

The Academy Weekly

News & Information for LTC Providers



The Academy of Senior Health Sciences, Inc.

www.seniorhealthsciences.org

Week of 01 March 2020

The CDC recently updated their guidance for determining if a person should be under investigation (PUI) and given a COVID-19 test. ([Click here to view guidance.](#)) Because the testing has become more available, the criteria for evaluation of Persons Under Investigation (PUI) were expanded to a wider group of symptomatic patients. **Per CDC guidelines, healthcare providers should *immediately* notify their [local](#) or [state](#) health department in the event of a PUI for COVID-19. If you have a resident that is exhibiting symptoms of COVID-19 (e.g. fever and/or symptoms of acute respiratory illness) and there is transmission of COVID-19 in the community or the person has been potentially exposed to COVID-19 in the last 14 days, follow isolation and disease prevention protocol and *immediately* contact the attending physician and local or state health department. [Click here for CDC COVID-19 website with more information on the CDC guidelines.](#) [Click here for CDC website for information specific to LTC facilities.](#)**

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Ohio News

Cabinet members meet with LTC providers about COVID-19

Members of the Governor's cabinet, including the directors of Medicaid, Health, and Aging, met with long-term care provider associations on Friday. The meeting was to address issues and concerns regarding COVID-19. Two primary concerns were raised at the meeting: personal protective equipment (PPE) and staffing. The concerns over PPE focused on the need to have enough PPE available to protect staff and follow the CDC guidelines and CMS requirements. ODH Dir. Acton noted the CDC recommendations on conserving PPE and understood the conundrum providers faced. ([Click here to view the CDC recommendations.](#)) ODH does have stockpiles of PPE, but said that those would only be released under extreme circumstances. It was also noted that N95 masks that are beyond their recommended shelf life may still be used if necessary and that some of the masks have been tested for efficacy and passed. ([Click here to view masks that have passed.](#)) The meeting also provided little insight on how to handle staffing issues. It was agreed that should an outbreak occur in a LTC facility, following the CDC guidelines of self-quarantining those potentially exposed would create staffing problems. No clear answer was given on how a provider was to respond, only that they would have to do the best they can to follow their emergency preparedness plan and work with their local health department. Another issue discussed at the meeting was the relationship between the hospital system and a LTC facility. Some, if not all, hospital systems have a plan in place to isolate cases of COVID-19. The question is if individuals in a hospital should return to a SNF after COVID-19 or if a SNF would function as an isolation location if a hospital system is overwhelmed by cases. Dir. Acton noted that it would be a local level decision and encouraged providers to discuss these questions with their local health department and hospital systems. [The Department of Health has established a hotline for COVID-19 - 833-4ASK ODH - in addition to their dedicated website.](#) ([Back to top.](#))

EP meeting addresses COVID-19, top deficiencies

The Emergency Preparedness (EP) workgroup met last week for its quarterly meeting. The meeting began with a discussion about COVID-19 and what providers are doing in preparation of a potential outbreak. Many providers have reviewed their infection control and prevention policies and performed staff training. There were some concerns over PPE. ODH encouraged providers to respond to their weekly survey on PPE supplies. Other items discussed at the meeting:

- Providers must have a plan if the building temperature leaves the 71 to 81 degrees range. The plan can include a refuge area; however, if the facility cares for a person with special needs, such as a vent resident, then the refuge area would be expected to meet the same requirements as the room (back-up generator for outlets, etc...).
- Surveyors are noticing that some of the EP plans are generic and not facility specific. One example is an EP plan that referenced a second floor, yet the facility did not have a second floor. The EP plan need to address the needs and resources of the facility.
- ODH noted that providers should not be sited based on the CDC recommendations or tool kit for Legionella's. Staff need to be aware of the facility's legionella prevention practices.
- There is still a discrepancy between how a fire is to be announced between LSC and EP regulations. LSC needs to be coded and EP requires plain language. Some providers are combining the two to account for this, such as "Code Red - Fire."
- There is still concern that local EMAs do not have sufficient resources for the local collaboration requirement of EP. ODH said they are considering doing a "state level" table top demonstration to create consistency.
- Providers will be asked to show evidence that staff have been trained on EP.
- Top four LSC citations to date: Testing, EP plan not being updated annually, 1135 waiver, and staff training.

