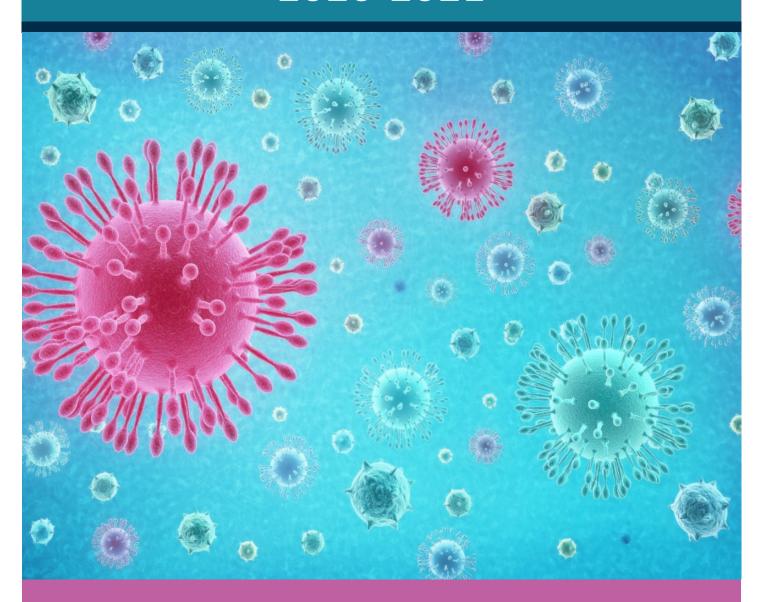


### Maine Hospital Association

# Annual Report

2020-2021



A Pandemic Timeline Year 2



Dear Colleague,

When I started writing this introduction in July, it had a very different tone. New cases of COVID-19 were falling, hospitalizations were down and life was beginning to feel almost normal.



I thought this letter was going to be one of celebration and relief and congratulations. And then, the Delta variant hit and those optimistic thoughts went out the window.

I don't have to tell you what's been happening...you're seeing it in your hospitals. Unvaccinated patients who are younger and sicker than at any other time during the pandemic are filling your ICUs. We've broken the previous record hospitalizations and for the number of patients on ventilators. You're on diversion. You're dealing with exhausted staff members, some of whom are getting sick themselves.

I've been disheartened too. As I write this, the state just logged its 1,000 death from COVID-19. But looking back over the past year, I realized that, while things aren't as good as we expected in July, they're so much better than they were a year ago.

A year ago, no vaccine had been approved. A year ago, people weren't visiting elderly relatives because they were afraid of making them sick. A year ago, when we left the state we had to test and quarantine upon return. A year ago, health officials were begging people not to gather outside their household for the holidays.

Now, at least, we're safer. If we're vaccinated, even if we're unlucky enough to have a breakthrough infection, we're unlikely to be hospitalized. We can see our elderly parents. Our kids are back in their classrooms, for the most part.

We at MHA are continuing to work on your behalf—not just surrounding COVID, but to make sure that you have the resources to support the care you provide to all your patients. As we look ahead to next year, we will continue to be your voice in Augusta and Washington. We will address funding issues, workforce concerns and duplicative reporting requirements.

Meanwhile, we wish you and your staff nothing but good health.

Sincerely,

Steven R. Michaud President

### October 2020

#### October 2

President Donald Trump and his wife Melania test positive for COVID-19. The President is admitted to the hospital where he will remain until October 5.

#### October 6

The Mills Administration announces that Maine will move into Stage 4 of the Plan to Restart Maine's Economy beginning Tuesday, October 13, 2020. Stage 4 increases limits on indoor seating to 50 percent capacity of permitted occupancy, or 100 people – whichever is less - and maintains the critical public health measures outlined in **COVID-19 Prevention** Checklists and strengthens the mask mandate.

#### Oct. 8 to Nov.19

MHA hosts the 5-part Engage Series with sessions addressing the fallout from the pandemic. Sessions include how to re-inspire healthcare workers, win back patients and adjust to the new normal.

