Navigating COVID-19
A Webinar for the Nursing Home Procurement Professional

INTRODUCTION

• The Society for Healthcare Organization Procurement Professionals (SHOPP) is an independent, non-profit entity created to improve quality and efficiency in post-acute care.

• The goals of SHOPP:
  • Support the data-driven, ethical evaluation of products and solutions that achieve meaningful and financially responsible healthcare outcomes.
  • Bridging the gap between clinical and financial operations through enhanced education of the Procurement Professional
LET’S ADDRESS THESE QUESTIONS

• How do you balance authoritative guidance on PPE in the absence of supplies and staff?
• What is the cost of PPE, and will you be reimbursed? (an original analysis by SHOPP)
• What does the various government programs offer your facility?
• Are there liability issues to be concerned about and can you mitigate them?
• How do you best protect patients/residents and staff against COVID-19 and comfort family?

MEET OUR PANELISTS FOR THE “Navigating COVID-19 for the Nursing Home Procurement Professional” WEBINAR

HOSTED BY: Steven Littlehale, Chief Innovation Officer, Zimmet Healthcare Services
PANELIST: Ari Stawis Director, Professional Services & Development Zimmet Healthcare Services
PANELIST: Cliff Porter Head of Government Affairs AHCA/NCAL
PANELIST: Christy Tosh Crider Chair of Healthcare Litigation Baker Donelson
PANELIST: Melissa Powell President and COO The Allure Group

Join us Tuesday, April 14th 12pm EST
Which guidance do I follow?

Yes
“Nursing Homes should immediately ensure that they are complying with all CMS and CDC guidance related to infection control.”

April 2, 2020

“Long-term care facilities should ensure all staff are using appropriate PPE when they are interacting with patients and residents, to the extent PPE is available and per CDC guidance on conservation of PPE.”

April 2, 2020
“State agencies including health departments, hospitals, and nursing home associations will have to ensure coordination among facilities to determine which facilities will have a designation and to provide adequate staff supplies and PPE”

April 2, 2020

“A nursing home can accept a resident diagnosed with COVID-19 and still under Transmission Based Precautions for COVID-19 as long as the facility can follow CDC guidance for Transmission-Based Precautions. If a nursing home cannot, it must wait until these precautions are discontinued.”

3.13.20
MEMO TO STATE SURVEY AGENCY DIRECTORS

Will nursing homes be cited for not having the appropriate supplies?

CMS is aware of that there is a scarcity of some supplies in certain areas of the country. State and Federal surveyors should not cite facilities for not having certain supplies (e.g., PPE such as gowns, N95 respirators, surgical masks and ABHR) if they are having difficulty obtaining these supplies for reasons outside of their control.

However, we do expect facilities to take actions to mitigate any resource shortages and show they are taking all appropriate steps to obtain the necessary supplies as soon as possible.

The facility should contact the local and state public health agency to notify them of the shortage, follow national guidelines for optimizing their current supply, or identify the next best option to care for residents.

If a surveyor believes a facility should be cited for not having or providing the necessary supplies, the state agency should contact the CMS Branch Office.

IT'S ALL CONNECTED

• Procurement impacts all measures of SNF performance
  • Financial
  • Quality
  • Patient experience
  • Reimbursement
  • Managed Care

• Procurement Professionals are critical to team success!
REIMBURSEMENT

• 1135 National Waiver
  • Needed to reduce hospital burden
  • Clinical Eligibility does not change; waived "Technical" Eligibility only
  • Not a “license to skill”: 60-day rule waived but would not apply to the "chronically skilled" patients
  • COVID PDPM scores can be very low $, but SNF adds costs that are unbundled under Medicaid (e.g. Pharmacy): Consider Gross v. Net $
  • If therapy contract is based on Part A days, COVID carveouts should be considered
  • PP must identify NTAs
  • Medicaid CMI implications

COST ANALYSIS-SHOPP COVID PPD COST ANALYSIS

• Exhibit 1: Pricing Per Item*
  • *Pre-Covid-19 pricing is based on multiple facilities averaged over 12-month period

<table>
<thead>
<tr>
<th>Item</th>
<th>Pre Covid-19 Cost</th>
<th>Current Covid-19 Cost</th>
<th>Price Markup</th>
<th>Percentage Markup</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vinyl Exam Gloves</td>
<td>$0.07</td>
<td>$0.06</td>
<td>$0.04</td>
<td>300%</td>
<td>Ideally people use vinyl. If not vinyl then latex but issues with allergies so Nitrile is most expensive resort</td>
</tr>
<tr>
<td>Latex Gloves</td>
<td>$0.03</td>
<td>$0.08</td>
<td>$0.05</td>
<td>257%</td>
<td>FDA certified in boxes, not bags.</td>
</tr>
<tr>
<td>Nitryl Gloves</td>
<td>$0.05</td>
<td>$0.10</td>
<td>$0.05</td>
<td>200%</td>
<td>FDA certified in boxes, not bags.</td>
</tr>
<tr>
<td>3ply Masks</td>
<td>$0.05</td>
<td>$0.75</td>
<td>$0.70</td>
<td>150%</td>
<td>FDA certified in boxes, not bags.</td>
</tr>
<tr>
<td>KN95 Masks</td>
<td>N/A</td>
<td>$4.00</td>
<td>N/A</td>
<td>1513%</td>
<td>Recently (April 2nd) FDA approved</td>
</tr>
<tr>
<td>N95 Masks</td>
<td>$0.38</td>
<td>$5.75</td>
<td>$5.37</td>
<td>1513%</td>
<td>Niosh certified, CDC approved list</td>
</tr>
<tr>
<td>3M N95 Masks</td>
<td>$0.11</td>
<td>$6.75</td>
<td>$6.64</td>
<td>6136%</td>
<td>Currently unavailable. Includes testing kit for sizing</td>
</tr>
<tr>
<td>Hand Sanitizer</td>
<td>$0.26</td>
<td>$0.56</td>
<td>$0.30</td>
<td>215%</td>
<td>Per ounce for 8 ounce bottle. Required to be at 70% percent alcohol</td>
</tr>
<tr>
<td>Isolation Gowns</td>
<td>$0.25</td>
<td>$5.00</td>
<td>$4.75</td>
<td>200%</td>
<td>New gown per resident</td>
</tr>
<tr>
<td>Face shields</td>
<td>$0.50</td>
<td>$4.50</td>
<td>$4.00</td>
<td>900%</td>
<td>Reusable</td>
</tr>
<tr>
<td>Soap</td>
<td>$0.19</td>
<td>$0.35</td>
<td>$0.16</td>
<td>184%</td>
<td>Per ounce via dispenser</td>
</tr>
</tbody>
</table>
COST ANALYSIS - SHOPP COVID PPD

