

The Academy Weekly

News & Information for LTC Providers



The Academy of Senior Health Sciences, Inc.

www.seniorhealthsciences.org

Week of 30 August 2020

The Academy Weekly is early because of Labor Day. Please remind staff and colleagues to follow CDC guidelines that reduce the infection rate and transmission of COVID even while not at work. (Wear a face covering in public, physical distancing, avoiding crowds, wash hands frequently, etc...)

Have a safe and enjoyable holiday!

Ohio News

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State works to address CMS testing mandate

The Ohio Departments of Medicaid and Aging met with long-term care stakeholders this week, including The Academy, to discuss the recent QSO memo that outlines the CMS testing requirements for nursing homes. ([See separate story below.](#)) The current state supported mandate requires nursing home staff to undergo PCR testing every two weeks and report the results back to CCURT via an online survey. The CMS testing requirements are both more stringent (weekly or twice a week) and less stringent (monthly) depending on the positivity rate in the county. Those to be tested also vary between the programs, with CMS requiring more people. The CMS mandate along with the arrival of point of care (POC) rapid antigen testing equipment at nursing homes has state officials considering changes to the state supported mandate. Ideas of how the state could help that were discussed during the meeting include:

- Use only the CMS mandate as the testing requirements for nursing homes;
- Offer state supported testing once a month to help providers meet the minimum monthly requirement;
- Have the state procure supplies for the POC machines and distribute to facilities;
- Create a "lab clearing house" for providers to select from that has labs the state has vetted and provide estimated turnaround times;
- Help streamline the CLIA data reporting process.

The group also discussed the significant amount of resources the CMS mandate will use. This includes the expense of the testing and staff time to run the tests. Furthermore, the group discussed the implications of the 48 hour test result requirement. Given the difficulties some providers are having already procuring the POC test kits and the frequency of testing required if there is a positive result or for a provider is located in a high positivity county, it is unlikely providers will be able to meet the 48 hour requirement. State officials believed providers should do the best they can to meet the requirement, document their efforts, and continue to perform testing although the frequency of the testing was not specified. Others on the call believed the memo was unclear as to the frequency of testing if the POC rapid tests are not available and the lab turnaround time is greater than 48 hours. One concern raised was if the turnaround time is 10 days and the facility is supposed to test every 72 hours, multiple tests would be taken before any results were returned if the CMS schedule was followed. This could be a waste of resources. We will provide any further information on this issue as it becomes available.

We are hoping state officials decide quickly on some of these issues to avoid confusion. We

will update you once we learn more. ([Back to top.](#))

Sponsor our Fall Conference Nov 11, 12 and 13!

The 2020 ASHS/OANAC Fall Conference and Annual Meeting is scheduled for November 11, 12 and 13 and we want you to be a part of it! We have great sponsorship opportunities available that are sure to get your brand noticed before and during the virtual conference. Besides piggy-backing off our marketing of the conference to over 1,200 valid email addresses, your logo could be displayed throughout the meeting and even in the background! And we are willing to work with you on other options to promote your company. [Contact The Academy](#) to learn more or [secure your sponsorship online today by clicking here!](#) ([Back to top.](#))

Immunity bill on Governor's desk

After a brief conference committee that extended the immunity period to September 30, 2021, both the House and Senate agreed to the Conference Committee report for H.B. 606. H.B. 606 creates civil immunity for health care services provided during the pandemic and any COVID exposure or infection related to persons (defined to include businesses, non-profits, schools, etc...). Facilities that provide rehabilitation services and long-term care are included. The bill is now waiting for the Governor's signature. [Please click here to download the As Enrolled version of the bill.](#)

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ODM issues overpayment report letters

Last week, ODM sent the following message to nursing homes that will receive overpayment reports:

"Dear Long-Term Care Provider:

ODM will begin releasing these reports the week of September 14, 2020. Please be aware of the following;

- Reports, letters and response forms will be sent via encrypted email from a Medicaid auditor;
- Encrypted emails must be opened within 14 days or the email will expire / no longer be accessible;
- Response forms are due to LTCAudits@medicaid.ohio.gov within 30 days;

- Supporting/dispute documentation is not required to be submitted with response form;
- Please carefully review the updated response forms;
- Organizations receiving reports for both fiscal years;
 - This will be reflected in the language contained in the email;
 - Separate emails will be sent on the same day for each fiscal year;
- Organizations receiving a report for one fiscal year only; this will be reflected in the language contained in the email;
- ODM is aware of recent challenges being addressed by all associated with delivering Medicaid-related services. Our aim is to complete this round of overpayment audits while acknowledging there will be new or unique circumstances to consider. To facilitate this, communications between our organizations will be essential.