#### October 16

MHA, with the Maine Medical Association, submits comments on proposed changes to the state's Notifiable Diseases and Conditions Rule. Among the concerns is the deletion of certain provider civil liability protections for good faith reporting of suspected or confirmed notifiable diseases and conditions.

#### October 20

The Maine Center for Disease Control releases its interim vaccination plan, which plans to partner with Maine's hospitals to help distribute vaccines first to healthcare workers and then to others.

### October-November 2020

#### October 22

The Food & Drug Administration (FDA) issues emergency use authorization for remdesivir as the first drug to treat COVID-19.

#### October 27

MHA hosts a webinar on COVID regulatory revisions.

#### November 1

As cases explode nationally, the Mills Administration extends the "Keep Maine Healthy" program through December to promote local prevention efforts. The Administration again lowers indoor gathering limits, postpones bar and tasting room re-openings, and removes New York, New Jersey and Connecticut from exempt status under the State's travel advisory.

#### November 3

Joe Biden is elected president of the United States. The next day, the U.S. reports 100,000 cases in a single day, leading to a shortage of N95 masks at healthcare facilities.

#### November 5

On the day Maine recorded 183 new cases of COVID-19, the highest single-day increase since the beginning of the pandemic, Governor Mills announced an Executive Order requiring Maine people to wear face coverings in public settings, regardless of the ability to maintain physical distance.

### **November 2020**

#### **November 9**

Pfizer releases data from its COVID-19 vaccine trial showing that the vaccination was 90% effective. On the same day, the FDA issues emergency use authorization for Eli Lilly's bamlanivimab, a monoclonal antibody treatment, which appears to protect highrisk patients.

#### **November 16**

Moderna announces its vaccine reduces the risk of COVID-19 infection by 94.5%.

#### November 17

Maine Hospital Solutions, the New Hampshire Hospital Association and VISTA host Provider Staffing in the COVID Era: VISTA's Rapid Response Recruitment, which discusses VISTA's program to address urgent physician staffing needs.

#### November 20

Pfizer-BioNTech submits its application for emergency use authorization for its vaccine. The results of its nearly 44,000-person trial show that it's nearly 95 percent effective against COVID-19.

#### December 10

An FDA advisory panel endorses the Pfizer-BioNTech vaccine. On December 11, the FDA grants it emergency use authorization for people 16 and older.

#### December 17

The FDA advisory panel endorses a second vaccine, the Moderna vaccine. The next day, on December 18, the FDA grants it emergency use authorization.

### December 2020

#### December 4

MHA has to cancel its annual Small or Rural Hospital Conference, scheduled for February.

MHA will hold a series of monthly webinars in the new year.

Rising cases cause Gov. Mills to order certain businesses to close by 9 p.m.

#### December 7

As case counts in the state rise into the hundreds, the Maine CDC announces that it will have to triage its investigations to avoid overwhelming its case investigators.

The Maine CDC also announces the state lab will no loner process hospital tests.

#### **December 15**

The first Pfizer vaccines have rolled into Maine and healthcare workers begin getting vaccinated.

MaineHealth vaccinates 150 healthcare workers on the first day.

#### December 22-23

Nursing home residents begin receiving vaccinations.

MHA's COVID-19 newsletter includes instructions on handling dry ice, which the vaccines require.



#### January 13

Gov. Mills announces the state's vaccination strategy. Mainers 70 years and older are the first in line to get the precious vaccines. Emergency service personnel such as police and firefighters; people who support critical pandemic response infrastructure; and adults of all ages with high-risk medical conditions are also prioritized.

#### January 15

MHA releases a video featuring hospital CEOs thanking their staff for all the hard work they have done during the pandemic. The video features photos of hospital caregivers testing, treating and vaccinating patients.

Gov. Mills, 73, receives her first vaccine.

#### January 21

On his first full day in office, President Joe Biden releases his 200-page COVID-19 response plan.

#### January 27

MHA hosts Protecting the Employee: Hospitals' Responsibilities During COVID, a webinar addressing the Occupational Safety and Health Administration's requirements for healthcare organizations.

