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Gov. Pritzker Addresses IHA Board of Trustees

Gov. JB Pritzker joined the IHA Board of Trustees last Friday at their annual retreat, where he underscored his commitment to lifting up healthcare workers and the hospital community. Saying that healthcare is the foundation of a thriving life, Gov. Pritzker stressed his belief that a strong healthcare system is essential to the future of Illinois and thanked Illinois' healthcare heroes for the lifesaving, healing work they do each and every day.

During the Governor's remarks, he condemned the increase in verbal and physical attacks against healthcare workers, stating he believed we should raise up those who work in the healthcare field. Gov. Pritzker also noted he supported efforts to ensure licenses and renewals get through the system more easily, and expressed his deep concern about the growing increase in behavioral, mental health and substance use disorders, and the impact on the hospital and healthcare community.

A.J. Wilhelmi, IHA President and CEO, thanked the Governor for his genuine partnership and working relationship, saying that working together IHA and the Pritzker Administration have advanced positive legislation that improves access to quality healthcare across the state.

The Board also had the opportunity to meet with Lizzy Whitehorn, who was recently appointed Director of the Dept. of Healthcare and Family Services beginning Jan. 1, 2024. The Board spoke with Whitehorn about a number of topical issues, including ongoing workforce challenges, growing the healthcare worker pipeline, payer concerns and licensure delays.

Hospital Price Transparency GitHub Launched by CMS

The Centers for Medicare & Medicaid Services (CMS) finalized new hospital price transparency requirements in the Calendar Year 2024 Hospital Outpatient Prospective Payment System and Ambulatory Surgical Center Payment System final rule.

Beginning July 1, 2024, hospitals must:

- Adopt a CMS template layout for the machine-readable file (MRF); and
- Encode their standard charge information using the CMS technical specifications and data dictionary.

To assist hospitals in meeting the requirements, CMS has launched the <u>Hospital Price Transparency GitHub</u>, a repository that will house the CMS MRF templates, technical instructions and technical support.

CMS is holding a Jan. 17, 2024 webinar from 1-2:30 p.m. CT to walk through the template. During the webinar, CMS will review the new requirements; present examples of how to encode MRF standard charge information in the CMS template layout; and demonstrate the GitHub repository. *Click here* to register for the webinar.

Funding Opportunity: Projects to Reduce HAIs, Antibiotic Resistance

The Agency for Healthcare Research and Quality (AHRQ) is funding innovative research proposals to prevent healthcare-

associated infections (HAIs) and combat antibiotic-resistant bacteria (CARB). <u>Click here</u> to view the grant application detail. Applications are due Jan. 25, 2024 for demonstration and dissemination projects (R18) and Feb. 5 for large research projects (R01).

HAI projects in both grant categories should demonstrate new ways to detect, prevent and reduce HAIs. CARB projects should address ways to promote appropriate antibiotic use, reduce the transmission of resistant bacteria or prevent HAIs. The funding is available to support research in all healthcare settings: long-term care, ambulatory care, acute care hospitals and those focusing on transitions between care settings. AHRQ encourages potential applicants to consider research in healthcare delivery areas with demonstrated health inequities and to address those equity issues in their proposed projects.

To support hospital members with their commitment to quality and safety efforts, IHA's Institute for Innovations in Care and Quality is advancing person-centered healthcare in Illinois through <u>evidence-based initiatives</u> that can measurably improve patient safety and strengthen quality healthcare including the prevention of HAIs. For questions about our programs and resources, please contact IHA.

IDPH Issues Alert About Recalled Cinnamon Applesauce Pouches

The Illinois Dept. of Public Health (IDPH) is <u>alerting</u> healthcare professionals and consumers to a Food and Drug Administration (FDA) recall of children's cinnamon applesauce pouches, which may contain elevated levels of lead. At least one confirmed case in Illinois, and a total of 34 nationwide, have been linked to the product, which was sold online and at chains like Schnucks and Dollar Tree under the brand names WanaBana, Weis and Schnucks.

Information on specific lot numbers and UPC codes can be found through the FDA <u>recall advisory</u>. The products may contain elevated levels of lead, which can be dangerous to persons of any age. Children are particularly susceptible to lead toxicity, though the Department said lead toxicity may not lead to immediate symptoms in children. IDPH said that parents who suspect their child may have consumed a contaminated product should consult the child's healthcare provider for further guidance, including whether a blood test for lead exposure may be needed.

COVID-19 Information

Since the end of the COVID-19 Public Health Emergency on May 11, IDPH is releasing updated COVID-19 data every other week. *Click here* for the most recent hospitalization update. IDPH will continue to report the weekly number of people with COVID-19 admitted to hospitals from emergency departments, deaths and vaccinations, as well through the dashboard of the Illinois Wastewater Surveillance System.

Briefly Noted

The Food and Drug Administration (FDA) recently <u>announced</u> two new initiatives to help ensure pulse oximetry is equitable and accurate for all patients. To that end, the FDA published a new <u>discussion paper</u> for public comment outlining one possible approach to improve the quality of premarket studies and associated methods used to evaluate the performance of pulse oximeters, taking into consideration patient skin pigmentation and patient-reported race and ethnicity. The agency also <u>announced</u> an upcoming advisory committee on Feb. 2, 2024, where pulse oximeters will be discussed.

New research highlighted by <u>The New York Times</u> indicates that delaying cord clamping at least two minutes after birth significantly improves in-hospital survival rates for premature infants. The article noted delayed cord clamping "is believed to help because it allows umbilical cord blood, which is rich in iron, stem cells and antibodies, to flow back to the baby." The American College of Obstetricians and Gynecologists already <u>recommends</u> delaying clamping by 30 to 60 seconds for both full-term and preterm newborns.

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