

Testimony

Texas Hospital Association
Texas House Committee on Public Health
March 10, 2020



[Introduction]

Good morning/afternoon, and thank you to Chair Thompson, Vice Chair Wray and committee members. It's an honor for me to be here on behalf of the more than 450 hospitals and health care systems that make up the Texas Hospital Association.

My name is Carrie Kroll, and I am Vice President of Advocacy, Quality and Public Health for THA. I'm testifying on behalf of Allen Harrison, president of Methodist Healthcare System in San Antonio, a co-owned partnership between Methodist Healthcare Ministries and HCA Healthcare, and one of the largest providers of health care in Central and South Texas.

[San Antonio Case]

Last month, HCA's facility, Methodist Hospital Texsan in San Antonio, treated Texas' first case of the 2019 novel coronavirus. The patient was an evacuee from China in quarantine at Lackland Air Force Base and was found to be symptomatic. The facility closely coordinated with EMS, the city, the CDC, STRAC (Southwest Regional Advisory Council) and many other key leaders prior to receiving the patient. It was an extremely orchestrated and methodical effort that required a tremendous amount of resources. The facility activated strict protocols prior to the patient's arrival, planned for security and other measures to protect the health of patients and staff. This was not your typical patient. The facility provided care in a negative pressure room and followed strict CDC guidelines for staff getting suited in and discarding protective gear. For every step, the hospital had a third individual observe and closely follow a checklist to verify all the steps were taken. Texsan used video surveillance to study and monitor the donning and doffing of personal protective equipment. The room has a specialized dedicated exhaust system that generates air flow going outside of the room, away from the hospital.

Hospital staff and leadership were phenomenal throughout this process, with employees stepping forward volunteering to be part of the care team in advance of the patient's arrival. Texsan unfortunately did have some patients cancel scheduled procedures during this time. The situation involved incredible amounts of work, communication and coordination on the front end to ensure the hospital was 100 percent ready and able to provide safe, excellent care.

The hospital exercised these scenarios, activated its incident command structure last week and continues to develop additional plans. Texsan reported a high level of engagement among leadership and staff, though we are concerned about surges in demand for testing, PPE shortages, staffing and other issues that I will speak to more specifically later in these remarks.

With regard to the care and treatment of this particular patient, the hospital was very transparent with staff and there was a level of calm and sense of pride among the staff for being called on to provide this care. It was a unique and special experience that frontline staff will never forget and provides a lens into the future of hospital care should the coronavirus case count dramatically increase and community spread

takes hold in Texas. HCA was ready, though it was a tremendous drain on resources even for this large, organized system.

[Hospitals on Board]

The mission of the Texas Hospital Association is to be a voice for excellent health care for all Texans. We are happy to be here today to be part of the larger state conversation about how Texas can fully combat coronavirus and protect the people of Texas. We understand Texas hospitals have an incredible responsibility here, and protecting our state is central to the mission of every hospital, no matter our size, location or type.

We know the situation is worsening, but no one can accurately predict how many more cases we will have, how many deaths we will experience, and how the public will respond. We know that this is impacting our health care system and many other foundations of our community – mass gatherings, our ability to go to work and school, our ability to collaborate, our sense of community and spirit. These are things many of us previously took for granted.

[Pressures on Hospitals, Including COVID-19]

Coronavirus has the potential to threaten our ability to keep Texans safe due to the extreme pressures it will place on health care. The situation for Texas hospitals is concerning, given we have had a significantly challenging flu season and an uncertain financial landscape is in front of us (due to recent federal actions related to supplemental payments and new proposed regulations). Coronavirus comes at a time when hospitals are already overstretched.

Today's focus is on coronavirus and our collective mission to keep Texas healthy. Coronavirus in Texas will get worse before it gets better. The good news is that most people who become infected with COVID-19 will not become seriously ill and will not need hospitalization. However, those with serious illness may need hospital care, including respiratory support. Most hospitals in the state do not have extra capacity and are not "holding beds" for COVID-19 patients. Hospitals continue to provide the planned care (cancer surgery, knee replacements and other procedures) as well as the urgent care (for people experiencing stroke, heart attacks or serious accidents), and the special care at the beginning and end of life.

