

FYI Weekly

HEALTH CARE NEWS FOR VIRGINIA'S HOSPITALS AND HEALTH SYSTEMS

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1. VHHA in Action

Each day, VHHA actively works on behalf of its members, their employees, and Virginians to advance the interests of Virginia's hospitals and health care systems. In the past week, here are some developments of interest to Virginia hospitals and health systems:

- In a [recent letter](#) to hospitals and health care providers, **U.S. Health and Human Services Secretary Xavier Becerra** and **Centers for Medicare & Medicaid Services Administrator Chiquita Brooks-LaSure** reiterate the Biden Administration position that the Emergency Medical Treatment and Active Labor Act (EMTALA) requires Medicare-participating hospitals to offer necessary stabilizing medical treatment (or transfer, if appropriate) to all patients experiencing an emergency medical condition. The letter follows a recent U.S Supreme Court action to dismiss a case examining the question of whether an Idaho state law restricting abortion conflicts with federal law (EMTALA). The dismissal leaves in place a lower court injunction regarding the Idaho law. The letter also acknowledges that the federal interpretation of EMTALA as it applies to abortion is currently blocked in Texas where litigation over a conflicting state law is ongoing.
- The **Centers for Medicare & Medicaid Services (CMS)** has contracted the **Yale New Haven Health Services Corporation – Center for Outcomes Research and Evaluation (CORE)** to develop, reevaluate, and support the implementation of several maternal health measures and the expansion of CMS' Birthing-Friendly Hospital Designation. CORE is seeking individuals with relevant experience and expertise to provide input on the expansion of CMS' Maternal Morbidity Structural Measure and Birthing-Friendly Hospital Designation. July 12 at 5 p.m. EST is the deadline for submitting nominations for the technical expert panel (TEP) on maternal health projects. CORE anticipates holding three, two-hour virtual meetings in August, September, and

November. Visit this [link](#) for more information about TEP member responsibilities and submit nominations [here](#). Questions may be directed to cmsmaternalquality@yale.edu.

- The **VHHA Center for Healthcare Excellence** has published the Virginia Hospital Quality and Patient Safety Dashboard, which is a tool that will be updated quarterly to showcase average statewide hospital performance across 23 key metrics in five categories. This includes healthcare-associated infections, readmissions, mortality, safety and patient experience, and external hospital ratings. An overview of the latest results (June 2024) can be viewed [here](#).
- The **U.S. Food and Drug Administration (FDA)** has identified four Class I recalls due to the potential for serious injury or death: the Philips Respironics [BiPAP V30, BiPAP A30, and BiPAP A40 devices](#), along with its [OmniLab Advanced+ \(OLA+\) Ventilator](#); the ZOLL Medical [731 Ventilator](#) devices; and the Abbott Medical [HeartMate System Monitor](#).
- The **U.S. Department of Health and Human Services (HHS)** recently released a final rule regarding “disincentives” for health care providers engaged in information blocking pertaining to interfering with the access, exchange, or use of electronic health information. In the final rule, hospitals under the Medicare Promoting Interoperability Program found to have committed information blocking would experience a reduction of the market basket update by 75 percent. Critical access hospitals would see a reduction from 101-100 percent of reasonable costs, while clinicians in Medicare’s Merit-based Incentive Payment System (MIPS) would receive a score of zero in the MIPS Promoting Interoperability performance category. Providers in accountable care organizations that commit information blocking would be ineligible to participate in the Medicare Shared Savings program for at least one year and may not receive revenue they may have earned through the program. Read more [here](#).
- The **Centers for Medicare & Medicaid Services (CMS)** recently issued the [calendar year 2025 home health prospective payment system proposed rule](#), which calls for reducing net home health payments by an estimated \$280 million, or 1.7 percent, relative to the current year. The proposal includes a 3 percent market basket update, reduced by a 0.5 percent productivity adjustment. CMS also proposes to reduce the base payment rate by 4.1 percent due to the implementation of the Patient-Driven Groupings Model (PDGM), reducing total payments by 3.6 percent. The rule also calls for updating the HHA Conditions of Participation to add a new standard that would require HHAs to develop, consistently apply, and maintain a policy for accepting patients to service. And CMS proposes to revise the infection prevention and control requirements for long-term care facilities to extend reporting to the **Centers for Disease Control and Prevention (CDC)** of a subset of the current COVID-19 data elements and also require reporting for data related to influenza and RSV to begin Jan. 1, 2025. Public comment on the proposed rule is being accepted through Aug. 26.
- The **Centers for Disease Control and Prevention (CDC)** has issued a health alert network (HAN) advisory to notify health care providers, public health authorities, and the public about an increased risk of dengue virus (DENV) infections in the United States in 2024. Global incidence of dengue in 2024 has been the highest on record for this calendar year, with many nations reporting higher-than-usual case counts. Dengue is the most common arboviral disease globally. It is a nationally notifiable disease in the U.S. Approximately one in four DENV infections are symptomatic. Symptoms begin after an incubation period of 5-7 days (range 3-10 days) and present as fever accompanied by non-specific signs and symptoms such as nausea, vomiting, rash, muscle aches, joint pain, bone pain, pain behind the eyes, headache, or low white blood cell counts. Read more [here](#).
- The **Federal Bureau of Investigations (FBI)** and **U.S. Department of Health and Human Services (HHS)** recently issued an advisory about cyberthreat actors targeting health care organizations in

