

Provider Portal Open to Bill for Uninsured: Today, HRSA launched a new [COVID-19 Uninsured Program Portal](#), allowing health care providers who have conducted COVID-19 testing or provided treatment for uninsured COVID-19 individuals on or after February 4, 2020 to request claims reimbursement. Providers can access the portal at [COVIDUninsuredClaim.HRSA.gov](#) and there is also an [FAQ document](#) on the portal and information for providers. Today's announcement for uninsured individuals is part of the Trump Administration's effort to support health care providers in fighting the COVID-19 pandemic. The CARES Act Provider Relief Fund provides \$100 billion in relief funds to hospitals and other health care providers.

Testing and Treatment

Expanding Serological Testing Capacity: [BARDA and InBios International, Inc. partner](#) to expedite development for serological tests to identify asymptomatic or recovered cases of COVID-19. By looking for an immune response to the virus, serology tests help healthcare providers and public health officials better quantify the number of cases of COVID-19 in the country, including among people who may not show symptoms or who have recovered. The FDA also approved four new EUAs for serology tests, including those from: [Abbott Laboratories](#), [DiaSorin](#), [Ortho-Clinical Diagnostics](#), and [Autobio Diagnostics, Inc.](#)

Collecting and Distributing Blood Plasma: BARDA is supporting America's Blood Centers in coordinating the [collection and distribution of convalescent plasma for therapeutic use in treating COVID-19](#) hospitalized patients. Convalescent plasma has potential to be one of the first therapeutics in use on the front lines and is collected from patients who have recovered from COVID-19. It may contain antibodies against SARS-CoV-2 (the virus that causes COVID-19).

Update for Clinicians on Therapeutics: CDC updated their [Information for Clinicians on Investigational Therapeutics for Patients with COVID-19](#). There are no drugs or other therapeutics presently approved by the U.S. Food and Drug Administration (FDA) to prevent or treat COVID-19. Current clinical management includes infection prevention and control measures and supportive care, including supplemental oxygen and mechanical ventilatory support when indicated. Persons seeking information about registered clinical trials for COVID-19 in the United States can search for such information at [www.clinicaltrials.gov](#).

Hand Sanitizer Updates: FDA provided an update on its efforts to [ensure the availability of alcohol-based sanitizer](#) to help meet the demand for hand sanitizer during the COVID-19 pandemic. As a result of the agency's significant flexibility, more than 1,500 additional manufacturers have registered with the agency to produce hand sanitizer. At the same time, the agency is addressing safety concerns related to products being sold that are not in line with the FDA's policy and others being marketed with unproven claims.

Warning to Fraudulent Companies: The FDA and Federal Trade Commission issued a warning letter to a seller of fraudulent COVID-19 products, as part of the agency's effort to protect consumers. The seller warned, [Prefense LLC](#), offers unapproved and misbranded hand sanitizer products for sale in the U.S. with misleading claims that the products are safe and/or effective for the prevention and treatment of COVID-19. There are currently no FDA-approved products to prevent or treat COVID-19. Consumers concerned about COVID-19 should consult with their health care provider.

PPE and Supplies

Distribution of Face Cloth Coverings: HHS, FEMA, and the Cybersecurity Infrastructure and Security Agency (CISA) along with other federal agencies are distributing cloth face coverings as part of a multi-prong approach to re-open American economic activity while continuing to limit spread of COVID-19. As of April 26, 32.5 million cloth face coverings are being processed and distributed to state, local, tribal, private sector, and federal entities. The facial coverings are being delivered in a phased approach for infrastructure workers, first responders and food producers who do not need medical-grade personal protective equipment (PPE) for their daily work. Distribution is based on CISA's analysis of priority infrastructure sectors. The federal government will provide additional face coverings in production to states, territories and tribes for distribution, with priority to emergency services, food production and distribution, and other sectors that support community lifelines.

Face Mask Updates: FDA is re-issuing its Emergency Use Authorization [letter on face masks](#). The updated letter clarifies that facemasks, including cloth face coverings, are authorized to be used by healthcare personnel only as source control in accordance with CDC recommendations under this EUA. As stated in the April 18 letter, face masks are authorized for use by the general public to cover their noses and mouths, in accordance with CDC recommendations. To accompany the information, FDA has released updated [FAQs on face masks](#) that cover the specifications and includes the CDC guidance for when to use face masks and face cloth coverings.

PPE Preservation Best Practices: FEMA released a factsheet on [best practices for preserving PPE](#). This guidance summarizes best practices for national implementation to sustain personal protective equipment (PPE) while ensuring the protection of workers during the coronavirus (COVID-19) pandemic response.