#### January 29

Johnson & Johnson reports that its one -dose vaccine candidate is 72% effective in the U.S. and 66% effective overall at preventing moderate to severe COVID-19, 28 days after vaccination.







# February 2021

#### February 2

MHA hosts its COVID-19 Provider Relief Fund Update webinar.

#### February 4

The U.S. Senate passes an MHA-supported budget amendment, co-authored by Sen. Susan Collins, to protect rural hospitals and strengthen the Provider Relief Fund.

#### February 11

MHA testifies against two bills that would require providers send bills in a timely matter. Both bills die. MHA kicks off its

MHA kicks off its Winter Webinar series, a substitute for the Covidcanceled Small or Rural Hospital Conference.

#### February 18

MHA testifies against proposed cuts to hospitals in the biennial budget, pointing out that cuts to hospitals during a pandemic is foolish.

#### February 24

Maine Hospital
Solutions-endorsed
vendor Medical
Solution hosts a
webinar for MHA
members
addressing staffing
challenges caused
by the pandemic.

#### February 26

Gov. Mills announces that Maine will expand vaccines to those age 60 and over.

The FDA issues emergency authorization for the Johnson & Johnson vaccine.

# March 2021

#### March 5

MHA announces that Summer Forum will be a virtual event.

#### March 9

MHA kicks off a webinar series dealing with crisis management.

#### March 12

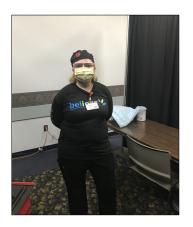
Gov. Mills announces that all Maine adults will be eligible for a COVID-19 vaccine by May 1. On March 23, she announces that Mainers older than 16 will be eligible for vaccines on April 23.

#### March 18

MHA hosts Board Leadership in Times of Disruption and Chaos, a webinar for hospital trustees and executive leadership.







## **April 2021**

#### April 1

Gov. Mills moves up the date and announces that all Maine residents age 16 and older will be eligible for a COVID-19 vaccine beginning Wednesday, April 7, 2021.



#### April 13

Maine, along with the rest of the country, pauses the administration of vaccines from Johnson & Johnson because of rare blood clots.
Vaccines resume on April 23.

#### April 14

The State makes changes to Chapter 264, Immunization Requirements for Healthcare Workers. The rule adds influenza to the list of diseases that healthcare workers must be vaccinated for. Some of the clarifying language foreshadows the eventual requirement that healthcare workers be vaccinated for COVID-19.

#### April 27

Following the US CDC's guidance, Maine removes mask guidance for outdoor gatherings for people who are fully vaccinated.

To kick off its
Lunchtime Learning
webinar series,
MHA hosts Hot
Topics in Today's
Healthcare,
including a
discussion of
provider relief
funding.

#### April 29

MHA kicks off its 2021 Virtual Leadership series with a session on Telemedicine Post COVID-19, Hospital at Home and Expansion of Technology.

### **May 2021**

#### May 10

Maine providers begin administering the COVID-19 vaccine to those 12 and older.



#### May 11

The state announces Your Shot To Get
Outdoors vaccine
incentive program.
Maine adults who get vaccinated can get gift cards, hunting or fishing licenses, park passes and other awards.

#### May 20

MHA successfully persuades the Mills administration to eliminate two proposed cuts to psychiatric services. The administration also postpones a cut to the 340B program.

#### May 25

The U.S. CDC investigates reports of myocarditis after mRNA COVID-19 vaccinations.

Eventually it will become clear that the risk of myocarditis is nearly 4 times higher as a result of COVID-19 infection as it is a result from vaccination.



### **June 2021**

#### June 4

The State tells hospitals they must begin reporting staff vaccination rates beginning June 14.



#### June 16

The state announces Don't Miss Your Shot: Vaccinationland Sweepstakes, a statewide program to encourage Maine people to get vaccinated against COVID-19. The sweepstakes will reward one vaccinated winner with \$1 for every person vaccinated in Maine by the Fourth of July.

