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In anticipation of a COVID-19 vaccine becoming available, Governor Ned Lamont announced on Monday, September 21, the creation of a statewide advisory group tasked with "optimizing a statewide vaccine distribution strategy" and conveying critical medical information about the vaccine to state residents. Reginald Eadie, M.D., President and Chief Executive Officer of Trinity Health Of New England, will lead the advisory group, alongside Deidre Gifford, M.D., acting Department of Public Health Commissioner.

The advisory group will consist of vaccination experts, vaccine providers, state agency representatives, state legislators, labor representatives, emergency management officials, and representatives of the most highly affected communities.

At a news conference held by the Governor on Monday, Dr. Eadie acknowledged that people of color, who have been disproportionately affected by COVID-19, are particularly concerned about the safety of a vaccine and committed to serving as an advocate for those communities. Further, he committed that he and Dr. Gifford "will not promote the vaccine to the state of Connecticut and its citizens unless we're sure, regardless of race, age, co-morbidities, that it's the right thing to do and must be proven safe for all of us. And that's a promise."

Dr. Eadie also commented that "Our work is more around not when we get it, but how we get it right. Once we receive the vaccine, how do we operationalize massive distribution in a very safe and high-quality manner?" CHA will work with Dr. Eadie and other member hospitals to assist the work of the advisory group.

RAND Hospital Price Transparency Study Released



On Friday, September 18, the RAND Corporation issued Round 3 of its National Hospital Price Transparency Study. The study concludes that prices paid to hospitals nationally during 2018 by private payers averaged 247% of what Medicare would have paid. Relative to the national average and to the other states studied, Connecticut fell well below the national average at 215% of what Medicare would have paid. That ranks Connecticut at 7th lowest in the nation relative to Medicare.

Unfortunately, the study's premise, that what Medicare pays for patient care is reasonable payment, is deeply flawed. The study ignores the reality that Medicare does not pay what it costs to provide care. In fact, nationally, for every dollar of care provided to a Medicare patient, Medicare pays hospitals only 87 cents. During the 2018 study year, Medicare underpaid Connecticut hospitals by more than \$800 million for the care of its covered patients. If all payers followed suit, hospitals would be at peril – attempting to maintain a highly technical workforce and invest in emerging science, all while losing 13 cents on every dollar they spend to care for patients.

COVID-19 has demonstrated the critical importance of having well-prepared hospitals as a part of the public health infrastructure. RAND's conclusions on payment rates would undermine hospitals in ways that would profoundly diminish our nation's ability to respond to the next emergency.

CMS Issues Urgent Call to Action Following Drastic Drop in Care for Children



On Wednesday, September 23, the Centers for Medicare and Medicaid Services (CMS) released a report, based on Medicaid and Children's Health Insurance Program (CHIP) data, indicating an alarming drop in a variety of important children's healthcare services during the first several months of the COVID-19 pandemic. Confirming what doctors and other health experts have been observing, CMS shared data from March 2020 to May 2020 indicating a 22 percent decline in infant vaccinations (up to age two), 44 percent fewer child screening services to assess physical and cognitive development issues, and 69 percent fewer dental services. Medicaid and CHIP cover nearly 40 million children, including three quarters of children living in poverty and many with special healthcare needs.

While these numbers have begun to rise since May, CMS says the increase is not enough to make up for the steep decline in services in the spring. CMS is working with state departments of public health to develop strategies to catch up on missed childhood vaccines and other services, a goal that will require healthcare providers to exceed 2019 vaccination and screening rates in the final months of 2020.

CMS Administrator Seema Verma emphasized the urgency of the situation, "The absence of these vital health care services may have lifelong consequences for these vulnerable children, and I call on states, pediatric providers, families, and schools to ensure children catch-up on overdue medical, behavioral health, and dental appointments as well as childhood immunizations."

Education Updates

CHA Leadership Development Series—Building Resilience

Tuesday, October 13, 2020

11:00 a.m. – 12:30 p.m.  
Virtual Program

As we work to manage the demands and stresses of leading through these difficult times, it is important to build personal resilience. This is a deliberate process and this virtual, [90-minute program](#) will help participants understand the neuroscience behind calm and threat responses, as well as recognize and strengthen resilience. Register online [here](#).