Special Meeting of the
School of Medicine Executive Committee
Tuesday, March 31, 2020
8:00 AM
Via Zoom Teleconference

Members present indicated in **bold**; guests present indicated below.

*100 (If a member or guest called in, only the person’s phone number appeared so their name will not appear here.)*

**Members:**
John J. Reilly, Jr., MD, Dean, School of Medicine and Chair;

Venu Akuthota, MD; Jamie Arruda, MD; **Leslie Berg, PhD**; Evalina Burger, MD; Julia Cooper, PhD; Stephen Daniels, MD, PhD; Frank deGruy, MD; **Mark Dell’Acqua, PhD**; Chancellor Don Elliman; Gerald Dodd, MD; Nicole Draper, MD; **C. Neill Epperson, MD**; Christopher Gessner; **Jena Hausmann**; Herman Jenkins, MD; Alma Juels, MD; Brian Kavanagh, MD, MPH; Michael Kilmer; **Kevin Lillehei, MD**; Wendy Macklin, PhD; Naresh Mandava, MD; **David Norris, MD**; Connie Savor Price, MD; David Raben, MD; **Angie Ribera, PhD**; Nanette Santoro, MD; Richard Schulick, MD, MBA; David Schwartz, MD; Ron Sokol, MD; Ann Thor, MD; Andrew Thorburn, DPhil; Vesna Todorovic, MD, PhD, MBA; Erik Wallace, MD; Ken Tyler, MD; **Richard Zane, MD**

**Guests:**
Gail Albertson, MD; Phil Asamoah, MD, MBA; Scott Arthur; Matt Baughman; Kate Beatty; Suzanne Brandenburg, MD; Corena Carmichael; Karen Chacko, MD; David Clute; Lauren Collins; Mark Couch; Genet D’Arcy, MD; Jeff Druck, MD; Joaquin Espinosa, PhD; Stephanie Farmer; Christina Finlayson, MD; Thomas Flaig, MD; Lauren Ford; Ami Giardina, DNP; Carolyn Goble; Michael Harris-Love, PT, MPT, DSc; Heather Hume; Steven Johnson, MD; Mike Jonen; David Kaplan; Allison Kempe, MD; Todd Kingdom, MD; Alison Lakin, PhD; Steven Lowenstein, MD, MPH; Becky McGowan; Sarah Miller; John Moore; Michael Narkewicz, MD; Abraham Nussbaum, MD; Kyle Osborn; Christie Osborne, MD; Steve Osswald; Elizabeth Pomfret, MD, PhD; Judy Regensteiner, PhD; Christie Reimer; John Repine, MD; Marian Rewers, MD, PhD; Suzann Ruedeman; Carol Rumack, MD; Kirstin Runa; Lisa Schilling, MD, MSPH; Liz Seelenfreund; Marina Shindell, DO; Melissa Sinclair; Brian T. Smith; Christopher Smith; Alexander Stein; Robert Stiner; Deborah Thornton; Cheryl Welch; Jenny Willits; Adel Youneszai, MD; Steve Zweck-Bronner

**General Updates-Dean John J. Reilly, Jr., MD:**

The campus leadership will be meeting on Tuesday March 31st at 4 p.m. to discuss President Trump’s recommendations of extending social distancing through April 30th, 2020, to determine if the campus will follow this recommendation as well.

Colorado Governor Jared Polis held a press conference yesterday, Monday March 30th, to discuss updates for the state of Colorado. The Governor said it is highly unlikely that children will be returning to school this academic year.
Mark Moss, MD, head of the Division Pulmonary Sciences and Critical Care Medicine, was the featured speaker at the Governor’s press conference yesterday and did an outstanding job of discussing the challenges of the pandemic.

According to data released from Johns Hopkins University, there are more than 800,000 COVID-19 cases worldwide; 164,000 cases in the United States (more than any other country in the world); and 2,627 cases in Colorado (as of March 28th). There are 51 deaths in Colorado and currently 414 patients hospitalized across the state.

