any changes to telehealth policies will be communicated with significant notice and after collaboration with BH providers.

Q – Waivers and June 21st deadline

A – State has no date for HCA and Medicaid to end telehealth modality. The June 21st date is not applicable to WA.

A – Commercial side there was a gap and commissioners addressed that gap.

**Slide deck in the handout was updated – go to HCA webpage for most recent copy.

June 30th next call.

Call ended 1:31pm