#### June 17

MHA hosts its first (and hopefully only) virtual Summer Forum. Sessions include ideas on ways to reimagine healthcare. Hospital panelists discuss how the pandemic led systems and independent hospitals to cooperate and share ideas.

#### June 29

The MHA Board of Directors announced its support for a state mandate requiring all healthcare workers get vaccinated for COVID-19.

#### June 30

Maine's 15-month state of emergency ends at midnight.

In its COVID-19
Coverage newsletter,
MHA outlines what
does and doesn't
change for hospitals
with the end of the
emergency.





## **July 2021**

#### July 4

Independence Day is marked with some of the lowest case counts in Maine since the pandemic began. The Maine CDC stopped its weekly press conferences with the end of the state of emergency. Hospitals have closed mass vaccination sites and drive-through testing sites.

#### July 15

MHA hosts The
Emotional Impact of
COVID-19: Leading your
Team and Culture Past
the Collective COVID
PTSD, part of its Virtual
Leadership Series.

#### July 16

The U.S. Department of Health & Human Services announces that 18 Maine small rural hospitals will get \$4.65 million for COVID -19 testing and mitigation.



#### . July 27

In light of the Delta variant that is sweeping the nation, the U.S. CDC changes its masking recommendations to say that vaccinated individuals should mask in public in areas with substantial or high transmission. That is only two counties in Maine, but the rest of the state will soon fall into that category.

# August 2021

#### August 5

Millinocket Regional Hospital becomes the first hospital in Maine to require its staff to be vaccinated against COVID-19. Later in the month, MaineHealth and Northern Light Health will announce their own requirements.

#### August 9

MHA joins with other New England hospital associations to draw attention to a critical blood shortage, exacerbated by the pandemic.

#### August 12

The Mills
Administration
announces that
healthcare workers
at licensed
institutions must be
vaccinated by
October 1.

#### August 16

With hospitalizations rising rapidly, the Maine CDC once again asks hospitals to report their critical care and ventilator capacity.

#### August 23

The PfizerBioNTech vaccine
gains full Food &
Drug
Administration
approval,
prompting some
companies to
require their
employees to
vaccinate.



# September 2021

#### September 2

Gov. Mills announces that the state won't start enforcing the healthcare worker vaccine mandate until October 29.

#### September 7

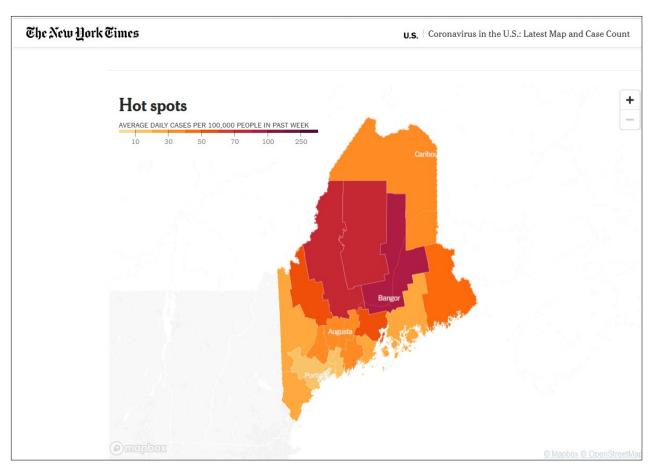
Because of high use of monoclonal antibody therapies in states with low vaccination rates and high case loads, the U.S. Department of Health & Human Services announces it will change the way the medication is distributed.

#### September 8

Because of the skyrocketing cases and hospitalizations, the Maine CDC resumes weekly news conferences.

#### September 9

President Joe Biden announces that employees of businesses with 100 or more people will have to either get vaccinated or get weekly tests for COVID-19. He also announces that staff at healthcare organizations that receive Medicare and Medicaid funds will also have to be vaccinated.



The pandemic in Maine, September 20, 2021

### **MHA Activities**

### **Advocacy**

The first session of the 130<sup>th</sup> Legislature went well for hospitals. There weren't many negative bills, some relief payments were made available to hospitals and several bills supported by MHA were enacted into law.

