



Coronavirus Update #47
April 27, 2020

DATE: April 27, 2020

TO: Chief Executive Officers
Regional Presidents
Head of Assisted Living
Heads of Home Health
Heads of Long Term Care
Head of PACE
Head of Pediatric Day Care
Chief Operating Officers
Chief Medical Officers
Chief Nursing Officers
Directors of Infection Control/Infection Control Practitioners
Emergency Preparedness Contacts
Heads of Human Resources
Legal Counsel
Heads of Public Relations

FROM: Cathleen Bennett, President and CEO

RE: **Coronavirus Update No. 47**

State Update: The total number of COVID-19 cases in New Jersey now stands at 111,188 after 2,146 more individuals were confirmed to have the virus since yesterday's briefing. There is now a reported total of 6,044 COVID-19 fatalities, 106 more than yesterday. As of 10 p.m. yesterday 6,407 residents are hospitalized with 1,801 of these individuals requiring intensive care and 1,303 on ventilators. An additional 480 residents have been discharged in the past 24 hours. A total of 204,651 tests have been conducted with a 43 percent positivity rate.

Health Commissioner Judith Persichilli provided a breakdown of hospital discharge destinations for a sample of 773 COVID positive cases. Half of those discharged (50.23%) returned home, followed by 24.7 percent that were discharged to a skilled nursing facility. Nearly 10 percent left against medical advice, 3 percent to a rehabilitation facility, 3 percent to another facility type and 1.8 percent to hospice. In addition, 10.8 percent of hospital discharges reflected patients who had expired.

Also at today's briefing, Congressman Tom Malinowski spoke on the efforts the federal delegation is taking to help secure economic relief for the state.

The Road Back: Governor Murphy today laid out a road map to recovery called [The Road Back](#). The plan for a safe and gradual return of economic and social activity is built on six key principles. There was no timeline defined for the plan. The key principles on which a reopening will be based include:

- Sustained reduction in new COVID-19 cases (including a 14-day trend in sustained decline in new cases and hospitalization, plus hospitals emerging from crisis standards of care)
- Expanded testing, defined as at least double the current testing capacity
- Implementing robust contact tracing with added personnel and technology
- Securing safe places for isolation, including supportive services for quarantined contacts
- Responsible economic restart, including the establishment of the Governor's Restart and Recovery Commission, a methodical return-to-work strategy and continuation of social distancing measures
- Ensuring resiliency, which includes ensuring providers have sufficient inventories of PPE and ventilators, rebuilding the state stockpile, creating a playbook for future admissions and learning lessons from the initial COVID-19 response.

NJHA provided a statement of support for the State's plan, as well as reassurances to New Jerseyans that our healthcare community remains here to care for them. [Click here for the complete media statement](#).

Aged, Blind and Disabled: In response to a request submitted by NJHA in March, the Division of Medical Assistance and Health Services announced today in a letter to hospital CEOs that it is temporarily expanding the NJ FamilyCare Presumptive Eligibility Program to the Aged, Blind and Disabled population.

This will help ensure that hospitals are paid for care provided to uninsured, low-income elderly or disabled patients and will help them transfer to another facility or home with supportive services. Presumptive eligibility for this population is self-attested, completed online by the hospital-based staff and could provide temporary fee-for-service Medicaid coverage for up to 60 days or until a Medicaid determination is made, whichever is sooner. Training for the hospital presumptive eligibility coordinators and staff will occur this week via webinar.

Behavioral Health Calls: Starting Tuesday, April 28, NJHA will host focused Behavioral Health COVID Calls every Tuesday and Thursday at 6:15 p.m. – 6:45 p.m. These calls will target chief experience officers, population health officers, behavioral health officers, maternal and child health, community health officers, substance abuse, community benefits and patient/consumer officers to share innovative models that address wellness, recovery and support for all individuals and special populations experiencing behavioral health needs during and post COVID-19.

Nursing Home Ratings: [CMS released a memorandum](#) late Friday with updates regarding nursing home quality ratings and other procedural changes during the COVID-19 emergency.

