COVID -19 Legislative Workgroup - Notes from April 15th Zoom Meeting

Today, the Joint COVID-19 Response Legislative Workgroup held a Zoom meeting. The agenda included briefings from the Maryland Health Care Commission (MHCC), Maryland Department of Health (MDH), Maryland Office of the Attorney General (OAG), and the University System of Maryland (USM).

MHCC explained that its website is providing guidance on emergency CONs and telehealth, as well as providing information about the scaling back of some oversight responsibilities relating to cardiac and PCI procedures. MHCC along with the MDH Office of Health Care Quality (OHCQ) have agreed on a streamlined approach to adding capacity and adding beds at health facilities. OHCQ will issue a temporary license if a facility has the bed space and hospital headwall systems for medical gases, etc. If a facility does not have that existing headwall system, MHCC will issue an emergency CON. MHCC is averaging a 24-48 hour turnaround time for issuance of emergency CONs. To date, MHCC has approved 850 beds under 18 emergency CONs at 12 locations. OHCQ approved 1,500 beds under temporary licenses. MHCC has also issued guidance to hospital executives to educate them on the approach. MHCC is also getting about 30 calls a day about telehealth. They are doing significant outreach as well as webinars. They will be awarding a grant to a nonprofit to bring community practices up to speed on telehealth.

MDH is working with the Department of General Services to procure more personal protective equipment (PPE). They have about \$7 million of PPE that's due to arrive next week from China. They are also acquiring an additional 2,000 beds. The state has received 470 ventilators from the federal government as well as some from California. The vents from California are on loan and need to be returned in a few weeks. At this point, the state is safe in terms of ventilators. Some hospitals have ventilators that they're not using. On the PPE side, the state is behind the curve because we're having trouble getting them in. The state is probably at 50% of what is needed. But, with what was ordered the state is okay. The concern is about getting them into the state.

In terms of staffing, MDH has procured 2 different staffing agencies. One is doing professional staffing and the other is getting medical students on the clinical side. The state is also receiving a terrific response from volunteers. There will be a focus on using them to reach out to in-home services. As more people test COVID-19 positive, those folks won't be able to take care of elderly relatives. The state needs help localizing that response and getting teams in place to provide care. Volunteers will also be beneficial to evening out staffing for surge hospitals, particularly at the Baltimore Convention Center.

OAG has received hundreds of complaints about price gouging on products, such as sanitizer, toilet paper, diapers, etc. It is using their hotline, consumer alerts, and social media to let people know they are a resource to stop what's going on. OAG has issued over 100 letters of warning to businesses accused of doing this. They have heard responses from most of them. The first level in the process is from the mediation unit. If they receive a response from a business that's acceptable, that's it. If they don't receive a response or receive one that is unsatisfactory, then it goes to OAG's enforcement unit for an administrative action. Currently, there is some difficulty in knowing if there is price gouging going on based on its legal definition, especially when a business had not previously sold that product or if distributors are the ones raising prices. One other consumer issue that is significant are scams. Anytime there is a crisis, the scammers come out and try to rip people off. OAG is continuing to give advice to all of the executive agencies as well as working with the Governor's office on legal basis for executive orders.

The USM began remote instruction on March 23rd. It has gone incredibly smoothly, and the USM is working on webinars and virtual workshops for faculty who don't have a lot experience with online and distance learning. The feedback received from faculty and students is largely positive. USM has not made a final decision across the system on summer instruction but is prepared. Every system institution is also refunding fees relating to room, board, and parking on a prorated basis. Many of the refunds have already been made. Most system universities have had a pool of money for students in need. Those reserves are being stretched. There has been a great deal done in the way of fundraising. \$1 million has gone to USM students who are in need. There is a technology assistance program (relating to the digital divide): computers, software, internet access. In addition, students can

decide on whether they want a letter grade or pass/fail grading. In terms of admissions, since there is no SAT or ACT testing going on, the USM has suspended requirements to have one of these entrance exams. Lastly, the USM is working to ramp up COVID 19 testing. Residence halls can be used for first responders and medical workers. Shuttle buses can be used for transportation. The USM is open to ways to use their resources and facilities to help and has developed an MOU template that can be used to formalize these arrangements. Because of loss revenue and additional operating expenses, the USM is \$240 million behind for just this semester, but is looking forward to relief from the CARES Act.