Please feel free to contact JEFFREY.FUKUDA@medicaid.ohio.gov or Mark.Graves@medicaid.ohio.gov if you have questions or concerns."

ODM anticipates also sending notification to providers not receiving a report; details of that notice to be provided at a future time. ([Back to top.](#))

Latest testing schedule released; holiday impacts schedule

ODH provided the latest NH testing schedule via EDIC today: "Please find the schedule for state-supported biweekly testing of staff in nursing facilities for 9/7 through 9/13 here: <https://odh.ohio.gov/static/REGOPS/NH-Staff-Test-Schedule-9-7-to-9-13.xlsx>

PLEASE CHECK ALL DATES AND LAB ASSIGNMENTS CAREFULLY

- All facilities that collected specimens 14 days prior to 9/7 (Labor Day) were assigned to an alternate dates for specimen collection/swabbing and pick-up in this schedule.

These facilities are highlighted in blue on the schedule (column D)

- Please carefully review the schedule for your facility's dates and lab assignments.

- Facilities with new lab assignments have "yes" listed in column G

- Facilities that changed labs but already filled out some or all forms: Please email CCURT with the number of requisitions you have already completed so we can "move" them to the correct lab behind the scenes. Please include your facility name and license number (if licensed) in the email.

OPTION FOR RESCHEDULED FACILITIES – ONLY FOR FACILITIES HIGHLIGHTED IN BLUE ON THE SCHEDULE

- Instead of using the dates assigned in the schedule, you may swab all staff and take specimens to your assigned lab on Tuesday (9/8). This is not required, but is being offered as an option.

- If you plan to use this option, you must drop off specimens at your assigned lab by 5 PM on Tuesday 9/8, and all specimens must be collected within 24 hours prior to dropping at the lab.

- If your assigned lab is Mako, you can ship specimens back to Mako by Wednesday 9/9 at 8 AM (ideally you will ship out via FedEx on Tuesday instead of the following morning)

- If you plan to use this option, you MUST email the CCURT inbox by 9 AM on Monday, 9/7, to let us know that you will be using this option. Your email should include:

- Name of your facility

- ODH license number (if licensed)

- A statement verifying you will take your specimens to your assigned lab by 5 PM on 9/8 (or ship to Mako by 8 AM on 9/9) and you understand the ONG will not pick-up specimens from your facility later in the week.

- You can proceed with this option ONLY after receiving a reply from CCURT saying we have received your alternative plan. The response will include drop-off instructions."

In related news, the state has begun testing the batch upload process for the state lab requisition process. Currently, providers have to re-enter the information with each order. The batch process being tested will allow a provider to upload a spreadsheet with the information on it each round. ODM anticipates having this ready to launch within the next 10 days. ([Back to top.](#))



National News

CMS mandates testing as frequently as twice a week

CMS dropped another doozey on the nursing home industry last week when they released [QSO-20-38-NH](#) mandating at least monthly, and sometimes twice a week, testing for COVID. The memo went into effect immediately. The memo creates an F tag for providers that fail to provide documentation of testing and also if the facility does not have a designated infection preventionist. The frequency of testing is dependent upon symptoms, test results, and the positivity rate of the county the facility is located in. See Table 1:

Testing Summary below from the memo:

Table 1: Testing Summary

Testing Trigger	Staff	Residents
Symptomatic individual identified	Staff with signs and symptoms must be tested	Residents with signs and symptoms must be tested
Outbreak (Any new case arises in facility)	Test all staff that previously tested negative until no new cases are identified*	Test all residents that previously tested negative until no new cases are identified*
Routine testing	According to Table 2 below	Not recommended, unless the resident leaves the facility routinely.

*For outbreak testing, all staff and residents should be tested, and all staff and residents that tested negative should be retested every 3 days to 7 days until testing identifies no new cases of

The county positivity rate is dependent upon CLIA lab reported PCR results over the previous two week period. The data can be found on the [COVID-19 Nursing Home Data website](#) under the "COVID-19 Testing" section. Counties with less than 5% have to test at least monthly, between 5 and 10% have to test at least weekly, and above 10% have to test at least twice a week. The latter two "presumes availability" of on site testing or 48 hour off-site testing. According to the document, "If the 48-hour turn-around time cannot be met due to community testing supply shortages, limited access or inability of laboratories to process tests within 48 hours, the facility should have documentation of its efforts to obtain quick turnaround test results with the identified laboratory or laboratories and contact with the local and state health departments." Providers are supposed to check the data at least every other week and adjust the frequency of testing accordingly. The last data that The Academy reviewed had 11 "red" counties that require twice a week testing. These were rural counties each with a population less than 80,000. Concerns have been raised that the data do not accurately portray the current positivity rate in the county.