- The inspection domain under the Nursing Home Five Star Quality Rating system will be held constant temporarily because of the suspension of certain inspections and the prioritization of other inspections. This will help ensure the rating system remains a source of fair information for consumers.
- Findings from inspections conducted on or after March 4 will be posted publicly, but will not be used to calculate a nursing home's inspection star rating. A link will be available on the front page of the Nursing Home Compare website as the data is finalized and uploaded.
- The April update to the quality and staffing domains of Nursing Home Compare will occur since the data underlying these domains are from time periods that occurred prior to the COVID-19 emergency.
- CMS is releasing information that shows the average number of staff each nursing home has onsite and aggregated by state and nationally. This data is based on the 4th quarter of 2019 and may not reflect current conditions. CMS believes this data can be used to identify approximate facility needs with respect to PPE and a state's response to preventing and controlling the spread of COVID-19.
- A detailed FAQ is included to clarify some of the previous materials and guidance CMS has released including: admissions to nursing homes, health care workers, waivers and resident cohorting.

PIP and Telehealth: The N.J. Department of Banking and Insurance Commissioner issued a [Bulletin](https://www.nj.gov/dobi/bulletins/blt20_19.pdf) https://www.nj.gov/dobi/bulletins/blt20_19.pdf to all automobile insurers that provide personal injury protection coverage concerning telemedicine and telehealth use during the COVID-19 pandemic. Effective April 24, and continuing for the duration of the declared public health emergency, PIP insurers must:

- Ensure network adequacy for telemedicine and telehealth networks
- Encourage network providers to utilize telemedicine or telehealth services wherever possible and clinically appropriate
- Update procedures to include reimbursement for telehealth services that are provided by a provider in any manner that is practicable and appropriate, including by telephone
- Disseminate information via website, or other reasonable means, to notify providers of reimbursement procedures
- Reimburse providers that deliver covered services to claimants via telemedicine or telehealth in accordance with this guidance
- Not impose any specific requirements on the technologies used to deliver telemedicine and/or telehealth services (including any limitations on audio-only or live video technologies)

- Ensure that payment to providers for services delivered via telemedicine or telehealth are not lower than would typically be paid for services rendered via traditional methods.

[Additional requirements and details are available in the DOBI Bulletin.](#)

CMS COVID-19 Calls: CMS hosts recurring stakeholder engagement sessions to share information related to the agency response to COVID-19. Sessions are open to members of the healthcare community and are intended to provide updates, share best practices and offer an opportunity to ask questions of CMS and other subject matter experts.

Call details are below; conference lines are limited so it is highly recommended to join via audio webcast. These calls are not intended for the press.

- Office Hours Calls: Tuesday, April 28 at 5 p.m.; Dial In: 833-614-0820; Access Passcode: 7476619; ; [Audio Webcast](#); and Thursday, April 30, 5 p.m.; Dial In: 833-614-0820; Access Passcode: 5787874; [Audio Webcast](#).
- Lessons from the Front Lines: Friday, May 1 at 12:30 p.m.; Dial-In: 877-251-0301; Access Code: 9545128; [Audio Webcast](#)

Weekly COVID-19 Care Site-Specific Calls:

- Home Health and Hospice - Tuesday, April 28 at 3 p.m.; Dial-In: 833-614-0820; Access Passcode: 1854778 [Audio Webcast](#)
- Nursing Homes - Wednesday, April 29 at 4:30 p.m.; Dial-In: 833-614-0820; Access Passcode: 4680237 [Audio Webcast](#)
- Dialysis Organizations - Wednesday, April 29 at 5:30 p.m.; Dial-In: 833-614-0820; Access Passcode: 6965645; [Audio Webcast](#)
- Nurses - Thursday, April 30 at 3 p.m.; Dial-In: 833-614-0820; Access Passcode: 4268398; [Audio Webcast](#)

Calls recordings and transcripts are posted on the CMS [podcast page](#).

NJHA Resources and Support: As a reminder, NJHA's Emergency Preparedness team is available 24/7 to assist providers at 800-457-2262 or epalert@njha.com. In addition, the state's hotline number is 800-962-1253. Official guidance and other resources are available online from:

- CDC <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- NJDOH <https://www.nj.gov/health/cd/topics/ncov.shtml>
- NJHA <http://www.njha.com/coronavirus>