

# Hospice and Palliative Care Resources for the Coronavirus Disease (COVID-19)



## NHPCO COVID-19 Update – 03/17/21

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.

**"Change is the law of life. And those who look only to the past or present are certain to miss the future." — John F. Kennedy**

### Policy Update

#### **Increased Payment Rates for COVID-19 Vaccine Administration**

On March 15, CMS announced that “effective for COVID-19 vaccines administered on or after March 15, 2021, the national average payment rate for physicians, hospitals, pharmacies and many other immunizers will be \$40 to administer each dose of a COVID-19 vaccine. This represents an increase from approximately \$28 to \$40 for the administration of single-dose vaccines, and an increase from approximately \$45 to \$80 for the administration of COVID-19 vaccines requiring two doses. The exact payment rate for administration of each dose of a COVID-19 vaccine will depend on the type of entity that furnishes the service and will be geographically adjusted based on where the service is furnished.” Hospice providers are listed as an eligible provider type to administer vaccines. Vaccine providers are prohibited from charging patients for giving the vaccine. NHPCO members can [download a Regulatory Alert](#) (03/16/21) from the website with additional information.

#### **Sign Up to Administer Vaccines in Your Community**

The U.S. Department of Health and Human Services (HHS), has launched a new portal for [Vaccinators to Check Eligibility Status and Volunteer with their State](#). Newly eligible vaccinators include: Dentists, Emergency Medical Technicians (Advanced and Intermediate EMTs), Midwives, Optometrists, Paramedics, Physician Assistants, Podiatrists, Respiratory Therapists, and Veterinarians. This amendment also authorizes recently retired members of the above professions, pharmacists and pharmacy interns to serve as vaccinators, if they were in good standing upon expiration of their license. And, this amendment authorizes medical students, nursing students, and students of the other eligible health care professions with proper training and professional supervision to serve as vaccinators. States are encouraged to further expand the categories of persons authorized to administer COVID-19 vaccines in their states, as authorized under the PREP Act, to respond to the local needs and availability of potential vaccinators.

#### **\$150 Million to Expand Access to COVID-19 Treatments in Underserved Communities**

As part of the Biden Administration’s ongoing efforts to promote health equity in response to the COVID-19 pandemic, the U.S. Department of Health and Human Services (HHS) is investing \$150 million to increase access to COVID-19 monoclonal antibody therapeutic treatments for patients in vulnerable communities across the country. Read the [press release from HHS](#).

#### **Hearing Held Today on Administration’s Actions to Increase COVID-19 Vaccinations**

The Subcommittee on Oversight and Investigations of the Committee on Energy and Commerce held a hearing on March 17, 2021, "Leading the Way Forward: Biden Administration Actions to Increase COVID-19 Vaccinations." Watch the [recorded hearing online](#).

## **Provider Update**

### **NHPCO Members-Only Webinar: The Cures Act Information Blocking Rule 101**

A May 1, 2020 rule from the U.S. Office of the National Coordinator for Health Information Technology prohibits “information blocking.” In some ways, the prohibition of information blocking represents a significant shift in how many healthcare providers must approach requests for health information. Join us on **Tuesday, March 30 from 2:00 – 3:30 p.m. ET** for this presentation by Husch Blackwell hospice and healthcare attorneys Meg S.L. Pekarske, Wakaba Tessier, and Andrew Brenton, who will outline key aspects and operational considerations of the rule that are most pertinent for hospice compliance. Visit the [member-only COVID-19 Resource page](#) to find the registration link.

### **British COVID-19 Variant to Become Dominant U.S. Strain Within Weeks**

An [article from UPI](#) reports, “The B.1.1.7 coronavirus variant, first identified in Britain, remains on track to become the dominant variant by the end of March or early April, Centers for Disease Control and Prevention Director Dr. Rochelle Walensky said in a briefing Monday. The variant is up to 100% more deadly than the original strains of the virus, according to a study [published last week](#) by the British Medical Journal. Researchers also found it is more contagious than earlier strains and was the primary reason for the most recent round of lockdowns across Britain.”

### **Pfizer/BioNTech Say Data Suggests Vaccine 94% Effective in Preventing Asymptomatic Infection**

[Reuters reports](#), “Pfizer Inc and BioNTech SE said on Thursday that real-world data from Israel suggests their COVID-19 vaccine is 94% effective in preventing asymptomatic infections, meaning it could significantly reduce transmission. The companies also said the latest analysis of the Israeli data shows the vaccine was 97% effective in preventing symptomatic disease, severe disease and death. That is basically in line with the 95% efficacy Pfizer and BioNTech reported from the vaccine's late-stage clinical trial in December.”

### **Abbott Announces Pandemic Defense Coalition**

An article on the [Mass Device Medical Network](#) reports, “Abbott announced today that it formed the Abbott Pandemic Defense Coalition for future pandemic threats. The first-of-its-kind global scientific and public health partnership is dedicated to the early detection of and rapid response to future pandemic threats through the connection of global centers of excellence in laboratory testing, genetic sequencing and public health research.”

## **Resources**

### **The Johns Hopkins Weekly 30-Minute COVID-19 Briefing**

Join experts from the Johns Hopkins Coronavirus Resource Center for timely, accessible updates on the state of the pandemic and the public health response. Every Friday, 12:00-12:30 p.m. ET. [Find the recording](#) of the March 12 update and tune in on Friday’s new briefing online.



