



Rhode Island Medicaid Accountable Entity Pandemic Safety & Preparedness Plan Requirements

The novel coronavirus (COVID-19) public health emergency is directly impacting all parts of the healthcare system in Rhode Island. To ensure that these impacts do not seriously jeopardize the success of the Medicaid Accountable Entities (AE), the Rhode Island Executive Office of Health and Human Services (EOHHS) adjusted program requirements for AE Program Year (PY) 3, which begins July 1, 2020. One of those changes is allowing Accountable Entities (AE) to earn 5% of their incentive funds by submitting an updated pandemic safety and preparedness plan that addresses health equity, social determinants of health (SDOH), and use of technology such as tele-health. The Pandemic Safety and Preparedness Plan is due August 3, 2020. The purpose of this document is to summarize the requirements of this milestone.

1. Evidence of a written Pandemic Preparedness Plan

Please submit your organization's Pandemic Safety and Preparedness Plan, which must address each component that is included in the Centers for Disease Control and Prevention (CDC) Preparedness Checklist for COVID-19 (embedded below). The embedded CDC Preparedness Checklist for COVID-19 is provided for guidance. A separate template or document can be leveraged, as long as all elements within the CDC checklist is addressed. Please note EOHHS is not requiring evidence to be submitted along with the plan. However, EOHHS reserves the right to audit and or confirm compliance with the submitted plan.

There are also links to additional guidance and resources on the last page of this document.



HCW_Checklist_508.
pdf

2. Evidence on approach to Health Equity with a specific focus on addressing systemic racism and poverty

Research has proven that communities of color are at a higher risk of contracting and dying from a virus such as COVID-19 as a result of the underlying health conditions that disproportionately impact African American and Latinx communities. The root cause of such racial and ethnic disparities is based on systemic factors. The path to eliminating systemic racism and poverty, and as a result, inequity, starts with making needed systemic policy changes in employment, education, and the economy (wealth gap) that lead to disparities in health care access and treatment. Please describe and provide evidence of your organization's current or planned approach to health equity.

- How do your current programs and efforts to address Social Determinants of Health address structural racism and equity?
- What are ways in which you are engaging and supporting patients with lived experience to ameliorate the effect of structural racism?

- What type of implicit bias training is offered to all staff?
- How are health disparities being measured and tracked, including but not limited to collection of patient-reported experiences and outcomes? How do you or will you utilize this data to implement change in your organization to address racial, health and social inequities?
- How is health/racial equity incorporated into your AEs strategic planning process? And do you have a mechanism in place to elicit patient feedback on components of your strategic plan?
- What changes have you put in place, or plan to put in place to have a more welcoming culture for persons of color?
- What measures have you put in place or plan to put in place to provide culturally appropriate care to persons of color or of other ethnicities?

3. Evidence of utilizing Health Information Technology such as tele-health and remote monitoring to ensure continued access to care

The social distancing precautions that were undertaken to prevent further transmission of COVID-19 required healthcare providers to utilize Health Information Technology (HIT) to ensure patients continue to have sufficient access to care. Please provide evidence and a description of current and planned HIT efforts as a result of COVID-19. Please elaborate upon and explain the various technologies implemented in response to COVID-19.

- What will continue as the state transitions through various phases of re-opening?
- What does your AE plan on continuing to leverage from a HIT perspective and/or what are barriers to potential continuation of HIT?
- How is your AE addressing issues specific to limited capacity of technology and support of patients (i.e. digital divide)? Has this been an issue and how has your AE addressed it? How have you addressed and integrated interpreter services via tele-health?
- Please describe lessons learned through by your AE and participating provider organizations rapid implementation and scaling of tele-health and remote monitoring? Does your AE have a strategy for rapid deployment of HIT, telemedicine and how do AE/providers outreach to members with limited access to technology?
- What systems are in place to guarantee HIPAA compliance and/or PII/PHI protections?

Resources:

Preparedness Planning

<http://www.riema.ri.gov/prepare/threats/pandemic/index2.php>
<https://www.ahrq.gov/coronavirus/index.html>
<https://health.ri.gov/diseases/ncov2019/for/providers/>
<http://www.ihl.org/Topics/COVID-19/Pages/default.aspx>
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/steps-to-prepare.html>
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/preparedness-checklists.html>
<https://www.ready.gov/>
<https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html>
<https://www.aha.org/issue-landing-page/2020-03-15-coronavirus-covid-19-organizational-preparedness-and-capacity>
<https://www.ecri.org/coronavirus-covid-19-outbreak-preparedness-center>
<https://www.fema.gov/media-library/assets/documents/188203>

Health Equity

<https://docs.google.com/document/d/1NW2kLRaVE7j3TCKqxVQeHjfk9aFqbB7B0CLJxvGwhmA/edit>
<http://www.ihl.org/resources/Pages/IHIWhitePapers/Achieving-Health-Equity.aspx>
<https://www.commonwealthfund.org/publications/newsletter-article/2018/sep/focus-reducing-racial-disparities-health-care-confronting>
<https://www.urban.org/urban-wire/covid-19-racial-health-disparities-highlight-why-we-need-address-structural-racism>
<https://www.ama-assn.org/delivering-care/health-equity/covid-19-health-equity-resources>
<https://www.apha.org/topics-and-issues/communicable-disease/coronavirus/equity>
<https://www.aha.org/system/files/media/file/2020/04/5-actions-to-promote-health-equity-during-the-covid-19-pandemic.pdf>
<https://www.rwjf.org/en/library/research/2020/05/health-equity-principles-for-state-and-local-leaders-in-responding-to-reopening-and-recovering-from-covid-19.html>
<https://www.jhsph.edu/covid-19/articles/how-health-disparities-are-shaping-the-impact-of-covid-19.html>
<https://www.cdc.gov/healthequity/index.html>
<https://www.acog.org/clinical-information/policy-and-position-statements/position-statements/2020/addressing-health-equity-during-the-covid-19-pandemic>
<http://www.ihl.org/communities/blogs/3-lessons-covid-19-teaches-about-addressing-health-equity>
https://naacp.org/wp-content/uploads/2020/03/Ten-Equity-Considerations-of-the-Coronavirus-COVID-19-Outbreak-in-the-United-States_Version-2.pdf

Tele-Health

<http://www.ihl.org/Topics/COVID-19/Pages/default.aspx>
<https://www.hhs.gov/coronavirus/telehealth/index.html>
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/telehealth.html>
<https://www.medicare.gov/coverage/telehealth>
<https://www.cms.gov/newsroom/press-releases/trump-administration-releases-covid-19-telehealth-toolkit-accelerate-state-use-telehealth-medicare>
<https://www.health.harvard.edu/blog/can-telehealth-help-flatten-the-curve-of-covid-19-2020032419288>
<https://www.ama-assn.org/system/files/2020-04/ama-telehealth-playbook.pdf>

<https://www.nejm.org/doi/full/10.1056/NEJMp2003539>

<https://www.fcc.gov/covid-19-telehealth-program>

<https://www.aafp.org/patient-care/emergency/2019-coronavirus/telehealth.html>

<https://www.kff.org/womens-health-policy/issue-brief/opportunities-and-barriers-for-telemedicine-in-the-u-s-during-the-covid-19-emergency-and-beyond/>

<https://www.whitehouse.gov/articles/deregulation-sparks-dramatic-telehealth-increase-covid-19-response/>

<https://www.cms.gov/articles/print/covid-19-telehealth>

<https://www.aanp.org/practice/practice-management/technology/telehealth>