NHPCO COVID-19 Update – 01/27/21

NHPCO has created this update for hospice and palliative care providers to share recent news and helpful links. Please note, these Updates are published when there is helpful news to share.

"In the unlikely story that is America, there has never been anything false about hope.”
— Barack Obama

Policy Update

NHPCO’s COVID-19 Government Funding Webinar #3: Provider Relief Fund Use and Reporting
NHPCO is offering this webinar on February 18, 2021, 2:00 – 3:30 p.m. ET. This free webinar, available to all, will provide attendees with long-awaited details about the use and reporting of Provider Relief Funds to HHS. The Provider Relief Fund portal opened on January 15, 2021, and HHS has now released additional guidance and clarifications about the reporting process -- what can be included in lost revenue, expenses to be included and calculations for the report. HHS has not yet released the deadline for Provider Relief Fund reporting.

Faculty:
- Judi Lund Person, MPH, CHC, NHPCO, Moderator
- Ted Cuppett, CPA, The Health Group
- Aaron Little, CPA, Managing Director, BKD
- Mark Sharp, CPA, Partner, BKD

Register for Government Funding Webinar #3

OIG Issues Fraud Alert for COVID-19 Vaccine

The OIG at HHS has launched a campaign designed to protect the public from potential fraud concerning COVID-19 vaccines. Government and state officials will NOT call you to obtain personal information in order to receive the vaccine. Learn more at the OIG/HHS website.

Provider Update

UK Variant Spreading in the US
The United Kingdom’s B117 variant is circulating in at least 24 states, according to new data from the Centers for Disease Control and Prevention (CDC) COVID-19 variant surveillance. The CDC projects that the UK variant will become the dominant strain in the United States by March. Read UK Variant Spreading in the US (Medscape News, 1/26/21)

First Case of Brazilian Variant in the U.S. Found in Minnesota
The United States’ first confirmed case of the highly transmissible Brazilian coronavirus variant has been detected in Minnesota, per state health officials. On the subject of vaccine efficacy, the CDC says the Brazilian variant “contains a set of additional mutations that may affect its ability to be recognized by antibodies." "The emergence of this variant raises concerns of a potential increase in transmissibility or propensity for SARS-CoV-2 re-infection of individuals," the CDC said. It’s one of three variants being watched by U.S. health officials. The
others originated in the United Kingdom and South Africa. Read First Case of Brazilian Variant in the U.S. Found in Minnesota (Medscape News, 1/26/21).

**Moderna Researching Vaccine Efficacy for COVID-19 Variant**
Modern executives say they are researching the effectiveness of their COVID-19 vaccine against new variants of the virus first identified in the UK and South Africa. A preliminary study of the new variants initially showed the vaccine to be effective, but Moderna executives say they are researching a booster shot for the variant first identified in South Africa "out of an abundance of caution." Read Moderna researching vaccine efficacy for COVID-19 variant (CNBC, 1/22/21).

**FDA Issues Alert About Mexico’s Hand Sanitizers**
U.S. regulators are warning that hand sanitizer imported from Mexico could be tainted with dangerous chemicals or not work effectively. The Food and Drug Administration issued the warning Tuesday amid a pandemic that has dramatically increased demand for hand-cleaning products. The FDA said it is applying an "import alert" to "all alcohol-based hand sanitizers from Mexico" in an attempt to "stop products that appear to be in violation from entering the U.S. until the agency is able to review the products' safety." Read FDA Issues Alert About Mexico’s Hand Sanitizers (KHN, 1/27/21).

**FDA Rolls Back N95 Mask Reuse to 4 Decontamination Cycles**
The FDA is reissuing the Emergency Use Authorizations (EUAs) for decontamination systems that are authorized to decontaminate compatible N95 respirators for use by healthcare personnel (HCP) to prevent exposure to pathogenic biological airborne particulates when there is an insufficient supply of new respirators resulting from the Coronavirus Disease 2019 (COVID-19) pandemic. Among other things, the reissued EUAs for certain decontamination systems are now only authorized to decontaminate each compatible N95 respirator a maximum of four or fewer times. Read FDA rolls back N95 mask reuse to 4 decontamination cycles (1/22/21).

**Resources**

**Building Confidence in COVID-19 Vaccines**
The CDC outline’s its strategy to boost confidence in COVID vaccines.

**The Johns Hopkins 30-Minute COVID-19 Briefing on Fridays**
Join experts from the Johns Hopkins Coronavirus Resource Center (CRC) at 12:00 p.m. ET on Fridays for timely, accessible updates on the state of the pandemic and the public health response. Here is the link for the briefing on Friday, January 29, 2021.

**Analysis of Nursing, Palliative and Hospice Care Facilities’ Websites During COVID-19**
The agenda of health care facilities has been seriously affected by the COVID-19 pandemic. The study sheds light on the strategies developed by facilities, their efforts to increase emotional resilience among health care staff and health care users, the ethical guidelines they have adopted regarding privacy policies as well as how these themes are communicated via the facilities’ websites. The results can inform other health care facilities about how websites can be used as essential communication tools in times of public health crises. Download “We Are Taking Every Precaution to Do Our Part...”: A Comparative Analysis of Nursing, Palliative and Hospice Care Facilities’ Websites During the COVID-19 Pandemic“.

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Improved Serious Illness Communication May Help Mitigate Racial Disparities in Care Among Black Americans with COVID-19

An article in the *Journal of General Internal Medicine* reports that “Studies of home-based palliative care and inpatient palliative care have demonstrated favorable outcomes for Black Americans with serious illness, including increased satisfaction, increased documentation of treatment preferences, and higher rates of home death and hospice referrals. Recent research shows, for example, that seriously ill Black patients who had a goals-of-care consultation were 15 times more likely to choose hospice than demographically and clinically similar, propensity score–matched Black patients without a consultation. Evidence also shows seriously ill Black patients live longer when they receive palliative care consultation. These findings suggest palliative care’s approach to goals-of-care communication helps Black Americans clarify treatment preferences in light of personal goals.”

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