Based on the modeling data from the University of Washington, cases will peak around April 17th.

**Clinical:**
Anne Fuhlbrigge, MD, Senior Associate Dean for Clinical Affairs, discussed the UCH and DHHA census data for COVID-19 patients.

Gail Albertson, MD, Vice President and Chief Operating Officer, CU Medicine, provided updates on billing and financial assistance programs currently being offered by CU Medicine. There are three types of patients under the financial assistant programs, which will be available the end of March through the end of May 2020:

1. CU Medicine will hold co-pays for any patients who are seen for a known or suspected diagnosis of COVID-19. Other commercial insurance companies also intend to waive co-pays/co-insurance for these patients. CU Medicine will hold these patient balances and re-assess at the end of May 2020.

2. The second discount is for patients who are seen during this period for non-COVID related diagnoses who continue to require care for other issues. CU Medicine will extend an additional 20% discount off the total amount due on patient balances, which will be identified as a financial crisis discount.

3. Patients who are currently on payment plans with CU Medicine will be allowed to miss up to three payments without any escalation of balance. CU Medicine will hold on all types of escalations and re-assess at the end of May 2020.

Brian Smith, Senior Associate Dean for Administration and Finance, and Executive Director of CU Medicine, discussed the Medicare accelerated or advanced payment request. There are a couple of opportunities for accelerated payments, assuming Medicare payments will be stable. Other consultant groups are also following this type of legislation. CU Medicine will look at making different recommendations based on the current Medicare mix and types of cases - i.e. elective vs. chronic conditions. More details to follow.

Brian also noted that the CU Medicine building on Montview Boulevard is considered a part of the Anschutz Medical Campus and is following suit with having 90% of their workforce (non-essential workers) working from home. A small group in the business office is making sure that payments are coming through. The CU Medicine leadership group is starting to evaluate how to bring staff back to the office to maintain social distancing practices and are also re-evaluating new hires.
Education Updates-Shanta Zimmer, MD, Senior Associate Dean for Education and Associate Dean for Diversity and Inclusion:

The CU School of Medicine is considering early graduation and medical licensing as an option for fourth year medical students and are asking for students to volunteer, although early graduation is not mandatory and students have the option to continue their coursework through the end of the year. The school is also checking with residency programs to determine if the programs will require students to graduate early. The school wants to ensure that students are prepared and have been transitioning to residency coursework. The students will be licensed in the state of Colorado.

The school is also considering the clinical environmental needs and dates for rising MS3 and MS4 students and are still hoping to bring students back to the clinical arena in late-May or early-June, 2020. Vice chairs of education will be planning over the next two months to consider telemedicine and other virtual components of clerkships. The school is asking all departments to hold acceptances for visiting medical students from other institutions, as they need to be sure that clinical space is safe for students and need to prioritize clinical space for CU students.

The school’s COVID-19 elective already has nearly 250 students enrolled in the program, including all 184 third year students, as well as students in the School of Public Health and graduate school programs. Students are also eager to do scholarly work and help with research.

A special thanks to Carol Rumack, MD, associate dean of Graduate Medical Education, and her team, who are investigating stage 2 versus stage 3 residency programs. The ACGME designates stage 3 as a time of crisis when education is sacrificed. Residents are being moved from one hospital to another in order to meet the needs of patient care and in turn, residents are not meeting the requirements of their residency programs. There is discussion around moving residents to stage 3 by the end of this week or early next week, depending on how COVID-19 case numbers pan out at other hospitals. There has also been discussion around moving residents from outpatient to inpatient hospitals and other telehealth opportunities.

Dr. Zimmer discussed resident moonlighting (residents who are working as an independent physician, outside the scope of their residency program). External moonlighting involves a resident working outside of a primary position and internal moonlighting involves a resident working in the same facility as their residency program. Residents who are currently doing external moonlighting can complete any commitments in the next two weeks. Residents who are currently doing internal moonlighting may continue but are asking that residents not sign up for more than two-week intervals.