The memo also outlines who is to be tested by defining staff: "“Facility staff” includes employees, consultants, contractors, volunteers, and caregivers who provide care and services to residents on behalf of the facility, and students in the facility’s nurse aide training programs or from affiliated academic institutions."

Furthermore, since the facilities have CLIA waivers, they will be expected to report the tests per the CLIA requirements.

The memo contains much more detail. ***It is strongly recommended that you read the entire document.*** It is available for download from CMS at this website: <https://www.cms.gov/medicareprovider-enrollment-and->

[certificationsurveycertificationgeninfopolicy-and-memos-states-and/interim-final-rule-ifc-cms-3401-ifc-additional-policy-and-regulatory-revisions-response-covid-19](#)

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CMS monitoring use of QSEP training

From an ODH EDIC notice earlier this week: "Bulletin Title: CMS Infection Control Training for Nursing Homes

Bulletin Details: The infection control nursing home frontline and manager trainings from the Centers for Medicare and Medicaid is now available on the QSEP portal for providers. The link to this training is provided below. ***Your facilities [sic] staff completion of this training is being monitored by CMS.*** [Emphasis added.] The notification about the training, modules included and additional information can be found at <https://www.cms.gov/newsroom/press-releases/trump-administration-launches-national-training-program-strengthen-nursing-home-infection-control>

Training: <https://qsep.cms.gov/COVID-Training-Instructions.aspx>

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CDC info on antigen testing, updates NF landing page

As more of the point of care antigen testing machines land in nursing facilities, providers are reminded of the guidelines CDC has issued regarding their use:

"Considerations for Use of SARS-CoV-2 Antigen Testing in Nursing Homes - [This guidance](#) expands upon the recently published "[Interim Guidance for Rapid Antigen Test for SARS-CoV-2](#)" and should be used to guide the interpretation of antigen testing results in the following circumstances:

- Testing of symptomatic residents and healthcare personnel (HCP)
- Testing of asymptomatic residents and HCP in facilities as part of a COVID-19 outbreak response
- Testing of asymptomatic HCP in facilities without a COVID-19 outbreak as required by CMS regulation

CDC has also developed a [printable algorithm](#) that visually proceeds through the considerations for testing asymptomatic and symptomatic residents or HCP. It also provides clarification for when, and if, a confirmatory RT-PCR test is needed. Please note, this algorithm should be used as a guide, but clinical decisions may deviate from this guide if indicated.

Additionally, CDC's new landing page for [COVID-19 in Nursing Homes and Long-Term Care Facilities](#) compiles many of the key COVID-19 prevention and educational resources for nursing homes into a single place." ([Back to top.](#))

CMS MLN Connects

News

- [CMS Acts to Spur Innovation for America's Seniors](#)
- [Hospital Opioid Toolkit](#)
- [CMS Offers Comprehensive Support for California due to Wildfires](#)
- [PEPPERS for Short-term Acute Care Hospitals](#)
- [Office Visits by Nurse Practitioners: Comparative Billing Report](#)

Events

- [Dementia Care Call — September 22](#)

MLN Matters® Articles

- [2021 Annual Update for the Health Professional Shortage Area \(HPSA\) Bonus Payments](#)
- [Annual Clotting Factor Furnishing Fee Update 2021](#)
- [Claim Status Category and Claim Status Codes Update](#)
- [Implement Operating Rules - Phase III Electronic Remittance Advice \(ERA\) Electronic Funds Transfer \(EFT\): Committee on Operating Rules for Information Exchange \(CORE\) 360 Uniform Use of Claim Adjustment Reason Codes \(CARC\), Remittance Advice Remark Codes \(RARC\) and Claim Adjustment Group Code \(CAGC\) Rule - Update from Council for Affordable Quality Healthcare \(CAQH\) CORE](#)
- [Inpatient Psychiatric Facilities Prospective Payment System \(IPF PPS\) Updates for Fiscal Year \(FY\) 2021](#)
- [The Intravenous Immune Globulin \(IVIG\) Demonstration: Demonstration is ending on December 31, 2020](#)
- [October 2020 Integrated Outpatient Code Editor \(I/OCE\) Specifications Version 21.3](#)
- [October Quarterly Update for 2020 Durable Medical Equipment, Prosthetics, Orthotics and Supplies \(DMEPOS\) Fee Schedule](#)

