



## Nursing Home Weekly: Recap of LeadingAge Updates

February 19, 2021

**LeadingAge Coronavirus Update Calls next week – Monday, Wednesday and Thursday at 3:30.** With the House back and working on the next big relief bill, possible movement in the Senate on the bill, and Xavier Becerra's hearing set in the Finance Committee, there's sure to be lots to talk about next week. We're hosting some experts you won't want to miss, too. On Monday, we will talk with Dr. Bill Mansbach who will talk about employee mental health and share ideas on how we can combat mental fatigue over the pandemic. Wednesday we will have returning expert, Dr. Monica Gandhi who will be on hand to talk about the new COVID-19 variants and what is ahead with the virus and vaccines, as well as herd immunity, and then on Thursday we discuss how COVID-19 has made a differential impact on older adults with dementia with Dr. Rebecca Edekmayer from the Alzheimer's Association. If you haven't registered for the calls, you can do so [here](#).

**Essential Caregiver Programs.** Following the interest generated on our call two weeks ago, we have been examining essential caregiver programs across the country. We have found several states that have introduced legislation but the most common way essential caregiver programs are being developed is through state Department of Health guidance. Nearly all programs place emphasis on the essential caregiver's role of providing support or assistance with ADLs, distinguishing them from a general visitor. That said, we found that essential caregiver programs are mostly consistent with CMS visitation guidance. Essential caregivers must schedule visits and nursing homes may enforce limits for safety. Essential caregivers are screened before entering and are expected to follow core infection control principles including masking and hand hygiene. The nursing home educates essential caregivers on infection control and essential caregivers are expected to limit movement within the nursing home and social distance from other residents and staff during their visits. Most programs restrict essential caregiver visits for residents on transmission-based precautions, but the details of these restrictions vary among the states. In addition to these restrictions, there are 2 other significant ways in which essential caregiver programs divert from CMS visitation guidance: slightly more than half of the programs allow essential caregiver visits when the nursing home is experiencing an outbreak and most allow essential caregiver visits without regard to county positivity rates. This information and more will be available in a paper forthcoming in the next few days.

**Update to TB Testing and COVID-19 vaccine.** We reported a few weeks ago on a [recommendation from CDC](#) that individuals must wait 4 weeks after the second COVID-19 vaccine dose to complete a tuberculin skin test (TST) or interferon release assay (IGRA) if the TST or IGRA cannot be placed prior to the vaccination. Knowing that most, if not all states, require TB testing for residents and staff, we were concerned about the impact of this recommendation on compliance. We have determined, and confirmed with CMS, the following:

CDC's recommendation for TB assessment/screening is a nationally-recognized standard that nursing homes must follow under F880. However, the recommendation to delay is also a CDC (nationally recognized) standard and therefore, the nursing home would not be cited under F880 for following the guidance on when to delay TST or IGRA.

States may have regulations in place that specifically state TB tests must be done upon hire, prior to beginning work, upon admission, etc. (rather than the more vague statement to follow nationally recognized standards). If this is the case, the state will need to address the CDC's recommendation to delay related to COVID-19 vaccination.

We recommend investigating your specific state requirement and following up at the state level for any changes that need to be made related to the CDC recommendation. Please note that individuals may receive the TST or IGRA *at the same time* as COVID vaccination.

**Emergency preparedness requirements (testing exemption due to actual emergency).** CMS updated emergency preparedness requirements in 2019 and released [guidance](#) in September 2020 reiterating that providers who activate their emergency plans in response to an actual natural or man-made emergency were exempt from completing their next regularly required full-scale community based or individual facility-based exercise. Remembering that outpatient providers (e.g. PACE, home health) are required to conduct one testing exercise per year and inpatient providers (inpatient hospice, nursing homes, ICF/IIDs) are required to conduct 2 testing exercises per year, with testing exercises for both provider types alternating between full-scale functional exercises and exercises of choice (mock drill, table-top exercise, workshop). If a provider activated the emergency plan in March 2020 due to the COVID-19 public health emergency, the provider is/was exempt from the next required full-scale functional exercise and would proceed with the exercise of choice on the regular schedule. As we approach the 1-year anniversary of the public health emergency declaration and enter year 2 of the PHE, we asked CMS: will providers who continue to operate under the emergency plan once again be exempt from the full-scale exercise? The answer is no, there will not be a second exemption for a continuous emergency. Here's an example:

A nursing home was planning to complete a full-scale functional exercise in June 2020.

The nursing home activated the emergency plan in April 2020 in response to COVID-19.

The nursing home was exempt from completing the full-scale functional exercise in 2020 and completed required exercise of choice in 2020.

Though the nursing home continues to operate under the emergency plan, the nursing home must complete the full-scale functional exercise in 2021 in addition to the required exercise of choice.