It is unfair for residents to be in services when they are getting paid versus residents who are forced to move to services where they are not getting paid. A group of residents and other program directors are hoping to offset the financial burden for some of these residents, including those who are not allowed to take on additional moonlighting shifts, and developed a resident relief fund.
Research Updates-Peter Buttrick, MD, Senior Associate Dean for Academic Affairs:

Dr. Buttrick met with department chairs yesterday to discuss their current research environments.

A special thanks to Ron Sokol, MD, director of the Colorado Clinical and Translational Sciences Institute (CCTSI) and his team, who are completely focused on COVID-19 research.

The American Heart Association announced $2 million dollars in small grant awards, and each grant will be around $100,000.

Dr. Reilly noted that it is no surprise that the Anschutz Medical Campus and faculty practicing at Denver Health are responsible for treating the large number of COVID-19 patients and expects that trend to continue. The school has a role in serving others in the state and acknowledges the tremendous efforts and leadership displayed by everyone during this time of stress and crisis.

Questions:

Is there a way to donate to the resident relief fund? The Office of Advancement will provide information on how to donate to the fund.

Can you provide an update on the current status of COVID-19 testing? Dr. Reilly mentioned that there are two aspects for testing. The nucleic acid-based test looks at the active viral infection and is done by oral swabs. Thanks to the testing efforts at Children’s Hospital, University of Colorado Hospital, Denver Health, and the Colorado Center for Personalized Medicine (CCPM), there is an increase in the capacity to perform the tests and reduce the turn-around time from four-five days to less than twenty-four hours. Lower volume rapid testing capabilities will be set up in the next week or so as well. The second type of testing looks at individuals who are not currently ill but had previous exposure or infection. Ann Thor, PhD, Chair, Department of Pathology, and the Pathology lab are around three weeks away from being able to perform this type of testing. There is still no community-based testing. Testing is reserved for hospitalized patients or acutely ill patients and health care workers who have been exposed.

Can you define critical hires? There are certain situations when the School will continue to hire despite challenging times. Those who want to do hires within a department need to discuss with their department chair and DFA. Department chairs who want to do more critical hires need to discuss with Dr. Reilly and Brian Smith. Dr. Reilly emphasized that the School does not have a firm grasp on how profound the economic impact will be on practice revenues and clinical partners in hospital systems, because it is philanthropy and clinical activity that generates in money that is invested in the School.

Brian Smith noted that the School/CU Medicine are in constant communication with hospital partners, making sure it is clear what the revenue stream looks like.

Is there a plan for incentive pay-outs-whether to reduce them, delay them, or suspend them? Department chairs need to be able to provide unambiguous communication with their faculty on how this will economically impact their departments. Financial planning should reflect how the fourth quarter will be
drastically different than the first three quarters for this year. Department chairs who want to do mid-year incentive payouts will need to contact Dr. Reilly and Brian Smith.

Is there a policy for healthcare workers who are exposed to patients with confirmed COVID-19? If clinical providers were exposed to someone who tested positive, they need to self-quarantine for fourteen days. If that person develops symptoms during the quarantine period, then they can pursue testing. The nucleic acid testing is not recommended for those who are asymptomatic because it is not sensitive enough to pick up the virus.

Dr. Epperson and the Department of Psychiatry are offering support for students, residents, faculty and staff. A ‘COVID-19 Mental Health Toolkit for Students’ virtual event was held on Monday, March 30th. A free online support group for non-clinical faculty and staff will be held on Mondays from 12-1 p.m. and Thursdays from 9-10 a.m. A free online support group for students, faculty, residents and fellows on clinical rotation will be held on Mondays from 7-8 p.m. For additional information please contact Rachel Davis, MD, assistant professor, Department of Psychiatry, Rachel.Davis@CUAnschutz.edu.