



Nursing Home Weekly: Recap of LeadingAge Updates

March 12, 2021

More answers on nursing home visitation. A few of the frequently asked questions we have received in the past 24 hours answered below.

How do I know my resident vaccination rate? Recall that in the updated guidance released yesterday, CMS stated that indoor visitation was restricted for unvaccinated residents if the county positivity rate was greater than 10% and the total resident vaccination rate at the nursing home was less than 70%. At this time, CMS has left this up to the discretion of the nursing home how this will be tracked. One suggested way to do this is by reporting aggregate vaccination rates through NHSN. This reporting tool is optional and is different from the reporting that the pharmacy does when they administer the vaccine. Using this reporting tool does not require SAMS Level 3 access because you are reporting aggregate data, not patient-level data. Learn more [here](#). An added bonus of reporting through this module is that it will help CDC better track vaccination rates, which could translate into more freedoms sooner.

Visitation is restricted for an outbreak, but what if the index case is a staff member and the initial round of outbreak testing reveals that no residents test positive? Good question. We're following up with CMS on this one.

Where does this leave us with activities and communal dining? CMS has not relaxed requirements here yet. Residents must continue to wear masks and social distance in activities and must be social distanced for dining regardless of vaccination status. We have shared this question with CMS and will follow up on our call next week.

What do I do if my state has more restrictive visitation guidelines in place? Contact your state to see how you should proceed now that CMS has released the new guidance. If the state continues to require a greater level of restriction, notify your CMS regional office and they will share this with the CMS central office.

If everyone is now permitted visits, do I still need to supervise or enforce any limitations? CMS has not required supervision of visits. CMS does still recommend setting limits around visitation, such as limiting the number of visitors per resident or the total number of visitors in the building at once in order to ensure a safe environment and visitation experience. Visitors must also continue to adhere to core infection control principles such as masking, hand hygiene, and social distancing (though recall that fully vaccinated residents may now choose to engage in physical touch during a visit provided they remain masked and practice hand hygiene before and after contact).

Administration Will Not Defend New Public Charge Rule. On March 9, the Department of Homeland Security, on behalf of the U.S. government, announced it will no longer defend the Trump

Administration's 2019 public charge rule. LeadingAge had opposed the Trump Administration's public charge rule and welcomes this policy change. "The 2019 public charge rule was not in keeping with our nation's values. It penalized those who access health benefits and other government services available to them. Consistent with the President's vision, we will continue to implement reforms that improve our legal immigration system," Secretary of Homeland Security Alejandro N. Mayorkas said in a [March 9 statement](#).

President signs relief package. President Biden signed the \$1.9 trillion American Rescue Plan into law – one of the largest stimulus plans in American history. As reported last night, we posted two articles on the provisions of the bill that are especially important for LeadingAge members bill ([one general](#) and one specifically on [HCBS](#) and other provisions) and are gearing up to address how to help members access the funds in the bill that will go to state and local governments. Even with this relief package, aging services providers across the continuum need more help; we're looking ahead to the infrastructure bill and other measures currently under discussion.

American Rescue Plan State and Local Aid estimates: The Senate Democrats published an estimate of how much money states, counties, cities, towns and other jurisdictions are projected to get under the new COVID relief package. You can see those estimates on the excel file at the following link: <https://www.democrats.senate.gov/final-state-and-local-allocation-output-030821>. Your hometown is probably in this spreadsheet!

HHS Updates:

Vaccine Supply: The Pfizer and Moderna vaccine will increase to more than 20 million doses going out this week, more than doubling the number of vaccines going out to states. HHS is also procuring an additional 100 million doses of the Johnson & Johnson vaccine.

Progress on the Vaccination Program: Over the first 49 days in office, the Administration has improved the efficiency of the vaccination process with 75% of vaccines administered by states, sped up delivery of vaccine supply to ensure enough vaccine doses by May 31st, surged the number of vaccinators with 3,500 federal personnel assisting and expanded the scope for who can give shots, and increased the number of places to get vaccinated by creating and expanding community vaccination centers, retail pharmacy programs, federally run sites, and mobile sites.

Current Vaccination Statistics: As of today, more than 93 million Americans have received at least 1 dose; 60% of people over age 65 are vaccinated, and we are averaging 2 million shots per day.

Guidance for Vaccinated People: JAMA published a [scientific commentary](#) summarizing the new recommendations for vaccinated people. These recommendations represent the first step and not the final destination on this issue. CDC is still working on addressing outstanding scientific questions such as the risk of vaccinated people transmitting the vaccine to others and how long the vaccine protection lasts.

Nursing Home Visitation Guidance Updated. CMS released [QSO 20-39-NH](#) revising visitation guidance for nursing homes. Read our summary [here](#). The guidance allows nursing homes to expand visitation options in a safe and responsible manner, regardless of vaccination status of the resident or visitor. CMS has outlined certain scenarios that would limit visitation using community positivity rates and nursing home resident vaccine percentages. In the past few

weeks, LeadingAge has advocated for changes in visitation. In response, CMS stated they were collaborating with CDC on reviewing vaccination data and the decline of community positivity rates in order to revise visitation guidelines. We are pleased to see the updates to indoor and outdoor visitation but know nursing homes will need to emphasize the importance of infection control protocols and continued testing.