**LeadingAge Nursing Homes Monthly Roundtable Call.** Next **Tuesday, February 23<sup>rd</sup>**, we will be introducing a new call for nursing home members. The Nursing Homes Monthly Roundtable will take place the last Tuesday of every month at 2pm ET and will include policy updates, expert insights, and opportunities for members to ask questions and share best practices. **This month's call will feature Evan Shulman from CMS.** If you would like to be added to the mailing list for this call, contact Jodi ([jevigor@leadingage.org](mailto:jevigor@leadingage.org)).

**Opportunity for LTC nurses.** The Center to Advance Palliative Care (CAPC) is recruiting nurses who work in long-term care settings for a new peer learning and support project, the LTC Nurse Leaders Circle. It's open to nurses of any level who work in any long-term care setting with current work in or simply an interest in improving access to palliative care services for residents. They can either be employees of facilities, or employees of hospices, ISNPs, or other entity. There is a preference for those who work in settings with a significant number of minority residents. Participants of this Circle get access to CAPC's courses and resources (which can be used to obtain continuing education credits), as well as a chance to learn and share

ideas and challenges with their peers across the country. Anyone interested can register via this [link](#) and there is more information in [this flyer](#).

**Liz Fowler named to lead the CMS Center for Medicare and Medicaid Innovation.** The Biden administration today named Liz Fowler to lead the CMMI within CMS. CMMI was established in the ACA and is charged with testing new ideas in healthcare. Liz Fowler most recently served as an executive vice president at the Commonwealth Fund. Other prior experience both on Capitol Hill and in HHS, as well as in the pharmaceutical industry and for the health insurer Anthem, will serve well in the CMMI lead role.

**Transitioning from the Long Term Care Pharmacy Partnership to the Retail Pharmacy Program.** Dr. Ruth Link-Gelles from the CDC shared information about the sunsetting of one partnership and ramping up the next. Read a summary of the interview [here](#). [Here's](#) the link to the CDC Retail Pharmacy Program.

**How many people over 65 have received a COVID vaccine?** On today's Coronavirus Update Call Tricia Neuman with the Kaiser Family Foundation discussed [a recent report KFF issued](#). As with so much other information, because each state collects and reports differently, precise answers are hard to find. However, KFF shares what they have learned in this interview [summary](#).

**Connecting with HHS on Provider Relief:** We had a good conversation with the current career staff person at HHS in charge of PRF. We discussed the positive elements of our working relationship with the prior Administration on PRF. We emphasized the need to establish open communication with them to continue resolving issues and getting answers to questions. We also raised the issue of revisiting the reporting guidance and the need for much more clarity. We did hear that Phase 3 funding will continue to be sent out through the end of the month, possibly a little bit longer. At this point, it is the more complex applications for which HHS is completing its review and distributing funds. It also sounds like there are provisions in place to continue individual "casework" to resolve problems providers are experiencing and for public affairs.

**Provider Relief Fund Article on Incentives and Info on Reporting:** We posted the [article](#), that Nicole wrote analyzing the final two Nursing Home Infection Control incentive payments and it was also included in Need to Know today but wanted to include it here in case you would like to include in your newsletters as well. Also, on the topic of Provider Relief, there have been a few questions from members asking when the first reports will be due. There is no set due date for the first report but clearly we expect it to be in the next couple of months as the second report is due (as of right now) on July 31, 2021. For now, the [reporting portal](#) is open but only for providers to register. By registering, providers will be notified when the portal will begin accepting reports and the due date once it is set.

**LeadingAge 2021 Policy Priorities – LIVE!** We are excited to announce that our [2021 Policy Priorities](#) are now live and on our website. Thanks and kudos to all LeadingAge members who shared experiences, policy ideas, challenges, and "what keeps you up nights" to support the development of these priorities. Today we sent an email to all LeadingAge members highlighting our new priorities and encouraging them to learn about our key issues and to stay active in our 100 Days of Advocacy Campaign. We have also created a landing page for our 100 Days of Advocacy resources that can be [found here](#). Thank you to all of our state partners and our members for the feedback we received on our priorities through town halls and other discussions. Our priorities are bold and we look forward to working with you to implement them during the rest of this year and beyond.

**Jodi Eyigor recognized as a McKnights Woman of Distinction.** LeadingAge Director of Nursing Home Quality and Policy – Jodi Eyigor – was recognized today in the Rising Stars category, as a McKnights Woman of Distinction. Coincidentally, McKnights did a [profile](#) of her yesterday. Congratulations, Jodi for the recognition and for your service to the policy conversation and to LeadingAge members and the people they serve.

**Quick update from Capitol Hill.** The House has almost completed work on its relief bill. Very little was changed from the bills we summarized last week, although a few issues are still in play, notably the \$15 minimum wage issue. Members are home now for district work periods. When they return next week, the House Budget Committee will put the bills that were marked up in the committees last week and combine them into one bill. The goal is to have a full House vote next week so the bill can be sent to the Senate. The House committees worked closely with Senate leadership in developing their bills, so the majority party is hoping there will be unanimous support in the Senate. Because it doesn't appear the Senate will write its own draft, it's likely that there won't be changes from what we're seeing from the House. LeadingAge is still promoting this [Action Alert](#) to encourage members of the Senate to add funding for housing programs and Provider Relief. House leaders are planning additional time to vote again on the week of March 8, in case the Senate does make changes. It's not over until it's over.

