

Message: RE: draft

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From Nickelson, Paula Date Tuesday, August 10, 2021 10:35:22 AM

To Tuttle, Alex

Cc

Subject RE: draft

- Healthcare staffing augmentation resources for all Missouri-licensed or CMS-certified critical access, acute care and long-term acute care hospitals. State funding will be provided at a not to exceed cost for each hospital based upon firm, fixed rates for various hospital staff positions. Total available state funding for the healthcare staffing augmentation to hospitals is XXX. Additionally, hospitals may use SLS at the firm, fixed rates established in the state contract to contract separately with SLS for additional healthcare staffing needs. Hospitals are tiered according to the number of licensed or CMS-certified beds as follows:
 - Tier 1: 0-100 licensed or CMS-certified beds – Hospital is eligible for \$100,000 not to exceed cost
 - Tier 2: 101-200 licensed or CMS-certified beds – Hospital is eligible for \$200,000 not to exceed cost
 - Tier 3: 201-300 licensed or CMS-certified beds – Hospital is eligible for \$300,000 not to exceed cost
 - Tier 4: 301-400 licensed or CMS-certified beds – Hospital is eligible for \$400,000 not to exceed cost
 - Tier 5: 401+ licensed or CMS-certified beds – Hospital is eligible for \$500,000 not to exceed cost
- Hospitals are currently using healthcare staffing agencies at very high hourly rates and for large numbers of staff. Most hospitals anecdotally report using multiple staffing agencies at any one time. As well, anecdotally, the rates in the proposed SLS contract are at or below the rates most hospitals report paying currently.
- SLS has provided reports of successfully filling large healthcare staffing requests to other states, most recently to California for 200 staff (mostly ICU nurses which are purportedly the most difficult to access) the weekend of August 6-8 and two state references (Texas and California) have validated their experience that SLS is able to fill staffing requests when other staffing agencies are unable to do so in the same time period.
- Thus, DHSS believes that encouraging use of this emergency procurement contract with SLS for healthcare staffing will be a successful encounter for the hospitals with SLS and they will use their own resources to continue accessing staff through this source. SLS indicates their 'bench is deep' and have hundreds of healthcare staff who work exclusively with them, thus have every confidence can fulfill Missouri hospitals' staffing needs.

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