The budget provided a one-time payment of \$23M to hospitals that will be distributed pursuant to the supplemental pool formula. The spending plan re-based the hospital tax from 2016 to 2018 revenues. It provided "match" at the 100% rate. This has been a long-standing goal for MHA and we are pleased the legislature finally provided full match.

Probably the most important aspect of the budget is that it foreshadows further Medicaid rate studies and rate setting. It sets aside funding for both rate studies and funding for rate increases. While we don't know the outcome of that process, we know DHHS is interested in attacking cost-based reimbursement.

MHA successfully had the proposed 340B cut removed from the budget, though, concern remains about how Medicaid reimburses physician-administered 340B drugs.

In terms of MHA-supported bills, lawmakers carried over the Yellow Flag bill that would have required the Department of Health & Human Services to set up a network of remote clinicians to evaluate a person before taking his guns. A bill that explicitly declared that being stuck in a hospital beyond medical necessity is grounds for an emergency guardianship for individuals who otherwise require a guardian (e.g. lack decisional capacity) became law. Likewise, an MHA-supported bill directing the department to develop a plan to handle children who are in emergency rooms but need behavioral health services outside the hospital.

The focus of MHA's federal advocacy has been on securing financial relief for hospitals.

Since the pandemic began, Maine hospitals have received just over one-half billion dollars from the federal government. While aggregate hospital losses in Maine still exceed that figure, we are very appreciative of the federal support that has been provided. We have also pushed to make the bureaucracy around this aid reasonable including the timeframe for simply using the funding.

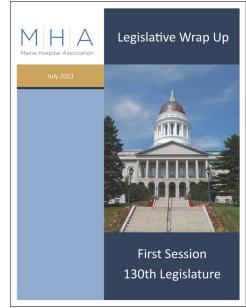
Additionally, MHA has continued to advocate on behalf of the 340B program, particularly getting HRSA to enforce the contract pharmacy requirement, and we tried to make the federal "surprise" billing legislation reasonable.

Finally, during the most recent infrastructure conversations, we have fought to preserve the aid allocated to hospitals and not let it be re-directed as a "pay for" for the infrastructure legislation.

### Wage Index

MHA coordinated the Wage Index Improvement Project as we have done previously. Again this year, hospitals were able to choose between two qualified consulting firms to do the work. Due to COVID-19, many of the deadlines were pushed back by the Centers for Medicare & Medicaid Services so the process and results will occur later than in normal years.

Last year saw every proposed adjustment that hospitals filed accepted by the Medicare Administrative Contractor (MAC) after a significant amount of data exchange between the MAC, the consulting firms and the hospitals. This was the fourth straight year that all of the proposed adjustments were accepted, which is an excellent result.





### **Education**

The pandemic forced MHA to make all of its education sessions virtual. In many ways this was an advantage because it allowed more members the chance to attend. And as the year went on, everyone, from presenters to participants, got more familiar with the platforms.

Among the programs we offered were webinars on:

- Emergency Management, the Environment of Care and Life Safety
- Centers for Medicare & Medicaid Services Quality Assessment and Performance Improvement standards
- Conditions of Participation compliance
- Awareness around human trafficking
- Preventing patient falls
- Advance directives compliance
- EMTALA updates
- Evaluation and Management Codes
- Global budgets
- Restraint and seclusion regulations
- Ransomware threats to hospitals
- New federal price transparency rule
- Information blocking
- Board leadership in disruptive times
- Infection prevention

#### Some of the special programs we ran were:

- A five-part Engage series that focused on supporting staff, patients and communities
- A three-part series on Crisis Management
- A four-part Lunchtime Learning series, featuring MHA corporate affiliates
- A five-part Virtual Leadership Series
- A four-part Governance Webinar Series

#### **Virtual Summer Forum**

After having to cancel the 2020 MHA Summer Forum, the Association took steps to ensure that members would be able to gather virtually in 2021.

Reflect, Rebuild, Reimagine brought together speakers who discussed resiliency, the post-pandemic new normal, silver linings from the pandemic and how the pandemic gives us an opportunity to rewrite our future.

