



Nursing Home Weekly: Recap of LeadingAge Updates

January 21, 2022

HHS Therapeutics Locator for Providers. HHS has set up a [landing page](#) for providers to use to locate therapeutics. It shows the 7,507 locations in which therapeutic products are available, how much of each product is available at that location, and total available and allotted doses in the country.

Nursing Home Advisory Group: Please join us for the Nursing Home Advisory Group monthly call on Tuesday, January 25 at 2pm ET. With so much going on this month, we'll be spending more time focusing on available resources, policy updates, and member discussion. Call information is below. Please feel free to share with LeadingAge members. Any member wishing to be added to the mailing list can email Jodi Eyigor jevigor@leadingage.org.

To join the January call:

<https://us02web.zoom.us/j/83533962904?pwd=d2dBclRtYmxOVGxsK2VPenJGaXp6UT09>

Meeting ID: 835 3396 2904

Passcode: 916668

Nursing Home Staff Take Five for Free Online Learning Modules. The Agency for Healthcare Research and Quality (AHRQ) is now offering free, five-minute learning modules for frontline nursing home staff. These online videos address emotional, organizational, and clinical challenges that many nursing homes are facing during the COVID-19 pandemic. The first three videos feature strategies for overcoming anxiety, managing stress, and supporting team members. Users can view the interactive learning modules at their convenience on a smartphone, laptop, desktop, or tablet. Nursing home leaders will find tools to introduce the learning modules to staff and incorporate the videos into their existing facility training programs. The modules and guidance are part of AHRQ's ever-growing Nursing Home COVID-19 Resource Collection. Find the 5-Minute Learning Modules for Frontline Staff [here](#).

Save the Date! 2022 VBID Hospice Benefit Component – Office Hours. The Value-Based Insurance Design (VBID) Model Team will host an office hours session on Thursday February 3rd, 2022 on the Hospice Benefit Component to provide technical and operational support to interested stakeholders. During this office hour session, presenters will answer questions submitted in advance to the VBID Mailbox and also offer attendees an opportunity to ask additional questions. Please submit questions in advance by emailing the VBID Mailbox at VBID@cms.hhs.gov.

When:

Thursday, February 3, 2022

2:00 – 3:00 PM ET

How to Join:

Registration for the webinar is now open. Register now using the link [here](#).

Event number: [2457 421 1948](#)
Event password: officehours0203

Additional Resources: The slides, transcripts and audio recordings of these webinars will be posted to the VBID Model website at <https://innovation.cms.gov/innovation-models/vbid> for downloading a week after the webinar. For more information, visit the VBID overview page, the VBID hospice provider webpages or contact VBID@cms.hhs.gov.

February 2 Learning Hub Webinar “Reporting on Nursing Home Infection Control Provider Relief Funds,” 1:00 PM ET. Nursing Home Infection Control (NHIC) payments are a component of a PRF Targeted Distribution payment that were awarded to skilled nursing facilities and nursing homes nationwide to help combat the devastating effects of the pandemic. In addition to direct payments to these providers, some of them also received NHIC Quality Incentive Payment (QIP) Program payments, based on certain performance measures. However, unlike other PRF dollars, NHIC funds can only be used to pay for “infection control” expenses and not lost revenues. Reporting Period 2 is the first-time providers will be reporting on their NHIC payments. These reports must be submitted no later than March 31, 2022.

Hear from the team at the **Health Resources and Services Administration's Provider Relief Bureau**, to learn more about NHIC allowable expenses, how to use the PRF Reporting Portal to report on NHIC payments, and what resources are available to assist you with reporting in Reporting Period 2. This webinar will focus on the unique aspects of reporting on nursing home infection control funds received in 2020 and 2021. There will be time for questions and answers at the end with the HRSA staff. Members can register [here](#).

CMS Vaccine Mandate Now Applies in Texas . Texas has joined the rest of the country and is now subject to the CMS vaccine mandate. A federal judge dismissed the case brought by Texas challenging the CMS vaccine mandate. The federal court had previously issued a temporary injunction, but formally dismissed the case following last week’s Supreme Court decision allowed the CMS vaccine mandate to move forward.

OSHA Recordkeeping Requirements Still in Place for Healthcare Providers. As we all know, the U.S. Supreme Court has blocked OSHA from enforcing the OSHA Vaccination and Testing Emergency Temporary Standard (ETS) proposed in November 2021. In addition, the June 2021 OSHA Healthcare ETS expired on December 21, 2021, except for all of the non-recordkeeping provisions.

In a [statement](#), OSHA reiterated the recordkeeping provisions remain in place for *healthcare providers*. Under the recordkeeping and reporting provisions of the Healthcare ETS, health care employers with more than 10 employees must continue the following actions:

- Establish and maintain a log of COVID-19 cases among employees, regardless of whether or not they are connected to workplace exposures;
- Provide, by the end of the next business day upon request, the individual COVID-19 log entry of an employee to that employee and any person who has the written consent of the employee;
- Provide, by the end of the next business day upon request, a version of the COVID-19 log with personally identifiable information of employees removed to any employees or their personal or authorized representatives;
- Provide, by the end of the next business day, all COVID-19 records to OSHA;

- Report to OSHA any work-related COVID-19 fatality within eight hours of learning of the fatality; and
- Report to OSHA any work-related COVID-19 inpatient hospitalization within 24 hours of learning of the hospitalization.