Reusing Filtering Facepiece Respirators: OSHA released [guidance on the reuse of filtering facepiece respirators](#) that have been decontaminated through certain methods. This guidance applies in workplaces in which workers need respirators to protect against exposure to infectious agents that could be inhaled into the respiratory system, including during care of patients with suspected or confirmed coronavirus disease 2019 (COVID-19) and other activities that could result in respiratory exposure to SARS-CoV-2.

Guidance for Specific Populations

Information for Meat and Poultry Processing Facilities: CDC and the Occupational Safety and Health Administration (OSHA) [released targeted guidance](#) to help meat and poultry processing facilities implement infection control practices to reduce the risk of transmission and illness from COVID-19 in these facilities. Meat and poultry processing facilities present unique challenges for the prevention and control of COVID-19 transmission among workers. Meat and poultry processing employers should implement a combination of engineering controls, cleaning and disinfection, social distancing, work practice controls, administrative controls, and use of personal protective equipment. Basic worker infection prevention information and training should be provided to all workers in a clear and accessible manner, including training on social distancing and ways to reduce the spread of infection. To ensure accessibility, multi-lingual materials should be considered and made available, as appropriate.

Guidance for Shared or Congregant Housing: CDC updated their guidance and resources for people living in [shared or congregant housing](#). The following guidance was created to help owners, administrators, or operators of shared (also called "congregate") housing facilities – working together

with residents, staff, and public health officials – prevent the spread of COVID-19. People living and working in this type of housing may have challenges with social distancing to prevent the spread of COVID-19. CDC created resources for both [residents and administrators](#) with tips and advice for how to isolate, clean and remain informed throughout the pandemic.

Funding and Resources

CMS Suspending Medicare Advance and Accelerated Payment Program: CMS is reevaluating the amounts that will be paid under its [Accelerated Payment Program and suspending its Advance Payment Program to Part B suppliers effective immediately](#). The agency made this announcement following the successful payment of over \$100 billion to healthcare providers and suppliers through these programs and in light of the \$175 billion recently appropriated for healthcare provider relief payments. Beginning on April 26, 2020 CMS will not be accepting any new applications for the Advance Payment Program, and CMS will be reevaluating all pending and new applications for Accelerated Payments in light of historical direct payments made available through HHS's Provider Relief. More information on the program can be found [here](#). CMS also updated their [state by state breakdown of funding](#).

Mental Health Grants: [SAMHSA announced that grants](#) have been awarded to increase access to and to improve the quality of community mental and substance use disorder (SUD) treatment services through the expansion of Certified Community Behavioral Health Clinics (CCBHC). CCBHCs provide person- and family-centered, integrated services. The Fiscal Year 2020 CCBHC Expansion Grants include \$200 million in annually appropriated funding and \$250 million in emergency COVID-19 funding. The grant awards are listed at <https://www.samhsa.gov/grants/certified-community-behavioral-health-clinics-expansion-grants>.

CMS Programmatic Flexibilities

Pausing Nursing Home Five Star Quality Rating System: CMS announced via a [memo](#) that the inspection domain of the Nursing Home Compare website will be held constant temporarily due to the prioritization and suspension of certain surveys, to ensure the rating system reflects fair information for consumers. In addition, CMS is releasing information that shows the average number of staff each nursing home has onsite, each day (nursing staff and total staff), and aggregated by state and nationally. Along with these announcements CMS released a list of [Frequently Asked Questions](#) to clarify certain actions the agency has taken related to visitation, surveys, waivers, and other guidance.

Waiver Flexibility: CMS has approved more than [125 requests for state relief](#) in response to the COVID-19 pandemic, including recent approvals for Arizona, Illinois, Iowa, Louisiana, Maine, Maryland, Nebraska, New Mexico, North Carolina, Oregon, Rhode Island, and Washington. These approvals help to ensure that states have the tools they need to combat COVID-19 through a wide variety of waivers, amendments, and Medicaid state plan flexibilities, including for programs that care for the elderly and people with disabilities. CMS developed a [toolkit](#) to expedite the application and review of each request and has approved these requests in record time. These approved flexibilities support President Trump's commitment to a COVID-19 response that is locally executed, state managed, and federally supported.

Infection Control Guidance to Home Health Agencies: CMS [issued guidance](#) to respond to questions from Medicare & Medicaid Home Health Agencies and Religious Nonmedical Healthcare Institutions. The guidance addresses the COVID-19 outbreak and minimizing transmission to other individuals.

Stay safe, and let's keep fighting this virus until it is vanquished!

If you have questions, contact Gary Beck, Director of External Affairs at Gary.Beck@HHS.gov.