

April 3, 2020

Rural Health Information during COVID-19

Dear Rural Stakeholders,



To continue to have consistent and efficient communication to provide rural health stakeholders with the information needed during this global pandemic, here are updates from the rural health programs at the Iowa Department of Public Health (IDPH).

As mentioned previously, for critical information relating to the novel coronavirus (COVID-19), we recommend that you regularly monitor information on the [Iowa Department of Public Health COVID-19 Page](#). In addition, discover the latest resources, maps and information about the coronavirus (COVID-19) on coronavirus.iowa.gov.

For additional resources and updates, see the following pages. Please reach out for technical assistance and for any questions you may have.

We are an ongoing resource for you.

Best,

Rural Health Programs

Iowa Department of Public Health

For questions, contact:

Samra Hiros, MPH

State Office of Rural Health

E-mail: Samra.Hiros@idph.iowa.gov.

Phone: (515) 423-7900



Time: 3:00 PM Central Time (4:00 p.m. ET)

Presenter: Dr. Jay Butler (Deputy Director for Infectious Diseases, CDC)

Opening Remarks: Eric Hargan (Deputy Secretary of the Department of Health and Human Services (HHS))

To submit questions in advance, please e-mail ruralhealth@cdc.gov with "Rural Health Update 4/8" in the subject line.

A recording of this event will be available on CDC's website within a week at:

www.cdc.gov/coronavirus/2019-ncov/php/index.html

IDPH Rural Health Program Updates:

PRIMECARRE Loan Repayment Program Provisions for the COVID-19 Emergency Frequently Asked Questions

PRIMECARRE recipients should submit all questions and requests to the Iowa Department of Public Health through the IowaGrants grants management system.

1. If a PRIMECARRE recipient already received payment but has not put the payment toward loans yet, can the payment be returned if the recipient is aware he/she will be laid off?

The contract dictates what should happen. When funds are received is not a determinant of service. The contract states when services will start for that commitment and the contract also states what funds for such services will be provided. Returning funds does not change contract commitments. The contracts have to change in order to change service commitments.

2. What if a PRIMECARRE recipient is not able to meet the minimum full-time or part-time work requirement?

If the participant is unable to meet the minimum clinical hour requirements for their full- or half-time contract due to reduced hours at their approved service site, the participant must use one of the options below to remain compliant. At the direction of the approved site, the participant may request the following through the duration of the COVID-19 national emergency:

- Approval of shifting regular clinical service to patients to be delivered via telehealth/telemedicine to accommodate infection control, social distancing, or other appropriate measure to assist in meeting recommended outbreak

reduction/control measures. PRIMECARRE recipients may provide virtual check-in services via telephone, audio/video, secure text messaging, email, or use of a patient portal.

- A temporary expansion of the maximum hours are allowed to provide patient care in an approved alternative setting. Maximum hours are increased to 40 hours (from 8) throughout the duration of the national emergency declaration.
- Approval to receive PRIMECARRE service credit for clinical care to patients impacted by COVID-19 at temporary locations.
- Use allotment of time away from practice site (35 workdays per service year)
- Approval to suspend your PRIMECARRE service obligation (up to one year). Requesting a suspension will allow you to remain compliant, while extending your obligation end date by a time frame equal to the approved suspension period.

3. What are the implications if a PRIMECARRE recipient is on furlough or is laid off temporarily?

Due to the current pandemic of COVID-19, the participant may request a suspension of their PRIMECARRE service obligation (up to one year), if:

- The participant is unable to meet minimum clinical hour requirements (per your service contract)
- The participant anticipates exceeding the allotted 7 weeks (35 workdays per service year) of leave.

Suspension of the service obligations will allow the participant to remain compliant, while extending their obligation end date by a timeframe equal to the approved suspension period.

If the recipient wishes to provide services in support of this public health emergency, they will be allowed to voluntarily, or on a temporary basis, provide care to patients impacted by COVID-19 at a temporary/emergency location. Emergency locations would require approval and a site Administrator/Point of Contact would be required to verify clinical service hour requirements are met.