Experience with National Guard in nursing homes in Minnesota. Jonathan Lips, Vice President of Legal and Regulatory Affairs for LeadingAge Minnesota, appeared on our LeadingAge Update Call today. Here's an [article](#) summarizing the interview. Callers from all over the country shared their experiences with National Guard troops deployed during the pandemic. Several were curious about how to advocate for a similar arrangement in their state. One interesting feature of the Minnesota program is that the troops deployed to nursing homes to serve as frontline aides were trained and certified as CNAs or TNAs.

Booster Requirements by State. We've updated our [Vaccine Mandates by State article](#) to include those states now requiring boosters and/or "up to date status" on vaccines. So far, there are six states that have implemented such mandates, or will soon: California, Connecticut, Massachusetts, New Jersey, New Mexico, and New York.

Public Health Emergency Renewed for Another 90 Days. As expected HHS Secretary Xavier Becerra announced Friday that the [Public Health Emergency \(PHE\) would be renewed](#) for another 90 days, until April 16; this is the eighth time it has been extended since the original declaration in the beginning of 2020. The new 90 day clock starts today. There was no doubt it would be renewed as the Biden Administration had promised earlier that it would not end the PHE without giving at least 60 days notice. As a reminder, 90 days is the maximum length of time the PHE can be extended at one time.

Vaccine Mandate Clarifications for Nursing Homes: We met with CMS and received clarifications from the Division of Nursing Homes on a few outstanding vaccine mandate questions, as below. Please recall that the vaccine mandate interim final rule is now in effect for providers in all states. There are 2 separate sets of compliance dates for this rule. Providers who were covered in the injunction that was overturned this past Friday must meet phase 1 requirements by February 14 and phase 2 by March 15. Previous compliance dates remain in effect for those states not covered by the previous injunction (phase 1 January 27 and phase 2 February 28).

- Tracking vaccination status of non-employee staff: CMS requires a process for tracking vaccination status of all staff, including non-employee contract staff. Two major considerations will be 1) Do you have a process? and 2) Does your process work? CMS has confirmed that this may mean you do not maintain copies of vaccination cards for contract staff on site, provided you have other ways of ensuring that these staff are vaccinated and that the required documentation can be provided upon request. One example of this might be an agreement with the contracting organization to provide only vaccinated staff, a list of staff and vaccination status, and an agreement to provide proof of vaccination in a timely manner upon request.
- Additional precautions for unvaccinated (including exempt) staff: Unvaccinated staff, including those who have requested and/or been approved for exemption, are required to follow additional precautions to mitigate transmission of COVID-19. CMS outlines several precautions in guidance, including reassignment of staff to telework, non-patient care roles, or caring only for those who are not unvaccinated or immunocompromised; practicing physical distancing and using an N95 or other approved respirator for source control at all times; and submitting to at least weekly testing. While other interventions may also be

- appropriate, CMS advises that these are not pick-list options and providers should attempt to layer strategies as appropriate. One example may be requiring all unvaccinated staff to physical distance, wear N95s, and submit to weekly testing while reassigning staff along the lines of CDC staffing capacity (outlined [here](#)) where contingency capacity allows for reassignment to non-patient care while crisis capacity allows for care of residents who are not unvaccinated or immunocompromised.
- At-home testing for staff: Despite developments from the Administration to expand access to at-home testing, CMS has confirmed that at-home testing is not appropriate for meeting requirements for routine testing of unvaccinated staff. Routine testing of unvaccinated staff should take place on site where healthcare personnel can observe testing, confirm the integrity of test results, and document results. An emergency contingency may include performing this observation over a virtual real-time video call; however, in-person, on-site testing is preferred.

CMS data on antipsychotic use in nursing homes. Last Friday, CMS released the data update on the [National Partnership to Improve Dementia Care in Nursing Homes](#). Through this Partnership, CMS and its partners seek new ways to implement practices that enhance the quality of life for people with dementia, protect them from substandard care and promote goal-directed, person centered care in nursing homes. The updates released on Friday focus on antipsychotic use throughout the country. The [data](#) show a decrease around the CMS Regions in the country and in certain states. CMS acknowledges that the last two years have had an effect on usage due to the COVID pandemic.

Now Available: 2021 LeadingAge Annual Meeting Session Playback Package. The October Annual Meeting agenda included sessions to help us strengthen the aging services workforce, advance equity and diversity in our sector, reset the narrative of aging services for the public, and much more. The [Session Playback Package](#) is now available to access and includes all keynotes, as well as over 25 education sessions.

2022 Tech Predictions for Aging Services and More CAST News. [Read the latest update](#) from the [LeadingAge Center for Aging Services Technologies](#) (CAST) director Majd Alwan. Learn how to start a support program at your organization, explore new year predictions, review results of telehealth studies, and more.

Next Week: Workshop On Shaping Public Perceptions of Our Sector. How do we introduce ourselves to the public? LeadingAge developed a research and communications initiative to find out. Opening Doors to Aging Services offers members a chance to learn how to deploy the best strategies to introduce aging services to the public. In this live, interactive online workshop, you'll learn to strengthen your social media, website, and media relations and get access to an array of communications templates to support your work. [Register for the live online workshop on January 27 now!](#) (And watch for future workshops on messaging, partnerships and events, and a public campaign over the next few months!).