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with the process instructions.

Agency/Point of Contact: Assistant Commissioner Diane Rydrych, MDH

Title of Request: Fall 2022 Hospital Decompression funding

Date: 10/19/2022

Request Amount: \$ 2,400,000

Expenditure Time Period: 5/23/2022 to 2/15/2023 (no later than 2/15/2023)

Brief Summary of Request: (Summary must be complete on this page with supporting information attached)

MDH and DHS request authorization of \$2.4 million to fund select nursing homes, home care agencies, and counties for efforts to support hospital decompression, and to cover administrative costs at MDH and DHS for program oversight and support. MDH data show that level 1 and level 2 trauma hospitals are reporting that they are at the tightest capacity in the past year (averaging fewer than 2% of staffed beds available), so they will have extremely limited ability to accept additional patients if there is a COVID surge. Many hospitals also report inability to discharge patients who no longer need hospital-level care to other settings, due to staffing shortages in those settings. This data along with level 1 trauma hospitals reaching out to both DHS and MDH has led to an urgent need for funds to provide post-acute care for COVID-19 positive and other challenging patients who no longer require hospital-level care. MDH and DHS have worked with counties, community providers and hospitals to identify a strong solution, which would be implemented by MDH in close consultation with DHS.

This proposal would increase the number of available of beds in up to two nursing homes (goal of 30 beds) and either one or two home health agencies (goal of 50 bed equivalents) that are currently limited in their ability to admit new patients due to staff capacity, by funding the cost of temporary care delivery staff. The focus of this program will be to find placements for individuals currently in Level 1 or Level 2 trauma hospitals with complex clinical or behavioral health needs. Individual patient discharge, admission and treatment decisions will be governed by all current applicable laws and provider discretion. Individual patient discharge, admission and treatment decisions will be governed by all current applicable laws and provider discretion.

Funds will be used to support the costs of temporary care delivery staff, using vendors under master contract with the state, and for staff at MDH and DHS to oversee the program and to coordinate with the decompression sites, hospitals, and staffing vendors.

Margaret Kelly

Department Head Signature

Digitally signed by Margaret Kelly
Date: 2022.11.01 09:21:06 -05'00'

11/1/2022

Date