- [Quarterly Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment — Revised](#)
- [Update to the International Classification of Diseases, Tenth Revision \(ICD-10\) Diagnosis Codes for Vaping Related Disorder and Diagnosis and Procedure Codes for the 2019 Novel Coronavirus \(COVID-19\) — Revised](#)

[Publications](#)

- [Medicare Preventive Services — Revised](#)
- [Medicare Preventive Services Poster — Revised](#)

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[View this edition online](#)

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Live Webinars November 11, 12 and 13.

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ODDS AND ENDS

Next QIO training and flu season guidance and resources

From IPRO: ["Telehealth During COVID-19 and Beyond: An Integrative Approach: September 8, 1 to 2 PM](#)

The first presentation will be from Brooke Yeager McSwain, MSc, RRT, Health Policy Lead at SPROUT, a national

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NOTABLE DATES OR EVENTS

IPRO Telehealth During COVID-19 Webinar
8 September 2020, 1 to 2 PM

CARES Act

telehealth research collaborative. Ms. Yeager will discuss recent telehealth policy expansion and the four telehealth categories.

Telehealth Applications for Post-Acute Residents Before and During a Pandemic

In addition, we'll hear from Jim Hummer, Vice President for Home and Community Based Services at Lorien Health Services, a nursing home in Maryland. Mr. Hummer will explain how telehealth:

- Improves communication and care coordination between post-acute and acute care providers
- Enables specialist and attending physician visits during a pandemic
- Improves the discharge process for patients into the community

COVID-19 and Influenza Season 2020-2021

The COVID-19 pandemic caused healthcare providers to change how they operate to continue providing essential services to patients. [Check out our blog](#) for guidance and resources.

NH providers reminded to initiate Resident Review near 30th day of hospital exemption

Per ODM Form 7000: "BY ACCEPTING THE ADMISSION, THE NURSING FACILITY CONFIRMS THAT THE HOSPITAL EXEMPTION CRITERIA AND ALL APPLICABLE REQUIREMENTS OF OHIO ADMINISTRATIVE CODE RULES ARE MET. THE NURSING FACILITY ACCEPTS THE ADMISSION ONLY AFTER RECEIPT AND REVIEW OF THIS NOTIFICATION FORM FOR 100% ACCURACY AND COMPLETION. THE NURSING FACILITY ACCEPTS RESPONSIBILITY FOR REQUESTING A RESIDENT REVIEW (IF REQUIRED) PRIOR TO THE 30TH DAY FOLLOWING ADMISSION FROM THE HOSPITAL."

REMINDER: Please submit your CDC report and CCURT NH testing survey results

Providers are reminded to submit your mandatory COVID-19 report at least once a week:

<https://www.cdc.gov/nhsn/ltc/covid19/index.html>

NH providers are also reminded to submit their COVID test

**PRF Phase 2
Distribution Deadline**
[13 September 2020](#)

**ASHS/OANAC Fall
Conference**
Via live webinars!
Nov 11, 12 and 13

Use Renewed ABN By
[1 January 2021](#)

**Ohio Provider Relief
Funds**
[Application information](#)

[Click here for QIO training series.](#)

[Click here for CMS NH COVID-19 Training Modules](#)

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

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

results to CCURT once all staff have been tested here:

<https://www.surveymonkey.com/r/MT2SCCX>

Short on PPE? Staff? Let your local EMA know.

ODM is reminding providers to contact their local EMA if they are running low on PPE or are having staffing concerns.

[Please click here for more information on how to contact your EMA for resources.](#)

[Please click here for the fillable request form.](#)



The advertisement features a photograph of a male doctor in a white lab coat with a stethoscope, sitting at a desk and looking at a laptop. To the right of the photo, the text reads: "Health care organizations and providers may be **eligible to receive up to 2% of patient revenue** due to increased expenses and lost revenues (COVID-related)." Below this text is a red banner with a white dollar sign icon and the text "Apply by August 28, 2020". At the bottom left of the ad is the URL "hhs.gov/providerrelief" and at the bottom right is the HRSA logo with the tagline "Health Resources & Services Administration".

Deadline extended to September 13.

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