



Nursing Home Weekly: Recap of LeadingAge Updates

August 14, 2020

Strike Teams Recommendations – CMS hosted a call on August 13 to review recommendations and findings from strike teams. Recall that strike teams were deployed by CMS to 18 nursing homes across 6 states in July. Nursing homes were selected based on NHSN data indicating rises in cases. We have compiled the recommendations from this call and resources for assistance into [this tool](#).

NHSN Changes - NHSN has updated the data elements on testing in the COVID-19 module. The module now asks about ability to perform or obtain resources to perform testing, barriers to testing, turn-around times for test results, and whether you've completed facility-wide testing and why. NHSN is collecting this data to help better understand testing and barriers to testing. Be sure to review the [Table of Instructions](#)

PBJ Data Submissions - PBJ data submissions for April - June 2020 are due today. While PBJ data submissions were previously suspended under an 1135 waiver, this waiver was terminated effective June 25. Providers must submit PBJ data for Q2 by August 14. Providers are also encouraged to submit data for Q1, but Q1 data is not required.

[State Visitation Tracker](#) Updated - States with information added/ updated since last update are: Arkansas, Montana, New Mexico, New York, Oregon, South Carolina, Texas, Washington. All information is drawn from state government, DOH, HHS, and other agency sites.

[State Testing Tracker](#) Updated and Expanded - States that are known to require testing in SNF, AL or IL are highlighted in light pink. New information/ updates from state government sites have been added throughout. Updates will be ongoing.

HHS Provider Relief Fund Application Webinar Update: HHS hosted a webinar Thursday to review the application process for the Phase II- General Distribution application process. Phase II is HHS's new term for the current open Provider Relief Fund application process for Medicaid, CHIP, and dental providers, and certain Medicare providers who have yet to receive a payment or have not received a full 2% of patient service revenue payment through prior General Distributions (now referred to as Phase I). Of note, HHS has modified the application process to now only ask providers to "submit the information needed for us to get you a payment." As a result, several fields have been eliminated from the application including prior requests for FTE information, breakdowns of revenue by payer, number of facilities and beds, reporting of lost revenues and expenses due to COVID-19 and receipt of other funds such as PPP loans. They also stated that generally it takes 5-7 weeks from applications for providers to

receive funds. Medicare providers who may have applied previously for additional General Distributions dollars, will need to reapply through this new [portal](#) if they believe they have not received the full 2% of patient services revenue in payments. Providers have until 11:59 p.m. ET on August 28 to submit their Tax Identification Number(TIN) for validation (which is essentially the first step in the process toward receiving payments). The validation process can take about 10-15 days. The remaining steps can be completed once the TIN is validated.

Special Guest on Monday, August 17 -. David Grabowski, Professor of Health Care Policy at the Harvard Medical School, will join us for the [Coronavirus Online Policy Update](#) on Monday, August 17 at 3:30 PM ET. David is a frequent commenter on issues faced by nursing homes during the pandemic on CNN, MSNBC, Fox News, NPR, and others. In recent months, he testified before both the Senate Finance Committee and the House Ways and Means Committee on the COVID-19 nursing home crisis. He'll talk about his research and his observations on the impact of the crisis and his thoughts about how nursing homes can weather the coming months.