COST ANALYSIS

• Exhibit 3: PPD Costs*

• *Pre-Covid-19 pricing is based on multiple facilities averaged over 12-month period.

<table>
<thead>
<tr>
<th>Total Costs Per Day</th>
<th>Pre-COVID-19 Pricing w/ Current CDC Guidelines</th>
<th>Current COVID-19 Pricing w/ Current CDC Guidelines</th>
<th>Current COVID-19 Pricing w/ Current CDC Guidelines, Nitryl Gloves, N95 Masks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-COVID-19 Requirements</td>
<td>$ 35.00</td>
<td>$ 236.00</td>
<td>$ 2,510.25</td>
</tr>
<tr>
<td>PPD</td>
<td>$ 0.35</td>
<td>$ 2.36</td>
<td>$ 25.10</td>
</tr>
<tr>
<td>Percentage Markup</td>
<td>674%</td>
<td>1064%</td>
<td>1084%</td>
</tr>
</tbody>
</table>

ADVOCACY EFFORTS

• Keep track of all COVID-19 expenses including but not limited to PPE.

• SHOPP aims to be the industry standard for all expense related data throughout the industry. Provide your data to assist in our efforts.

• SHOPP is working to support all post-acute care provider advocates in assisted Skilled Nursing Facilities and Assisted Living Centers during COVID-19 and beyond.

• SHOPP’s PPE analysis assisted HCANJ and NYSHFA in their proposal to secure funding for their members.
CLIFTON PORTER II
SENIOR VICE PRESIDENT,
GOVERNMENT RELATIONS - AHCA

CHRISTY TOSH CRIDER
CHAIR OF BAKER DONELSON’S HEALTH CARE LITIGATION GROUP AND THE WOMEN’S INITIATIVE
Communication With Families
LETTERS TO FAMILY & FRIENDS

- Do you have internal staff or do you need to utilize external resources to craft your messaging to families?

- How is that message being shared? Mailings, e-mail, phone calls, social media etc.

- Who is handling your inquiries? Is there a specific point to relay inquiries to or a general statement that should be provided? What about media calls?
COVID-19 FAMILY LINE

- Rings directly to designated representative’s cell phone
- Non-clinical matters triaged accordingly (Skype accounts, resident room extensions, etc.)
- Clinical requests sent daily to ADNS and DNS for follow up within 24 hours

PHONE CALLS

- Do you have the capability of customizing your call tree?
- Do you have the dial in options and extensions available to route these calls? Retrieve voicemail?
- Who will be the representative to receive these calls? What hours will be expected to be covered?
**SUPPLY CHAIN**

- How are your orders placed? Do you have an order plan established?
- What is your starting point for PPE? Your daily burn rate?
- Is your Director of Nursing or designated facility point person communicating regularly with your purchasing department?
- Who is logging/confirming receipt?
- Are your supplies accessible to staff and able to be retrieved by staff as after hours or on weekends/holidays?
- Do you have any city/state/federal requirements for inventory submission?

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**ADMISSION POLICY**

As we work our way through this pandemic, the vast majority of sub-acute referrals are COVID+.

The choice has in essence, been removed.

We have a duty to provide relief to our hospital systems, while also ensuring our existing and incoming residents and staff are kept safe.
ADMISSION STEPS

- Designated floors for positive, PUI, and new admissions
- Ensure transparency with staff for both safety and morale
- Centralize intake to ensure consistency of admission criteria and segregation
- Work with facility leadership to space out admissions to based on staffing patterns

HOSTED BY: Steven Littlehale, Chief
PANELIST: Ari Stanis
PANELIST: CH Porter
PANELIST: Christy Tosh Cridor
PANELIST: Melissa Powell

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QUESTIONS

Feel free to reach out with any questions, including how to become a SHOPP member today.

JOSH SILVERBERG  
jsilverberg@shopp.org

ARI STAWIS  
ari@healthcare.com

PPE Demand vs. Supply. Taking a deep dive into live data

Wednesday April 22nd at 4PM EST
RESOURCES COMING YOUR WAY!

• CDC’s PPE-Burn-Rate-Calculator

• PPE Usage Calculator (Josh Gross Oasis Group)

...Please look for a questionnaire from us!