attempts to steal payments. The agencies have recommended mitigation efforts to help reduce the likelihood of being impacted. Threat actors have been found to use phishing efforts to gain access to employees' email accounts, and then pivoting to target login information related to the processing of reimbursement payments to insurance companies, Medicare, or similar entities. In some instances, threat actors would call an organization's information technology help desk posing as an employee of the organization to trigger a password reset for the employee's account. Read more [here](#).

- The **Centers for Medicare & Medicaid Services (CMS)** recently announced that payments under the Accelerated and Advance Payment (AAP) Program for the Change Healthcare/Optum Payment Disruption (CHOPD) will conclude on July 12. Launched in early March, the CHOPD payments were designed to ease cash flow disruptions experienced by some Medicare providers and suppliers, such as hospitals, physicians, and pharmacists, due to the unprecedented cyberattack that took the health care electronic data interchange, Change Healthcare, offline in February. Read more [here](#).
- The **U.S. Departments of Health and Human Services (HHS), Labor, and Treasury** recently announced a 120-day extension for parties impacted by the **Change Healthcare** cyberattack to open disputes under the No Surprises Act independent dispute resolution (IDR) process. Parties have until Oct. 12 to file disputes and must attest that their ability to open a dispute was impacted by the incident, according to the **Centers for Medicare & Medicaid Services (CMS)**. The departments have published an [attestation](#) that parties must submit along with the standard IDR form during the extension period. Read more [here](#).
- July 22 is the deadline for submitting public comment to the **Centers for Medicare & Medicaid Services (CMS)** on the information requirements associated with attestation requirements included in the Medicaid managed care access rule. Read more and submit comment through this [link](#).
- The **Disparities Solutions Center** is now accepting applications for the [2024-2025 Disparities Leadership Program](#), which is a year-long, hands-on executive education program focused on helping health care leaders achieve equity. The program is designed to help leaders translate the latest understanding of disparities into realistic solutions that can be applied within organizations. To date, more than 569 participants from 236 organizations representing 35 states, Washington D.C., Puerto Rico, Canada, and Switzerland have participated in the program. Letters of intent from applicants are due by July 12 and applications are due by Aug. 2. Download the necessary forms through this [link](#).
- VHHA actively engages with the news media to share public messaging and coordinate member media appearances to showcase the important work done by Virginia hospitals. That includes recent coverage from the [Harrisonburg Daily News-Record](#), the [Augusta Free Press](#), and the [Staunton News Leader](#).

