Nursing Home Weekly: Recap of LeadingAge Updates
September 25, 2020

**CMS on visitation** – On LeadingAge’s call with CMS this week, CMS reiterated that they are working with states on discrepancies between state visitation guidance/mandates and CMS’s latest visitation guidance released on September 17. They have nothing further to report at this time. We shared with them some of the tracking our team has done on where state guidance conflicts with CMS guidance to help expedite and sharply focus their efforts. We emphasized the difficult position our nursing home members are in, juggling conflicting guidance with very eager residents and families. CMS also clarified:

- **General indoor visits are restricted in the midst of an outbreak/outbreak testing. Indoor compassionate care visits may continue in the midst of an outbreak/outbreak testing.** Remember compassionate care visits should be exceptional, but are at the discretion of the nursing home.
- The most recently-released CMS data on county positivity rates were adjusted to account for low rates of testing. Approximately 350 counties with low rates of testing were placed in the lower testing frequency category than the positivity rate would otherwise indicate because the high positivity rate is determined to be a factor of low rates of testing rather than high rates of viral transmission. For example, a county may have a positivity rate of 23%, but be color-coded as yellow (medium). Nursing homes are to follow the color-code for testing frequency. **CMS states that nursing homes may also follow the color-code for visitation.** So in the above example, the nursing home may continue to offer indoor visitation (provided no other exclusionary criteria are met).
- The new guidance states that residents who are on transmission-based precautions should not have in-person visits (indoor or outdoor) except in compassionate care situations. We clarified that this includes residents who are on transmission-based precautions solely due to recent admission/readmission.

**Updates to NHSN reporting.** CDC will soon be updating the COVID-19 module on NHSN to include data elements on flu vaccines. **CMS confirmed that data elements on flu vaccines are not mandatory but are strongly encouraged.** It would require regulatory action to make this reporting mandatory. We expect to see these new data elements in the next week or so. Providers should check out the Tables of Instructions located on the NHSN site under “Data Collection Forms and Instructions” to be sure they are responding appropriately to these and other data elements. Providers can also find instructions for increasing their SAMS level access on this site under “Enhancing Data Security.”

**Medicare Accelerated and Advance Payment Program Update.** Administrator Verma announced that CMS had delayed the recoupment of the Medicare Accelerated and Advance Payment program loans pending Congressional action. The continuing resolution released today by House Democrats would extend both the period before repayment begins and the period before the balance must be repaid in full, reduces the recoupment percentage, and lowers the interest rate for payments. LeadingAge will continue to track this issue as negotiations around the CR continue this week.
Evan Shulman’s comments on LeadingAge Update Call. When Admiral Giroir was called to the White House at the last minute, he had to cancel his appearance on the LeadingAge Coronavirus Update Call (he’s rescheduled for Monday, October 5), Evan Shulman, Director of the CMS Division of Nursing Homes in the Quality, Safety, and Oversight Group, graciously agreed to step in. Evan reviewed the new guidance on nursing home visitation, pointing out that it replaces all previous guidance. He indicated that CMS will soon be ready to establish ways in which CMP funds can be used to facilitate visitation such as purchasing tents, hanging plexiglass, and so forth. He also clarified that if there is a positive result when there have been no cases in the past 14 days and this would trigger an outbreak, a facility could get a confirmatory test (if turnaround is within 48 hours) and wait to report the positive result until the confirmatory test results are in. This is still inconsistent with some state policies, and will perhaps require further clarification. Here’s a summary of the interview.

CDC call- There seem to be some data issues continuing with NHSN reporting. We strongly encourage nursing home providers to visit the NHSN site and read through the “Tables of Instructions” for the various data pathways in the COVID-19 module. It was also announced, on this call and on the national nursing homes call with CMS today, that NHSN will soon include new data elements on flu vaccine. These data elements will be reported through the COVID-19 module. CDC says that these elements are not required; however, recall that NHSN reporting is required (and regulated) by CMS. CMS has not commented on whether flu vaccine reporting on NHSN will be required. The Tables of Instructions will be updated soon to include the flu vaccine data elements. CDC also continues to encourage providers to upgrade their NHSN access from the Level 1 access, granted during the expedited enrollment, to the Level 3 access that requires the SAMS grid card. Info on upgrading your access is also available on the NHSN site.

HHS Posts Provider Relief Reporting Requirements with Very Limited Lost Revenues- Here is an article discussing the new Provider Relief Fund (PRF) reporting guidance that HHS posted to the PRF website on Saturday. The guidance applies to all distributions except the Nursing Home Infection Control Distribution, which is expected to have future, separate guidance. While the guidance offers more information to help providers begin planning how and what they will need to report, it places some unanticipated limits on the use of the PRF payments as they relate to lost revenues. Along with the guidance, HHS also noted that that reporting system, which was originally scheduled to open in early October, will now open in “early 2021”. It appears the first report is still due February 15, 2021 for funds used through the end of 2020.