One highlight of the conference was a panel of hospital leaders discussing how they have cooperated during the pandemic to improve care, share supplies and expertise.



For example, when remdesivir was distributed to only certain hospitals, hospitals developed a plan to distribute it to smaller hospitals.

Conference sponsors had an opportunity to meet virtually with attendees in the virtual vendor area.



### **MHA Activities**

#### **Communications**

MHA's communications team spent the past year talking about COVID-19 both to the hospital community and the general public. In addition to our usual daily *MHA E-clips*, weekly *MHA Friday Report*, monthly newsletter for corporate affiliates and quarterly trustee newsletter, we've continued to publish our periodic *MHA COVID-19 Coverage*.

MHA COVID-19 Coverage is distributed to hospital executives, clinician leaders, infection prevention specialists and communications directors. It contains news about the pandemic, including webinars, policy changes, clinical research and practical advice for managing these complicated times both organizationally and individually. At the beginning of the pandemic, we sent it out nearly daily. As things stabilized, publication became less frequent and with the end of civil state of emergency, we hoped it could become something we rarely published. Alas, as the Delta variant rose, so did the necessity and the frequency of publication.

The MHA communications team serves as the gateway for the press, steering reporters to the right staff member and scheduling interviews with both local and national media. We share periodic updates on MHA's social media channels where we also answer readers' questions.

This year, we produced two videos and helped with a third. In January, we worked with a professional video editor to produce a thank-you to hospital staff for managing in a difficult year. In June, we produced a retrospective of the pandemic that ran with MHA Board Chair Steve Diaz's opening remarks for MHA's virtual Summer Forum.

We worked with our New England counterparts this summer to produce a video and accompanying outreach to bring attention to the regional blood shortage. We also worked with the U.S. PIRG Education Fund to develop messaging to encourage vaccination among rural residents and to promote panel discussions featuring local physicians on vaccines and back-to-school concerns.



Sources used in this timeline: State of Maine COVID-19 Response, Response Timeline, https://www.maine.gov/covid19/timeline.





### **Endorsed Services**



**Actual Energy, Inc.** – provides dynamic electricity pricing and innovative value-added services, allowing hospitals to optimize energy consumption while reducing costs and carbon emissions.

**Bisson/Atlas Moving** – provides local and interstate household goods relocations, office moves, commercial furniture installation and reconfiguration, document storage, retrieval and destruction.

**Class Action Capital** – is a provider of class action settlement claim management and monetization to the global corporate community.

**CommerceHealthcare** – offers an automated accounts payable solution that allows hospitals to pay invoices electronically and receive a revenue share.

**DCI Solutions** – works with hospitals to reduce operating costs by analyzing invoices to identify additional tax credits, refunds, and cost efficiencies throughout an organization's overhead.

**Innovative Business Technology** – is an outsourcing specialty company that offers billing and recovery solutions for the hospital liability line of business.

**Jackson Physician Search** – is a leader in the permanent recruitment of physicians and advanced practice providers to hospitals and health systems across Maine and the United States.

**Lincoln Financial Group** – allows employees of MHA members to choose from a wide range of retirement plan investment options.

Medical Mutual Insurance Company of Maine – provides medical professional liability insurance to physicians, hospitals, nursing homes and allied health facilities in ME, NH, VT and MA.

Maine Hospital Solutions provides MHA members with cutting edge and cost-effective solutions.

Visit <a href="http://www.themha.org/Endorsed-Services">http://www.themha.org/Endorsed-Services</a> for more information.

**Medical Solutions** – uses vendor management software and relationships with a network of hundreds of Affiliate Providers to streamline administrative functions, eliminate the need for multiple contracts and invoices, and simplify the procurement process. The core competency is providing clinical healthcare professionals to facilities on a contingent basis.

Performance Healthcare Solutions – provides pharmacy benefit solutions that are a market disruptor and provides hospitals with a significant discount on their pharmacy drug benefits for employees. PHS has decades of pharmacy and PBM related experience that they leverage to deliver these first of their kind solutions to the marketplace.