If you have any issues or concerns you would like discussed at the next quarterly meeting, [please contact The Academy. \(Back to top.\)](#)

COVID-19 comes to Ohio

The Governor's Office confirmed Monday afternoon that there were three cases of COVID-19 in Ohio. The cases are in Cuyahoga County and can be tracked back to a conference in Washington D.C. and a Nile cruise. The Governor has declared a state of emergency that mostly makes it easier for the state to purchase supplies. It is evident that the virus is spreading and more positive tests in Ohio are expected. [\(Back to top.\)](#)

National News

CDC updates who should be tested for COVID-19

The Centers for Disease Control and Prevention (CDC) continues to closely monitor and respond to the COVID-19 outbreak caused by the novel coronavirus, SARS-CoV-2. This CDC Health Alert Network (HAN) Update highlights guidance and recommendations for evaluating and identifying patients who should be tested for COVID-19 that were shared on March 4, 2020, on the CDC COVID-19 website at <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>. It supersedes the guidance and recommendations provided in CDC's HAN 428 distributed on February 28, 2020. ([Back to top.](#))

CMS issues FAQ on COVID-19

From CMS: "On March 6, CMS issued [frequently asked questions and answers \(FAQs\)](#) for health care providers regarding Medicare payment for laboratory tests and other services related to the 2019-Novel Coronavirus (COVID-19). The agency is receiving questions from providers and created this document to be transparent and share answers to some of the most common questions.

Included in the FAQs is:

- Guidance on how to bill and receive payment for testing patients at risk of COVID-19.
- Details of Medicare's payment policies for laboratory and diagnostic services, drugs, and vaccines under Medicare Part B, ambulance services, and other medical services delivered by physicians, hospitals, and facilities accepting government resources.
- Information on billing for telehealth or in-home provider services. Since 2019, the Trump Administration has expanded flexibilities for CMS to pay providers for virtual check-ins and other digital communications with patients, which will make it easier for sick patients to stay home and lower the risk of spreading the infection.

This FAQ, and earlier CMS actions in response to the COVID-19 virus are part of the ongoing White House Task Force efforts. To keep up with the important work CMS is doing in response to COVID-19, visit the [Current Emergencies](#) website.

Below is an updated list of CMS' actions to date:

- [March 5](#): Issued a second Healthcare Common Procedure Coding System (HCPCS) code for certain COVID-19 laboratory tests, in addition to three fact sheets about coverage and benefits for medical services related to COVID-19 for CMS programs
- [March 4](#): Issued a call to action to health care providers nationwide and offered important guidance to help State Survey Agencies and Accrediting Organizations prioritize their inspections of healthcare
- [February 13](#): Issued a new HCPCS code for providers and laboratories to test patients for COVID-19
- [February 6](#): Gave CLIA-certified laboratories information about how they can test for SARS-CoV-2
- [February 6](#): Issued a memo to help the nation's health care facilities take critical steps to prepare for COVID-19"

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CMS MLN Connects

News

- [DMEPOS Suppliers: HCPCS Codes Affected by Further Consolidated Appropriations Act](#)
- [Medicare Promoting Interoperability Program: CAH Reconsideration Forms due March 6](#)
- [Medicare Promoting Interoperability Program: Submit Proposals for New Measures by July 1](#)
- [PEPPERS for Short-term Acute Care Hospitals](#)
- [2018 Geographic Variation Public Use File](#)
- [Help Your Patients Make Informed Food Choices](#)

Compliance

- [Ambulance Fee Schedule and Medicare Transports](#)