On another note, we have heard that some nursing home members did not receive their portion of the $2.5 billion Nursing Home Infection Control Distribution payment even though they received the other targeted SNF Distribution in May. If you are in this situation, please connect with Nicole (NFallon@Leadingage.org) who will provide their information to HHS in the hopes we can ensure these payments get where they are supposed to go.

Also, a reminder that last week we posted articles on two other PRF topics: 1) New Key Deadlines for Phase 2 Provider Relief Fund Applications; 2) Details Announced on $2B in Nursing Home Infection Control Incentive Payments

Final report on discordant COVID test results. Here’s the final version of the report on the survey LeadingAge and AHCA did together on discordant test results (the topic we originally called “false positives.”)
**Reimagining Aging – Senator Casey’s report.** Senator Bob Casey (D-PA), ranking member of the Senate Special Committee on Aging, has released a report entitled ‘Reimagining Aging in America: A Blueprint to Create Health and Economic Security for Older Adults’. The report highlights the inequities of aging in America, how COVID-19 shined a spotlight on these inequities and outlines policy to address them. The policies address a wide range of issues including LTSS, Medicaid, alternative models of congregate care (e.g., small houses), workforce, economic security (age discrimination in employment; protecting Social Security) and other issues.

**Casey-Wyden report on Trump Administration response to COVID in nursing homes.** Senator Casey, along with his colleague Senator Ron Wyden (D-OR), ranking Member of the Finance Committee released another report today, “The Cost of Inaction: 11 Deaths an Hour: An Update on the Trump Administration’s Response to COVID-19 in Nursing Homes.” This report points to many of the issues LeadingAge advocates have been raising, including the growing death toll of nursing home residents and workers, PPE shortages, testing challenges, and workforce shortages. Today’s report follows on a [July report](#), “COVID-19 in Nursing Homes: How the Trump Administration Failed Residents and Workers;” many recommendations in this first report were incorporated into a [bill](#) introduced by Senators Casey and Sheldon Whitehouse (D-RI), the Nursing Home COVID-19 Protection and Prevention Act (SS. 3768).

**Making Care Work Pay: How A Living Wage Benefits Us All Zoom Panel** -LeadingAge held a special event to discuss the impact and implication of a new research report, *Making Care Work Pay: How Paying at Least a Living Wage to Direct Care Workers Could Benefit Care Recipients, Workers, and Communities*. President & CEO Katie Smith Sloan and Senior Vice President of Research Robyn Stone joined aging services thought leaders from across the country (including Harvard’s David Grabowski, UMass Professor and Center for American Progress’ Christian Weller); along with advocates from the Domestic Workers Alliance, Community Catalyst and PHI. Visit the [Making Care Work Pay webpage](#) for more information. Listen to the [recording](#) and view the [executive summary](#) and [infographic](#).

**Live Next Tuesday: Revised Regulation on COVID-19 Employee Leave**
The LeadingAge Knowledge Center continues to add new content to help you navigate the COVID-19 crisis. Join Rachael Jeanfreau and E. Fredrick Preis, Jr., partners at Breazeale, Sachse & Wilson, L.L.P., on September 29 at 2 p.m. ET for an overview of the revised regulation clarifying workers’ rights and employers’ responsibilities under the Families First Coronavirus Response Act paid leave provisions. [Register for this free, members-only event today!](#) Note: This is a live presentation and will not be recorded; no CEs are available.

**National Day of Action Wrap-Up** -On Wednesday, more than 5,500 messages were sent to Congress to demand real COVID-19 relief for aging services providers. Our [National Day of Action](#) delivered the most connections made in one day in LeadingAge’s advocacy history, and our presence on social media delivered more than 20,000 impressions using #Act4OlderAdults. Thank you for being fierce advocates.

**Summer Enrichment Program** -LeadingAge’s [Summer Enrichment Program](#) is designed to grow, strengthen, and diversify the pipeline of aging services leaders by recruiting undergraduate and graduate students who identify as Black, indigenous, and people of color for a 10-week, immersive experience in the field. LeadingAge is seeking provider organizations to host a paid student internship beginning in the summer of 2021. If your organization is interested in applying, complete the [Host Site application](#). Questions? Contact [Christy Kramer](#).
**New QuickCast: Resilience Strategy in Disruptive Times**

The LeadingAge Knowledge Center continues to add new content to help you navigate the COVID-19 crisis. In this week’s QuickCast, Olivia Mastery, JD, MPH, Collective Action Lab, outlines the five horizons of resiliency framework to help organizations explore opportunities for strategy and reform in the aging services provider community. Access this and other resources for free on the Learning Hub Coronavirus page.