Hospital space will need to be made quickly available in an emergency or with a surge of critically ill COVID-19 patients. But we have to seriously consider this important fact, if nothing else: Health care is a precious and finite resource that must be preserved for those who need it most. It must not be depleted. It cannot be squeezed to a point in which it cannot exist, or quality suffers.

Hospitals are part of your community. Our friends in rural Texas, sadly, have experienced the shuttering of many of their hospitals over the last decade. Hospitals save lives and take care of people. But it requires tremendous resources. It requires millions of dollars to provide excellent care. It requires fast turnaround times on lab results; it requires gloves, masks and gowns. It requires reimbursements for serving the uninsured and others.

[History of Being Prepared]

Hospitals are no strangers to being prepared for challenges. They deal with infectious diseases daily, isolating and treating patients in appropriate spaces by trained staff and using technologically advanced

equipment. Public health emergencies like the Ebola virus, pandemic H1N1 influenza and the Zika outbreak have given us tremendous insight into how best to prepare and protect Texans.

With regard to emergencies, last year Texas hospitals also responded heroically to several mass shootings. These are quite different from infectious disease outbreaks, but nonetheless required hospitals to act quickly to handle the rapid increases in patients coming through the door who needed immediate help. These experiences are incredibly difficult to endure but inform our readiness every day. Texas hospitals are always learning, never standing still.

[Specific Areas of Concern]

With coronavirus, we are in this together, but we can't do it without resources and clear answers. I urge you to be aware of the serious concerns hospitals are facing during this time and be aware of the complexities experienced by the health care system with regard to COVID-19. For example:

- How do we speed up turnaround times on testing, and when will we see widespread testing capabilities? Current delays are impacting patient care and have the potential to impact disease transmission.
- How can we protect nurses, doctors and other frontlines staff, and manage the fact that there are extremely limited supplies of masks or gowns?
- How do we ensure care for the uninsured?
- How do we ensure there are resources to follow up with patients we have been discharged and are isolating at home?
- How do we make space for new patients when we may experience difficulties discharging patients to long-term care facilities?
- How do we maintain our ability to respond to true emergencies when emergency departments are filled with people who want testing or treatment for mild respiratory symptoms?
- How do we stay fully staffed when health care workers contract COVID-19 and must remain quarantined?

We are working through these questions with each other and seeking guidance from every level of government and public health, but the nature of COVID-19 is that the situation is changing rapidly and there are many, many grey areas.

And, this is much larger than any one hospital. Special hospital care needs to be reserved for the most severe cases and the most serious symptoms. It is a precious resource that Texas cannot deplete. We will continue to refine our response as more information becomes available.

[Task Force/Asks]

To help continue that work, I'm pleased to announce that the Texas Hospital Association is launching a COVID-19 task force that, in coordination with the Texas Department of State Health Services, will ensure Texas hospitals have the resources they need to effectively manage the outbreak and put the health of our patients and health care workers first. Hospitals on the task force will work through the most pressing issues we are facing, identify needs, address nuances in hospital operations and streamline hospital care and procedures for COVID-19.

The Texas Hospital Association is focused on specific areas of urgent concern. Here is an overview:

1. First and foremost, we know there are additional people being transported to Texas from the Grand Princess cruise ship in California. Knowing this, we have a critical need for increased coordination between the federal and state government and Texas hospitals. We need to be able to forecast for these surges so we can best prepare for potentially dramatic increases in the number of acutely ill patients in Texas.
2. Fast turnaround times on testing and more testing capability.
3. Supply chains that are robust and flowing, for PPE and other medical supplies.
4. Flexibilities with regard to certain regulatory requirements
5. Financial support to cover extreme costs associated with COVID-19
6. Help with public education, so people know the emergency department is not the place to go unless it is an emergency, and masks are for the sick (not those who are well).

Texas handles outbreaks and other challenges with grace, leadership and strength. We protect and save lives every day, and we collaborate. Our hospitals have taken steps to help ensure they are ready, and we are honored to be on this team for Texas.

[Thank Yous/Partnership]

I'd like to close by thanking the tremendous engagement of our state and federal partners and the unsung heroes of our local health departments, frontlines staff and to the people of Texas who are washing their hands and staying on top of the information. We appreciate the public health leadership exhibited by the Texas Department of State Health Services.

On behalf of Texas hospitals, we deeply appreciate your interest in this issue. It is unfolding as one of the heaviest lifts of our time from a hospital perspective – and it deserves our undivided attention.