New CDC Guidance. Concurrent with the new guidance from CMS, CDC also updated [guidance for infection prevention and control recommendations in healthcare settings](#). We note that the guidance on visitation is consistent with CMS’s visitation guidance to nursing homes. Additionally, CDC has updated recommendations for work restrictions and quarantine following exposure for fully-vaccinated individuals. While CDC continues to recommend that nursing home residents quarantine for a full 14 days following exposure regardless of vaccination status, healthcare personnel are no longer required to be restricted from work. This is a change from the previous recommendation that healthcare personnel were exempt from work restrictions in cases of staffing shortages only. Additionally, CDC no longer recommends quarantine for fully vaccinated residents being admitted to nursing homes provided they have had no close contact with anyone with COVID-19 infection in the past 14 days.

Hearing on Racial Equity in Housing and Financial Services. The House Committee on Financial Services held a March 10 hearing on, “Justice for All: Achieving Racial Equity Through Fair Access to Housing and Financial Services.” The hearing, which referenced more than twenty bills related to fair lending, discriminatory appraisals, and credit building, touched on access to capital, credit and financial services, fair housing and homeownership, and diversity in executive ranks and boards. Read more about the hearing [here](#).

Preventing Medicare payment cuts. Legislation that will 1) extend the Medicare sequester moratorium through December 2021 and 2) Prevent mandatory cuts (known as “PAYGO” or pay as you go) due to budget rules triggered by the reconciliation process that would include a further 4% Medicare spending sequestration if not prevented is expected to be introduced by House leadership this week. A companion bill is expected imminently in the Senate. We are optimistic about this bill’s chances in the House but will need your help to influence the Senate – more to come on this.

New report from PHI offers comprehensive look at direct care workforce. PHI released “[Caring for the Future: The Power and Potential of America’s Direct Care Workforce](#).” PHI developed the report because 2020’s two large scale challenges – the pandemic and the need to address the consequences of gender and racial disparities on direct care workers – brought issues related to the LTC workforce to the fore. The report presents a statistical overview of the demographics, socio-economic characteristics and employment projections for this workforce; in addition, it describes the changing role of aging services workers in home care, residential care, and nursing homes. Did you know 24% of all direct care workers are over age 55? Or that 42% require some form of public assistance? The report goes on to present the case for LTC financing reform, beginning with the premise that Medicaid is not the answer. It presents ideas to elevate the role of direct care workers, emphasizing training, upskilling, career ladders, and integration with care teams. It provides details on the quality of LTC jobs. PHI offers eight key areas of recommendations, beginning with LTC financing reform. Many of these recommendations align with LeadingAge’s priorities and goals.

Pathway Health toolkits. We have 2 new toolkits for members from Pathway Health. The Activities Reopening toolkit addresses the reintroduction of group activities into the nursing home community while the Access to Adequate PPE for Staff toolkit covers PPE optimization strategies. These and our existing COVID-19 toolkits from Pathway Health are updated as guidance is updated and are available with member login [here](#).

More Updates from HHS:

Advancing Health Literacy to Enhance Equitable Community Responses to COVID-19: As part of President Biden’s National Strategy for the COVID-19 Response and Pandemic Preparedness, the Administration is announcing an effort to invest [\\$250 million to encourage COVID-19 safety and vaccination among underserved populations](#). The U.S. Department of Health and Human Services (HHS) Office of Minority Health (OMH) will offer the funding as health literacy grants to localities, who will partner with community-based organizations, to reach racial and ethnic minority, rural and other vulnerable populations. The new initiative – [Advancing Health Literacy to Enhance Equitable Community Responses to COVID-19](#) – is expected to fund approximately 30 projects in urban communities and 43 projects in rural communities for two years. Cities, counties, parishes or other similar subdivisions may apply for the funding.

Mask Mandates and Allowing On-Premises Restaurant Dining: CDC released an MMWR on [association of state-issued mask mandates and allowing on-premises restaurant dining with country-level COVID-19 cases and death growth rates](#) in the US. Mandating masks was associated with a decrease in daily COVID-19 case and death growth rates within 20 days of implementation. Allowing on-premises restaurant dining was associated with an increase in daily COVID-19 case growth rates 41–100 days after implementation and an increase in daily death growth rates 61–100 days after implementation. Mask mandates and restricting any on-premises dining at restaurants can help limit community transmission of COVID-19 and reduce case and death growth rates. These findings can inform public policies to reduce community spread of COVID-19.

LIVE EVENT: Diversity, Equity, and Inclusion—A Way Forward, Together. Committing to diversity, equity, and inclusion (DEI) and making inroads to impact change will be among your organization’s most important work in 2021. Are you asking the right questions and taking proper actions to address systemic inequalities and create inclusive communities? [Register now](#) to be part of a live event on March 23, hosted by Ayana King. Together, we’ll tackle tough topics, hear provider experiences, and make plans to effect positive change. *Participants will receive CE credits.*

Life Safety and Emergency Preparedness: Post-COVID Compliance. [Register for our April 8 Live Webinar](#) that’s focused on addressing preparedness challenges faced by nursing home and hospice providers as they prepare to return to pre-pandemic operations. We’ll cover different approaches to sunsetting 1135 waivers, staff education, survey citation trends, and more. [Sign up today](#). *Participants will receive CE credits.*