

MINUTES**Senate Committee on Public Health, Welfare, and Labor****House Committee on Public Health, Welfare, and Labor****Monday, June 22, 2020****10:00 A.M.**

Committee Members Present in Committee Room A: Senators Missy Irvin, Chair; Bill Sample, David Wallace, Vice-Chair; Kim Hammer, and Ronald Caldwell Representatives Jack Ladyman, Chair; Austin McCollum, Clint Penzo, Fredrick Love, Jeff Wardlaw, John Payton, Josh Miller, Justin Boyd, Justin Gonzales, Karilyn Brown, and Kenneth Ferguson

Committee Members Present on Zoom: Representatives Deborah Ferguson, Vice-Chair; and Mary Bentley

Other Legislatures Present: Senators Jonathan Dismang, Linda Chesterfield, and Trent Garner Representatives Aaron Pilkington, Andy Davis, Cameron Cooper, Denise Ennett, Denise Garner, Grant Hodges, Harlan Breaux, Jamie Scott, Jim Dotson, Johnny Rye, Keith Slape, Marcus Richmond, Marsh Davis, Richard McGrew, Reginald Murdock, Stan Berry, Tippi McCollough, and Vivian Flowers

Call to Order and Comments Senator Irvin called the meeting to order. Representative Ladyman discussed the importance of continuously being updated on the Covid-19 virus.

Consideration to Adopt Meeting Minutes from June 8, 2020 and June 9, 2020 [Exhibit C] Without objection, the minutes were adopted.

Impact and Current Status of COVID-19 Pandemic on Arkansas and Arkansans [Exhibit D-6] Cam Patterson, MD, MBA, Chancellor, UAMS and Stephen Mette, MD, CEO, UAMS Medical Center provided an update on Covid-19. Drive-by testing was established and relationships with partners across the state have grown stronger. The first step financially was by providing funding to DHS for rural hospitals. Patients that are found to have Covid-19 are reimbursed at the same rate as an individual with influenza. UAMS is the only hospital in the state able to do state level predictions in reference to the trajectory of Covid-19. Models predict the number of cases will increase in the fall by 30-50 fold in Arkansas. A 750 increase of critical care beds was initiated in Little Rock.

Jennifer Dillaha, MD, State Epidemiologist, Arkansas Department of Health discussed testing capacity and the challenge of getting individuals to go to testing sites, specifically those within the Latino community and the Marshallese community. Contact tracing within these communities is slightly more difficult due to language barriers.

Bo Ryall, President and CEO, Arkansas Hospital Association discussed the finances of hospitals during the outbreak. \$34 million dollars were spent to obtain PPE for hospitals across the state and to set up testing sites. Arkansas has a lower reimbursement rate from commercial insurances and government payers. Rachel Bunch, Executive Director, Arkansas Health Care Association discussed the affect the virus has had on long term care facilities such as nursing homes and assisted living facilities. Statewide testing has been going on throughout the month of June. Jodianne Tritt, JD, Executive Vice President, Arkansas Hospital Association discussed the expenses that come along with training different medical personnel in order to treat Covid-19 patients and obtaining additional ventilators.

Covid-19 Impact on Various Population Groups [Exhibit E-1] ShaRonda Love, MPH, Director, Minority Health Commission discussed the outreach strategies being utilized to reach out to minority populations most likely to be affected by Covid-19. These strategies include: Covid-19 webpage with resources for individuals,

presentations to encourage better communication with nonprofits, faith based organizations, and schools, fact sheets that are culturally competent, and media campaigns. Challenges being faced include: sponsored activities having been canceled, no access to PPE or testing equipment, and that staff normally handles chronic disease rather than infectious disease.

Pearl Mcelfish, Vice Chancellor, UAMS-NW discussed that Covid-19 may be spreading among minority groups, particularly the Latinx and Marshallese communities, more rapidly because they are more likely to seek treatment for their disease after having it for an extended period of time. They are also more likely to have underlying comorbidities which can be attributed to their more dense living situations. For both communities, enhanced case management is needed to better care for all those in the living situations. Contact tracers are working to gain a sense of trust within each community to slow the spread of Covid-19.

Nelson Peacock, President and CEO, NW Arkansas Council discussed the joint effort in helping to prepare for Covid-19. The effort to stay coordinated is still being put forth along with consistent public messaging.

Judd Semingson, CEO, Community Clinic of NWA discussed the increased testing capacity within the clinic with more than 8,000 tests having been administered over the past 30 days. Those who are exhibiting symptoms can easily access treatment to determine whether or not they have the virus. The clinic has also started a food delivery service among its patients in order to stop the spread of the virus. Educational tools to better inform potential patients are being developed.

Susan Barrett, Chair, NWA Council Healthcare Transformation Division discussed the ways the virus has affected those in NWA and across the state.

Treatment of Covid-19 Patients Using Telemedicine and Broadband Curtis Lowery, MD, UAMS discussed the growing need for the telemedicine and broadband due to Covid-19. During this crisis, telemedicine has become essential to most patients throughout the U.S. rather than a novelty. Doctors have had to adapt very rapidly. The federal government initially started paying for digital health at the start of the pandemic. Now, all insurance companies, Medicare, and Medicaid are responsible for paying these costs. Digital health can be used to directly treat patients, particularly in urban areas. Unfortunately, it is more difficult in rural areas that do not possess broadband capability.

Update on Covid-19 Testing in Human Development Centers and Arkansas Health Center [Handout 1] Melissa Stone, Director, Division of Developmental Disabilities Services, Department of Human Services and Jay Hill, Division of Aging Adult & Behavioral Health Services, DHS discussed testing that has been going on in relation to long term care facilities in the state. 239 patients have been tested along with 508 employees. The results indicated there were no positive cases. Long term care facilities will continue being tested while quarantining those who have been diagnosed with Covid-19. The handout provided by DHS indicates that a total of 1,946 employees and 895 residents have been tested within the 5 Human Development Centers across the state of Arkansas. There are currently a total of 82 active cases among these centers with a total of 5 recovered cases.

Update on Federal Cares Act/Initiatives for Healthcare Providers Mark White, JD, Chief Legislative and Intergovernmental Affairs Officer and Chief of Staff, DHS and Janet Mann, Director, Division of Medical Services, DHS discussed the payment process for healthcare workers directly involved with Covid-19 patients. Currently, over \$51 million have been paid to hospital workers and \$3 million to indirect care workers. Providers are also being reimbursed for expenses that have occurred.

***Items I and J were held until the next meeting taking place July 7, 2020 at 1:30 P.M.**

Without any further business, the meeting adjourned at 3:26 p.m.