

June 17, 2020

Jeffrey M. Zirger
Information Collection Review Office
Centers for Disease Control and Prevention
1600 Clifton Road NE, MS-D74
Atlanta, Georgia 30329

RE: CDC-2020-0038-0001: Proposed Data Collection for the National Healthcare Safety Network (NHSN) Patient Impact Module for Coronavirus (COVID-19) Surveillance in Healthcare Facilities 2020-08170, published in Vol. 85, No. 75 Federal Register 21443-4 on Friday, April 17, 2020.

Submitted electronically via www.regulations.gov

Dear Mr. Zirger:

UnityPoint Health (“UPH”) appreciates the opportunity to provide comments in response to the Centers for Disease Control and Prevention (CDC) proposed data collection. Through more than 32,000 employees, our relationships with more than 400 physician clinics, 21 regional and 19 community network hospitals and home health services throughout our 9 regions, UPH provides care throughout Iowa, western Illinois and southern Wisconsin. On an annual basis, UPH hospitals, clinics and home health provide a full range of coordinated care to patients and families through more than 6.2 million patient visits.

UnityPoint Health respectfully offers the following comments.

GENERAL COMMENTS

Metrics collected in NHSN will include:

- *Number of and proportion of hospitalized patients with suspected or confirmed COVID-19*
- *Number of and proportion of hospitalized patients with suspected or confirmed COVID-19 that are on mechanical ventilators*
- *Number of patients with suspected or confirmed COVID-19 who are in the emergency department (ED) or any overflow locations awaiting an inpatient bed*
- *Number of and proportion of inpatient COVID-19 patients with suspected or confirmed COVID-19 with onset 14 or more days after hospitalization (most likely healthcare-associated)*
- *Proportion of inpatient beds occupied by those who are suspected or confirmed with COVID-19 (or proportion of inpatients who are suspected or confirmed with COVID-19)*

CDC and health departments alike will use this surveillance data to prioritize the allocation of resources and response efforts.

Comment: UnityPoint Health is a strong proponent of using data to drive decisions and recognizes the importance of data collection to inform the overall real-time COVID-19 response efforts and possible resource allocation. At issue is that hospitals are being required and/or requested to submit similar COVID-19 utilization data via multiple reporting streams and at varying intervals, one of which is the National Healthcare Safety Network (NHSN) platform. For UnityPoint Health, our integrated health system spans three states, which means that we must comply with different state level requirements as well as differing standards between the CDC and the U.S. Department of Health and Human Services (HHS) – the latter uses the TeleTracking platform. As background, we have attached a crosswalk spreadsheet that details the varying reporting fields and definitions.¹ As further explanation of this duplicative reporting, we have also provided a brief timeline of reporting for our Iowa hospitals through May as an addendum to this letter. The American Hospital Association has stated that “all hospitals should report at least the six admissions and ICU data fields into TeleTracking, even if they are using another reporting mechanism (e.g., National Healthcare Safety Network, or state reporting) for daily reporting.” The time and effort required to multiple and duplicative reporting is overly burdensome in “normal” times, but is unacceptable during a pandemic.

UnityPoint Health urges the Administration to designate a single source for reporting so that hospitals can avoid duplicative reporting and remain focused on patient care. As a health system, ***UPH would prefer a centralized means to report so that one submission (recognizing each TIN) could be performed for multiple affiliated hospitals.*** While the NHSN COVID-19 module meets this criterion, it is not recognized universally by the Administration as the single source for COVID-19 reporting and potential resource allocation.

We are pleased to provide comments on this data collection proposal and **UnityPoint Health encourages the Administration to use the NHSN platform as a sole source for COVID-19 utilization data reporting.** To discuss our comments or for additional information, please contact Cathy Simmons, Government and External Affairs at cathy.simmons@unitypoint.org or 319-361-2336.

Sincerely,



Jordan Russell, MPA, CPHQ
Director of Quality, Clinical Excellence



Jamie Reinert, BSHCA, CMA (AAMA) LRT
Regulatory Analyst, Clinical Excellence



Cathy Simmons, JD, MPP
Executive Director, Regulatory Affairs

¹ Document entitled “NHSN extract crosswalk_20200116a” and prepared by the UnityPoint Health Clinical Analytics team.

APPENDIX II

List / History of COVID Reporting Requirements/Requests through May 2020

Iowa: On April 3, hospitals were required to provide daily utilization data related to patient tracking, hospital capacity, and resources (PPE). This requirement was put in place by a mandatory reporting order from Iowa Department of Public Health in response to the Governor's public health disaster emergency. This is submitted via an EMResource platform to the Iowa Hospital Association acting as an agent of the state. UPH developed an electronic interface for reporting hospital bed capacity for IDPH via the EMResource tool. State reporting may be recognized as meeting Federal #1 requirements, if hospitals have received a written release from the State and the State has received written certification from their FEMA Regional Administrator to take over Federal reporting responsibilities. Data fields are listed in the crosswalk attachment.

UnityPoint Health continues to daily report data to the State of Iowa. The State (for the Iowa Hospital Association reporting) has not received a written certification from FEMA.

Federal #1: On April 10th, the Vice President, on behalf of President Trump and the White House Coronavirus Task Force, requested that the nation's hospitals report certain daily utilization data on COVID-19 testing results, bed and ventilator capacity. Hospitals were provided a choice of 4 submission methods:

- Submit data to TeleTracking™ [<https://teletracking.protect.hhs.gov>]
- Complete the National Healthcare Safety Network (NHSN) module daily per the Center for Disease Control's (CDC's) instructions
- Authorize your health IT vendor or other third-party to share information directly with HHS
- Publish to the hospital or facility's website in a standardized format, such as schema.org

UnityPoint Health selected the NHSN module as this was recommended by the AHA and could be submitted centrally on behalf of multiple TINs. UPH continues to daily report data via the NHSN COVID-19 module for UPH senior affiliate hospitals. NHSN data fields are listed in the crosswalk attachment.

Federal #2: On April 22nd, HHS requested that all hospitals register in the TeleTracking portal to be eligible for "hotspot" funding. Registration and data upload was extended through mid-day on April 25. Registration included one-time reporting of:

- Total number of Intensive Care Unit beds as of April 10, 2020
- Total number of admissions with a positive diagnosis for COVID-19 from January 1, 2020 to April 10, 2020

By April 25th, UnityPoint Health hospitals timely registered and submitted individually for each TIN.

Federal #3: On May 11th, HHS requested that all hospitals report more data in the TeleTracking portal to inform current and future distributions of Remdesivir. Data submission was to occur before 8PM ET on May 12th, with future weekly submissions to be required. The reporting for May 10 was to include:

- Number of currently hospitalized coronavirus patients
- Of those admissions, the number of currently hospitalized patients requiring placement in an intensive care unit

On May 12th, UnityPoint Health hospitals timely registered and submitted individually for each TIN.

NHSN COVID-19 Update: On May 15th, 2020, NHSN updated the hospital capacity module to add additional fields and update definitions to better align to those in the TeleTracking portal.

UnityPoint Health continues to daily report data via the NHSN COVID-19 module for UPH senior affiliate hospitals.