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2. VHHA Political Action Committee, HosPAC, Seeks Support

HosPAC, the political action committee of VHHA, is in the midst of its 2024 fundraising campaign and needs support from members of the health care community. Financial contributions of any amount, large or small, help HosPAC support candidates for state office who are committed to strengthening the health care delivery system in Virginia by growing the health care workforce, promoting access to care, and investing in public health. By supporting candidates from both parties who champion these values, HosPAC helps advance the voice of the health care community in state public policy development.

Please consider contributing to HosPAC to support this important work on behalf of Virginia hospitals, health systems, and their teams. Visit this [link](#) to make contributions and contact Hannah Coley at hcoley@vhha.com with any questions. – Hannah Coley

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3. CMS Issues Proposed Rule on Suspect Billing Activity on Medicare Shared Savings Program

The **Centers for Medicare & Medicaid Services (CMS)** recently released a [proposed rule](#) on mitigating the impact of significant, anomalous and highly suspect (SAHS) billing activity on the Medicare Shared Savings Program financial calculations in calendar year (CY) 2023. In the proposed rule, CMS acknowledges that while the investigation is ongoing, the observed billing volume in CY 2023 for two types of intermittent urinary catheter codes represents SAHS billing activity. CMS proposes to exclude payment amounts for these codes submitted by any supplier from expenditure and revenue calculations for CY 2023. This would include when CY 2023 is the performance year, or when it is used for establishing benchmarks for 2024, 2025, and 2026. CY 2023 amounts would be excluded from factors used in the application cycle for accountable care organizations (ACO) applying to enter a new agreement period beginning on Jan. 1, 2025. To minimize disruptions to ACO timelines for reporting, reconciliation, and applications, CMS chose a 30-day comment period and will work to reduce delays and communicate changes in timelines. Comments are due to CMS by July 29. CMS indicates that this will be part of a broader strategy to address anomalous spending with additional provisions to be outlined in the pending proposed CY 2025 Physician Fee Schedule.

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4. ASPR Offers Bird Flu Pandemic Preparedness and Response Strategy

The **Administration for Strategic Preparedness and Response (ASPR)** recently announced a flu pandemic preparedness and response strategy regarding the threat of H5N1 bird flu in humans. Released through ASPR's Biomedical Advanced Research and Development Authority, the strategy has four objectives: strategic implementation and deployment of the national pre-pandemic influenza vaccine stockpile; enhanced protection through novel vaccines; leverage therapeutics through deployment, early availability and development of novel products; and ensure rapid and effective diagnostics tools to inform rapid antiviral prescription and treatment. Read more [here](#).

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5. Hospital Staff Encouraged to Complete 2024 VHHA Member Feedback Survey

VHHA is sharing the 2024 Member Feedback Survey, which provides individuals who work for VHHA member hospitals and health systems, as well as other stakeholders engaged with the Association, with an opportunity to share their insights and observations about the VHHA, its work, programming, and engagement activities. Please take a moment to complete the survey and share feedback about VHHA [here](#).

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6. VHHA *Patients Come First* Podcast Features Carilion Clinic Psychiatry Leader

The latest episode of VHHA's *Patients Come First* podcast features **Dr. Bob Trestman**, Chair of Psychiatry and Behavioral Medicine at **Carilion Clinic**, for a conversation about his work, mental health,

collaboration with the **Virginia Coordinated Clinical Research Network**, and more. Listen to the episode [here](#) and hear past episodes through this [link](#). Podcast episodes are also available through these podcast apps and networks: [Apple Podcast](#), [Amazon Music](#), [Spotify](#), [Pandora](#), [Google Podcasts](#), [Stitcher](#), [TuneIn](#), [SoundCloud](#), [Blubrry](#), [iHeart Radio](#), [Deezer](#), [Podbay](#), [Overcast](#), [Pocket Casts](#), the [Virginia Audio Collective](#), the [Public Health Podcast Network](#), the [World Podcast Network](#), and the [Family Podcast Network](#). The podcast can also be heard on the radio airwaves – episodes air each Sunday at 9 a.m. on 100.5 FM, 107.7 FM, 92.7 FM, and 820 AM across Central Virginia and 1650 AM in Hampton Roads, 105.1 FM and 1050 AM in Lynchburg, and Wednesdays at 1 p.m. on 93.9 FM in Richmond. Send questions, comments, feedback, or guest suggestions to pcfpodcast@vhha.com. – Julian Walker

