

HRSA/CDC Call: COVID-19 Update for Rural Providers April 8, 2020

Dr. Diane Hall – CDC – point of contact for rural providers

Questions or ideas email: Ruralhealth@cdc.gov

Eric Hargan – Dep. Sec. HHS

- Social distancing guidelines extended until 4/30; can be modulated for rural or remote areas
- CARES Act
 - Announced new steps on the \$100B yesterday
 - Will begin initial distribution this week based on largest amount of Medicare reimbursement
 - Will prioritize rural that receive higher levels of Medicare reimbursement
 - Expect 500,000 or so providers will receive \$ this week
 - Can't bill uninsured for testing or treatment
 - Further tranchements will go to those who didn't receive initial payments because of lower Medicare
 - New flexibilities for providers to waive co-pays, greater use of telehealth
 - Awarded \$1.3B to CHCs today
 - New resources
 - CDC pushing out \$1.5B in state and local preparedness grants – public health needs with set aside for tribal
 - Mental health - \$250M and \$50M suicide prevention
 - SAMSHA has publicized grant – click [here](#) for details– due date 4/10

Dr. Jay Butler, CDC Dep. Dir. Infectious Diseases

- Not just urban problem, expanding into rural; goal is to flatten the curve – reduce number of cases and spread the impact over longer period of time
- Community mitigation efforts starting to work in urban areas leading to decline in increase of new cases
- Asymptomatic transmission
- Expanded recommendations to include soft face covers
- Tigers and lions but no bears
- Children appear to be at lower risk of severe injury or death, but not at zero risk
- Health inequities exist

Dr. Butler responded to questions:

Q: What's important for cloth face covers?

A: More splatter shield, not filtering – something breathable. Don't mask children under
CDC website has instruction on how to make masks.

Q: Messaging around face covers?

A: Aware there are issues re cultural competence – welcome input on messaging – doing surveys

Q: Can masks and gloves be donated to health care facilities if boxes are opened?

A: FEMA has info on website; check with state/local health department.

Q: Should N95 masks be worn in all surgeries?

A: N95 masks should be worn in healthcare areas where there's a chance of aerosole producing procedure.

Q: Concerns raised about being able to secure rapid testing devices.

A: Talk to people in your state who can talk with FEMA.

Q: Efficacy of antibody tests?

A: Ongoing work to evaluate quality of tests.

Q: Inconsistent messaging in rural areas re masks.

A: Shouldn't discourage face coverings – no major downsides. Greater importance in areas of higher transmission.

Q: How long do we have to practice social distancing?

A: Recommendations can and should change depending on science. Driven by data, not date. Scale up/scale back will be variable by location.

Q: How to sanitize PPE?

A: CDC has info – can be sanitized with all but about 10% reused.

Q: Lot of questions about models – would like rural specific data.

A: Response guided by available data; no specific date on any rural specific data coming from CDC

Q: Is there a lag before rural areas get hit? Are there any models?

A: Some counties already have high rates – have to know what's going on locally. Work with local/state health dept to be prepared for increased rates.

Q: Are rural numbers low because of lack of infection or lack of testing?

A: Both – will have more clarity with increased testing. Weekly COVID view on CDC website.

Q: What's the risk to rural when urban starts traveling again?

A: More older people in rural areas, spread of infection very real.

Q: Is data being collected by race & gender because of disparities?

A: Yes

Q: Suggestions for rural areas with large number of people at risk?

A: Social distancing as much as possible – guidelines on website also address managing homeless population