Information for LTC Providers

# The Academy Weekly

News & Information for LTC Providers

The Academy of Senior Health Sciences, Inc. www.seniorhealthsciences.org

# Week of 21 March 2021

### **Ohio News**

Reminder: Amended Director's order for visitation and testing released ODM halts NF cost report validations HB120 - "Compassionate Care Visits" passes House

### **National News**

Congress considers more transparency for NH sales CDC updated IPC NH guidance; other updates CMS MLN Connects

## **Ohio** News

#### Reminder: Amended Director's orders for visitation and testing released

Ohio Department of Health Director Stephanie McCloud has signed the following orders:

- <u>Director's Amended Order to Permit Access to Ohio's Nursing Homes, with</u> <u>Exceptions</u>
- <u>Director's Amended Order to Permit Access to Ohio's Residential Care Facilities</u>, with Exceptions
- <u>Director's Amended Order for the Testing of the Residents and Staff of all</u> <u>Residential Care Facilities</u>
- Director's Amended Order for the Testing of the Residents and Staff of all Nursing
  <u>Homes</u>

General visitation requirements for nursing homes and assisted living facilities remain the same, including the requirement that visitors schedule appointments in advance, are screened at the door, and wear masks. Changes to the orders include:

- Ohio is requiring that visitation be permitted whenever safety protocols can be met. Previously, visitation was permitted, not required.
- Vaccinated residents may have physical touch with their visitor while wearing a mask. Previously, touch was discouraged.
- Visits may occur in a resident's private room, as opposed to the previous requirement of a separate visitation area.
- 30 minutes should serve as the minimum amount of time for a visit. Previously, 30 minutes was the maximum time to visit.

The order also expands the circumstances in which compassionate care visits should be granted.

In addition, the order updates nursing home and assisted living testing requirements to require the facilities to test vaccinated staff once per week and unvaccinated staff twice per week. The previous order made no distinction between vaccinated or unvaccinated staff. (Back to top.)

#### **ODM halts NF cost report validations**

After careful consideration, ODM has determined pausing the NF cost report validation work for two months is in the best interest of the NFs. ODM will provide advance notice when this work is to resume. ODM will be reaching out to all providers selected for the review to ensure they are aware of this decision. (Back to top.)

#### HB 120 - "Compassionate Care Visits" passes House

As noted in last week's Weekly, H.B 120 Compassionate Care Visits was passed by the House Families, Aging, and Long-Term Care Committee. The bill generally requires a longterm care facility to permit compassionate caregivers to enter the facility to provide inperson visitation to facility residents during the COVID-19 state of emergency. Compassionate caregivers must comply with the facility's visitor policy required by the bill. When a compassionate caregiver is visiting a patient at a facility governed by the United States Centers for Medicare and Medicaid (CMS), the caregiver must also comply with all regulations and guidance issued by CMS. The bill mirrors compassionate care situations described in the Director's order on visitation and CMS QSO memos and has similar requirements for visitation policies (screening, logging, etc..). The provisions of the bill expire at the end of the public health emergency. The House passed the bill last week 88-2, sending it over to the Senate for their consideration. (Back to top.)





## National News

#### Congress considers more transparency for NH sales

Recent congressional hearings have put the spotlight on nursing homes, and not in a good way. The testimony has focused on private equity acquisitions of nursing homes. These purchases appear to have increased in the last several years. Simply put, nursing homes are considered an investment to generate a profit. As some on capital hill noted, this is not necessarily a bad thing, until the profits become the objective at the expense of the residents. Related third party contracts and rental agreements or management fees are just a few of the methods that can be used to increase the profit margin while staffing or quality decline. Some studies have shown that nursing homes owned by private equity firms have worse outcomes for residents, including during the current pandemic. In light of this, there have been calls from congress to shed more light on the issue, such as more information that would allow regulators to follow the money. It is unclear as of now what action, if any, congress will take. However, this is another example of how COVID-19 has shaken the long-term care industry in a way that will be felt for many years. (Back to top.)

#### CDC updated ICP NH guidance; other updates

The CDC updated the Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes today. The update does the following:

- Two prior guidance documents, "Responding to COVID-19 in Nursing Homes" and "Performing Facility-wide SARS-CoV-2 Testing in Nursing Homes" were merged with this guidance.
- The criteria for health department notification was updated to be consistent with Council of State and Territorial Epidemiologist (CSTE) guidance for reporting.
- Information on the importance of vaccinating residents and healthcare personnel (HCP) was added along with links to vaccination resources.
- Visitation and physical distancing measures were updated.
- Added proper use and handling of personal protective equipment (PPE).
- Added universal PPE use to align with the <u>interim infection prevention and control</u> <u>guidance for HCP.</u>
- Added considerations for situations when it might be appropriate to keep the room door open for a resident with suspected or confirmed SARS-CoV-2 infection.