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7. FDA Issues Guidance on ‘Diversity Action Plans’ for Clinical Studies

The **U.S. Food and Drug Administration** (FDA) has issued [draft guidance](#) to assist medical product sponsors in submitting Diversity Action Plans to support certain clinical studies. Diversity Action Plans are intended to increase clinical study enrollment of participants of historically underrepresented populations to help improve the data the agency receives about the patients who may potentially use the medical product. Enhancing diversity within clinical studies not only facilitates broader applicability of results across a broad spectrum of patient populations, but also enhances understanding of the disease or medical product under study, thus providing valuable insights to inform the safe and effective use of the medical product among patients. Read more [here](#).

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8. HHS Health Sector Cybersecurity Coordination Center Issues Vulnerability Alert

The **U.S. Department of Health and Human Services** (HHS) **Health Sector Cybersecurity Coordination Center** has issued an [alert](#) about a critical vulnerability in MOVEit, a common file transfer platform utilized in the health sector. The vulnerability exposes health care organizations to cyberattacks, especially ransomware and data breaches. The alert notes that Progress, the company that owns and operates the MOVEit platform, has released patches to fix this vulnerability. However, exploit code is also available to the public, and this vulnerability is being actively targeted by cyber threat actors. All health care organizations are strongly urged to identify any vulnerable instances of MOVEit that exist in their infrastructure and patch them as a high priority.

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9. VNPC Seeks Survey Feedback on Virginia Maternal Health Needs, Eliminating Bias in Dyad Care

Last year, the **Virginia Neonatal Perinatal Collaborative** (VNPC) was awarded the [HRSA Maternal Health Innovation](#) grant. The grant components include developing maternal health hubs, convening the Maternal Health Task Force with input from Virginia communities, and developing and implementing a strategic plan over the next five years. As part of an environmental scan related to this grant, the VNPC is asking partner organizations to complete a brief [survey](#) to help identify where maternal health needs exist in Virginia. The VNPC is also asking professionals who work with pregnant or parenting patients and infants impacted by substance use disorder to complete a [survey](#) to help further the work of the [Eliminating Bias in the Dyad Care](#) (EBDC) project, which is focused on improving outcomes for those individuals. The survey targets improvements in substance use and exposure among mothers and

infants. All responses are confidential, with aggregate results shared; no personal information is required.

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10. Around the State

Dr. Shashank Sinha, MD, MSc, FACC, FAHA, Advanced Heart Failure and Transplant Cardiologist and Medical Director of the Cardiac Intensive Care Unit at **Inova Health**, has successfully completed the **Presidential Leadership Scholars** (PLS) program as a member of the [class of 2024](#). Presidential Leadership Scholars is a partnership among the presidential centers of **George W. Bush**, **William J. Clinton**, **George H.W. Bush**, and **Lyndon B. Johnson**.

Virginia Business magazine recently recognized **Sage Bolte**, President and Chief Philanthropy Officer for **Inova Health Foundation**; **Pat Davis-Hagens**, Market President for **Bon Secours Mercy Health Hampton Roads**; **Melody Dickerson**, Senior Vice President for Hospital Operations and Chief Nursing Officer at **VHC Health**; and **Dana Weston Graves**, President of **Sentara Princess Anne Hospital**, on its 2024 Virginia Women in Leadership Awards: Leading Ladies [list](#).

Augusta Health's Imaging Center at the Outpatient Pavilion has been honored with the Diagnostic Imaging Center of Excellence® (DICOE) designation by the American College of Radiology® (ACR®). The DICOE program signifies the highest standard of medical imaging care, going beyond accreditation to acknowledge top-quality imaging practices and diagnostic care. Read more [here](#). – Salinna Lor

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