Claims, Pricers & Codes

- [Average Sales Price Files: April 2020](#)

Events

- [Ground Ambulance Organizations: Data Collection for Public Safety-Based Organizations Call — March 12](#)
- [Open Payments: Your Role in Health Care Transparency Call — March 19](#)
- [Anesthesia Modifiers: Comparative Billing Report Webinar — March 19](#)
- [Ground Ambulance Organizations: Data Collection for Medicare Providers Call — April 2](#)
- [LTCH and IRF Quality Reporting Programs: SPADEs In-Depth Training Event — June 9-10](#)

MLN Matters® Articles

- [Standard Elements for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies \(DMEPOS\) Order, and Master List of DMEPOS Items Potentially Subject to a Face-to-Face Encounter and Written Orders Prior to Delivery and, or Prior Authorization Requirements](#)
- [Remittance Advice Remark Code \(RARC\), Claims Adjustment Reason Code \(CARC\), Medicare Remit Easy Print \(MREP\) and PC Print Update](#)
- [Quarterly Update for the Temporary Gap Period of the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies \(DMEPOS\) Competitive Bidding Program \(CBP\) - April 2020](#)
- [International Classification of Diseases, 10th Revision \(ICD-10\) and Other Coding Revisions to National Coverage Determination \(NCDs\) -- July 2020 Update](#)

Publications

- [Administrative Simplification: Claim Status Basics](#)
- [Hospice Quality Reporting Program: Timeliness Compliance Threshold for HIS Submissions](#)
- [Guide to Reducing Chronic Kidney Disease Disparities in the Primary Care Setting](#)

Multimedia

- [Ambulance Services Call: Audio Recording and Transcript](#)

[View this edition as a PDF \(PDF\)](#)

[View this edition on the web.](#)

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ODDS AND ENDS

AGE, ODH reinforce message of infection control

The Ohio Department of Aging, in partner with ODH, sent out the following message: "

As part of the State of Ohio's ongoing efforts to prevent the spread of the novel coronavirus disease 2019 (COVID-19) within long-term care facilities, the Ohio Department of Aging (ODA) and the Ohio Department of Health (ODH) are encouraging facilities to exercise recommendations to prevent the spread of germs as provided by the Centers for Disease Control and Prevention (CDC).

While there have been no confirmed COVID-19 cases in Ohio, "we must be prepared for this possibility and take steps to prevent the spread of the disease, including in long-term care facilities," said a letter sent this week to facility administrators.

"Exercising good hand-washing, cough etiquette, and other preventive measures can significantly reduce the risk of contracting any respiratory illness," said ODH Director Amy Acton, MD, MPH. "COVID-19 symptoms, which generally appear two to 14 days after exposure, include fever, cough, and difficulty breathing. Most people who become sick do not require hospitalization, but older adults, people with chronic health conditions, and people with compromised immune systems are more likely to require more advanced care."

"Being mindful of these precautions can protect older Ohioans and our most vulnerable residents from COVID-19," added ODA Director Ursel J. McElroy.

CDC's guidance recommends posting signs inside long-term care facilities providing instruction on preventing the spread of germs by hand-washing, exercising cough etiquette, and other

NOTABLE DATES OR EVENTS

[IPRO QI Collaborative](#)
Sign-up closes April 8

OANAC/ASHS Spring
Conference
May 15

[CGS: myCGS ATC](#)
June 11, 2020

[Click here to view CGS
Part A training events](#)

[Click here to view CGS
Part B training events](#)

facility-specific actions in order to prevent the introduction of viruses in a facility and between facilities. ODH and ODA are offering resources and assistance to facilities to address this issue, including:

- CDC guidance for long term care facilities:
<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html>.
- CDC online “Nursing Home Infection Preventionist Training”:
<https://www.cdc.gov/longtermcare/training.html>.
- Education materials available on the ODH COVID-19 website: www.coronavirus.ohio.gov.

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