#### **FROM HHS:**

**Staff Shortages:** This [staff shortage guidance](#) is for healthcare facilities that may be experiencing staffing shortages due to COVID-19. Maintaining appropriate staffing in healthcare facilities is essential to providing a safe work environment for healthcare personnel (HCP) and safe patient care. As the COVID-19 pandemic progresses, staffing shortages will likely occur due to HCP exposures, illness, or need to care for family members at home. Updates to this guidance include: As contingency strategies options to allow: Asymptomatic HCP who have had a [higher-risk exposure](#) to SARS-CoV-2 (the virus that causes COVID-19) but are not known to be infected to shorten their duration of work restriction as described in [Options to Reduce Quarantine for Contacts of Persons with SARS-CoV-2 Infection Using Symptom Monitoring and Diagnostic Testing](#); and Asymptomatic fully vaccinated HCP who have had a [higher-risk exposure](#) to SARS-CoV-2 but are not known to be infected to continue to work onsite throughout their 14-day post-exposure period.

**Ensuring the Safety of Vaccines.** CDC has updated their resource page with [information of the safety of the COVID-19 vaccine](#). On this page you can learn more about the approved vaccines and safety monitoring systems.

**Visitation at Intermediate Care Facilities:** CMS is issuing new guidance for [visitation in intermediate care facilities for individuals with intellectual disabilities \(ICF/IIDs\) and psychiatric residential treatment facilities \(PRTFs\)](#) during the COVID-19 PHE. The [guidance](#) provides ways an ICF/IID and PRTF can more safely facilitate in-person visitation and address the psychosocial needs of clients/residents. CMS encourages all ICF/IIDs and PRTFs to monitor the CDC website for information and resources and contact their health department when needed.

**NIH Experts Discuss SARS-CoV-2 Viral Variants:** The rise of several significant [variants of SARS-CoV-2](#), the virus that causes COVID-19, has attracted the attention of health and science experts worldwide. In an editorial published today in JAMA: The Journal of the American Medical Association, experts from the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health, outline how these variants have arisen, concerns about whether vaccines currently authorized for use will continue

to protect against new variants, and the need for a global approach to fighting SARS-CoV-2 as it spreads and acquires additional mutations.

**Humidity from Masks May Lessen Severity of COVID-19:** Masks help protect the people wearing them from getting or spreading SARS-CoV-2, the virus that causes COVID-19, but now researchers from the National Institutes of Health have added evidence for yet another potential benefit for wearers: [The humidity created inside the mask may help combat respiratory diseases such as COVID-19](#). The study, led by researchers in the NIH's National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), found that face masks substantially increase the humidity in the air that the mask-wearer breathes in. This higher level of humidity in inhaled air, the researchers suggest, could help explain why wearing masks has been linked to lower disease severity in people infected with SARS-CoV-2, because hydration of the respiratory tract is known to benefit the immune system. The study published in the [Biophysical Journal](#).

**What Has the Pandemic Taught Leaders in Aging Services?** In the last year, LeadingAge members have encountered a career's worth of challenges brought on by COVID-19. The difficulties have also spurred innovation and led to personal discoveries that will improve aging services for decades to come. In this [newly available recorded](#) Session, listen to your LeadingAge peers share how moments of crisis led to deepened trust with key stakeholders and strengthened leadership skills that will continue to benefit their organizations. [Free for LeadingAge members](#)—watch now! You can also find [related leadership content here](#).

**Dementia Care Interventions Report Webinar.** On February 23, 2021 from 2:00-3:00pm ET, join the National Academies of Sciences, Engineering, and Medicine (NAEM) for a webinar releasing a new report on care interventions for persons living with dementia and their care partners and caregivers. LeadingAge senior vice president of research, Robyn Stone, will be on the panel of experts discussing the report. [Register today](#).

**Strategic Consulting for Members.** Looking for a deeper level of direct support around your organization's care delivery in the new year? With our partners at ATI Advisory, a research and advisory services firm, we can work with you to transform the delivery of health care and aging services for older adults. ATI helps provider organizations like LeadingAge members to evaluate market opportunities and assess options for developing new partnerships, capabilities, and risk-arrangements. Learn more about [LeadingAge Consulting](#) and [working with ATI](#).

**Annual Meeting On-Demand Registration Available.** If you missed the Annual Meeting Virtual Experience live event, you're in luck! On-demand access is now available at a [discounted rate](#) now through April 30, 2021. On-demand registration includes education sessions, keynote presentations, access to Business Intelligence Zone (BIZ), and all Virtual Experience areas, including Sponsor Talks, EXHALE and other on-demand content.