- A description was included about when it may be appropriate for a resident with a suspected SARS-CoV-2 infection to "shelter-in-place."
- Added management of residents who had close contact with someone with SARS-CoV-2 infection which includes a description of quarantine recommendations including resident placement, recommended PPE, and duration of quarantine.
- Added addressing circumstances when quarantine is recommended for residents who leave the facility.
- Added responding to a newly identified SARS-CoV-2-infected HCP or resident.
- Added addressing quarantine and work exclusion considerations for asymptomatic residents and HCP who are within 90 days of resolved infection.

Please click here to see the updated guidance document.

Other updates from the CDC:

**Personal Protective Equipment (PPE) Burn Rate Calculator - Version 2 now available** — The <u>Personal Protective Equipment (PPE) Burn Rate Calculator (Version 2)</u> has more options for users to enter and view PPE data. Version 2 has more capability to meet the needs of large companies and facilities with complex inventory needs.

*Updated* Ventilation in Buildings — CDC recommends a layered approach to reduce exposures to SARS-CoV-2, the virus that causes COVID-19. This approach includes using multiple mitigation strategies, including improvements to building ventilation, to reduce the spread of disease and lower the risk of exposure. This guidance has been updated to include the following:

- Simplified language in the overall list of tools to improve ventilation.
- Added three new Frequently Asked Questions (FAQs) on the usefulness of carbon dioxide monitors to inform ventilation decisions, the useful of temperature and relative humidity to control the spread of COVID-19, and the use of fans indoors.
- Expanded the FAQ on emerging technologies to include more products available on the market.
- Added additional information with simple calculations to the FAQ on portable HEPA air cleaners to help consumers choose appropriate units for their spaces.

To learn more, please visit: Ventilation in Buildings

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#### **CMS MLN Connects**

<u>News</u>

- <u>Medicare Shared Savings Program: Application Deadlines for January 1, 2022,</u> <u>Start Date</u>
- <u>Repetitive, Scheduled Non-Emergent Ambulance Transport: Documentation</u>
  <u>Requirements</u>
- <u>PT During COVID-19 & Response to Texas Storm</u>

#### Compliance

<u>Non-Physician Outpatient Services Provided Before or During Inpatient Stays: Bill</u>
 <u>Correctly</u>

#### Claims, Pricers, & Codes

• <u>Home Health Payment Corrections</u>

#### MLN Matters® Articles

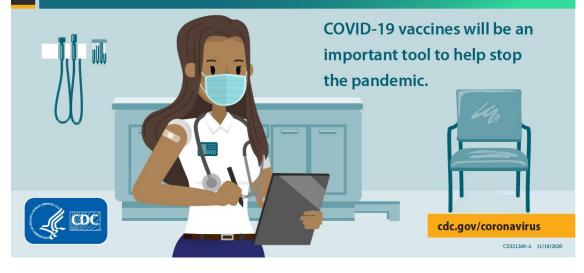
- <u>Common Working File (CWF) Edits for Medicare Telehealth Services and Manual</u>
  <u>Update</u>
- <u>Correction to Period Sequence Edits on Home Health Claims</u>
- Implementation of Changes in the End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) and Payment for Dialysis Furnished for Acute Kidney Injury (AKI) in ESRD Facilities for Calendar Year (CY) 2021
- <u>Updated Billing Requirements for Home Infusion Therapy (HIT) Services on or</u> <u>After January 1, 2021</u>
- <u>Update to Rural Health Clinic (RHC) Payment Limits</u>

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## CORONAVIRUS DISEASE 2019 (COVID-19)



#### ODDS AND ENDS

#### COVID-19 vaccine checklist for consumers

The Ohio Public Health Association and the Ohio Department of Health (ODH) have developed a COVID-19 Vaccine Checklist for consumers covering pre-vaccination planning, getting vaccinated, what to expect after vaccination, and some reminders. The checklist is posted on ODH's coronavirus website at <u>https://coronavirus.ohio.gov/static/vaccine/covid-19-vaccine-checklist.pdf</u>. We ask that you share this resource with your members/licensees as you deem appropriate. NOTABLE DATES OR EVENTS

ODM Cost Reports Due 30 April 2021

<u>Click here for QIO training</u> <u>series.</u>

Click here for CMS NH COVID-19 Training Modules

<u>Click here to view CGS</u> <u>Part A training events</u>

<u>Click here to view CGS</u> <u>Part B training events</u>

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