**Spacelabs Healthcare** – offers a unique, software driven approach to patient monitoring. Their system includes input devices, software for data analytics, support services and supplies and accessories.

**SUNRx** – is a healthcare technology company which provides qualified hospitals with software and services to help these hospitals manage and optimize their 340B program. 340B is a federally regulated program funded by the pharmaceutical industry to expand access to affordable medications, provide financial benefits to the hospital and its uninsured.

**UNUM/Acadia Benefits** offers participating hospitals group discounts on the cost of insurance premiums for life and long-term disability insurance.

**VISTA Staffing Solutions** – recruits, credentials and places physicians from a broad range of specialties in temporary assignments for a few weeks or several months.



#### Chair

Steve Diaz, M.D., Chief Medical Officer, MaineGeneral Health

#### **Immediate Past Chair**

John Ronan, President, Northern Light Blue Hill Hospital and Northern Light Maine Coast Hospital

#### **Chair-Elect**

Mark Fourre, M.D., President, Pen Bay Medical Center and Waldo County General Hospital

#### **Treasurer**

Teresa Vieira, President, Northern Light Inland Hospital and Northern Light Sebasticook Valley Hospital

#### Secretary

Jeffrey Sanders, President, Maine Medical Center

#### **President**

Steven Michaud, Maine Hospital Association

#### At Large Members

Kris Doody, Chief Executive Officer, Cary Medical Center Chuck Hays, President & Chief Executive Officer, MaineGeneral Medical Center Nathan Howell, President, Southern Maine Health Care Steve Jorgensen, President, St. Mary's Regional Medical Center Crystal Landry, Chief Executive Officer, Penobscot Valley Hospital

#### **OMNE** —Nursing Leaders of Maine Representative

Peggy McRae, R.N., Associate V.P., Ambulatory Patient Care Services, Maine Medical Partners

### Ex-Officio Members Chair, Healthcare Finance Council

Mike Hendrix, Chief Financial Officer, St. Joseph Hospital

#### Chair, Behavioral Health Council

Scott Oxley, President, Northern Light Acadia Hospital

#### **Chair, Public Policy Council**

Lois Skillings, President, Mid Coast Hospital

#### **AHA Delegate**

Shawn Anderson, Chief Executive Officer, Houlton Regional Hospital

# 2020-2021

### **MHA Member Hospitals**

Bridgton Hospital, Bridgton

Calais Community Hospital, Calais

Cary Medical Center, Caribou

Central Maine Medical Center, Lewiston

Down East Community Hospital, Machias

Franklin Memorial Hospital, Farmington

Houlton Regional Hospital, Houlton

LincolnHealth, Damariscotta & Boothbay Harbor

MaineGeneral Medical Center, Augusta & Waterville

Maine Medical Center, Portland

Mid Coast Hospital, Brunswick

Millinocket Regional Hospital, Millinocket

Mount Desert Island Hospital, Bar Harbor

New England Rehabilitation Hospital of Portland

Northern Light Acadia Hospital, Bangor

Northern Light A.R. Gould Hospital, Presque Isle

Northern Light Blue Hill Hospital, Blue Hill

Northern Light C.A. Dean Hospital, Greenville

Northern Light Eastern Maine Medical Center, Bangor

Northern Light Inland Hospital, Waterville

Northern Light Maine Coast Hospital, Ellsworth

Northern Light Mayo Hospital, Dover-Foxcroft

Northern Light Mercy Hospital, Portland

Northern Light Sebasticook Valley Hospital, Pittsfield

Northern Maine Medical Center, Fort Kent

Pen Bay Medical Center, Rockport

Penobscot Valley Hospital, Lincoln

Redington-Fairview General Hospital, Skowhegan

Rumford Hospital, Rumford

St. Joseph Hospital, Bangor

St. Mary's Regional Medical Center, Lewiston

Southern Maine Health Care, Biddeford & Sanford

Spring Harbor Hospital, Westbrook

Stephens Memorial Hospital, Norway

Waldo County General Hospital, Belfast

York Hospital, York



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