Nursing Home Weekly: Recap of LeadingAge Updates
August 13, 2021

What's new with the Delta Variant (it changes daily) and what does the surge mean for aging services providers? Check out upcoming LeadingAge Coronavirus Update Calls to find out. All calls are at 3:30 PM ET. On Monday, August 16, we will welcome Dr. Megan Ranney, an emergency room physician and researcher who will share her thoughts on what is happening on the ground with the surge in new cases. She also is the founder of Get Us PPE and will share her thoughts on resources to help providers obtain PPE. On Wednesday, August 18, we will welcome back Dr. Ali Mokdad from the Institute of Health Metrics and Evaluation at the University of Washington. He will provide the latest updates on the trending data on COVID and take your questions on what we can expect in the fall. If you haven’t registered for the calls, you can do so here.

Third Doses / Changes to Weekly NHSN COVID-19 Vaccination Data Collection Forms. Following the August 13 ACIP recommendation for additional vaccine series for moderately and severely immunocompromised people, the CDC has announced new questions on vaccine doses will be added to the data collection forms. The main changes are: Question #2 remains the same, except it asks about the primary vaccination series; Added question #4 for facilities to report on the cumulative number of individuals eligible to receive an additional dose of COVID-19 vaccine. Added question #5 for facilities to report on the cumulative number of individuals who received an additional dose of COVID-19 vaccine (by manufacturer type). The CDC will be conducting training webinars in late August. Read an article about the August 13 ACIP recommendation here.

AARP Vaccination Dashboard. AARP released its updated Nursing Home COVID-19 Dashboard. The Dashboard uses publicly available NHSN data to provide snapshots every four weeks. Today’s update shows cases of COVID-19 continue to rise among nursing home residents and staff, by 50% and 60% respectively in the middle of July compared to the week before.

Continuing the infrastructure saga...The Senate passed the Concurrent Budget Resolution (S. Res. 14) in a middle of the night on a party-line vote (50-49). As we have been reporting, this tees up development of a $3.5T care infrastructure bill that is expected to pass under reconciliation, requiring only majority support in the Senate. Out of those trillions, LeadingAge is advocating for the full $400B for HCBS, approximately $55B for an FMAP increase for nursing homes, $7.5B for low income senior housing, and $1B for workforce development and support, along with expansion of Medicare to include dental, vision and hearing benefits, expanded access to affordable child care that will help support our workforce, among other provisions. The resolution directs House and Senate committees to develop legislation by September 15. The House is returning early from August “recess” to vote on the budget resolution and also begin work on concurrent legislation. We have developed a robust and substantial advocacy plan for the next month to make sure our voices are heard and the amounts needed for a strong LTSS system are not cut. Stay tuned, we will be calling on you to help! Read LeadingAge’s statement here. Read LeadingAge’s letter here.
CDC Stakeholder meeting. LeadingAge participated in a CDC Stakeholder meeting on Wednesday. CDC summarized the increase in COVID cases in nursing home residents and staff since June 27, stating that the number of nursing home reporting large outbreaks is also increasing. The urgent message to nursing homes and assisted living facilities is to wear a mask even if you are vaccinated, stay home if you feel ill, get tested if you have symptoms, get vaccinated and encourage vaccination. We were advised to ask provider members to continue to message staff, residents, families and community. CDC has begun the MOVIN project, a surveillance project monitoring outbreaks of vaccine break-through infections in nursing homes. The data collection is based on an outbreak in a nursing home with 3 or more resident cases in 14 days.

CDC reviewed that monoclonal antibody therapy treatment can be used for mild to moderate symptoms and help in the early stages of the disease if infused before the 10th day of symptoms. Finally, they reported that CDC is urging nursing homes to accurately report vaccine access in the NHSN - using the vaccine reporting module or the COVID supplies PPE pathway module. Although there is not a plan for a booster or third dose, CDC is trying to prepare and knowing the vaccine status of your organization could help for successful implementation. Nursing homes will see a new banner urging accurate reporting in NHSN.

New training available from CMS for SNF providers. The Centers for Medicare & Medicaid Services (CMS) is offering a web-based training course that provides an overview of the assessment and coding of K0200: Height and Weight and K0510: Nutritional Approaches. This 30-minute course is intended for providers in Skilled Nursing Facilities (SNFs) and is designed to be used on demand anywhere you can access a browser. The course includes interactive exercises to test your knowledge related to the assessment and coding of K0200 and K0510. Click here to access the training. If you have questions or need additional information regarding the logistics of this training session, please email the PAC Training mailbox at PACTraining@Econometricalnc.com.

Nursing Home legislation introduced in the Senate. Tuesday Sen. Wyden (D-OR), chair of the Senate Finance Committee, introduced the Nursing Home Improvement and Accountability Act of 2021”, responding to the various hearings on nursing homes and COVID held last year, as well as other issues. We are reviewing (two big provisions stand out – one restores the Obama Administration’s prohibition on pre-dispute arbitration agreements; the other provides an FMAP bump specifically to support staffing similar to the FMAP provisions in the care infrastructure bill that we support. This FMAP is specifically for nursing facilities and states are required to use the funds to increase payments for wages, retention and recruitment efforts, and improve quality of care by, for example, expanding the use of person-center models and incentives or payments for private rooms for Medicaid beneficiaries).

FROM HHS:

1. Understanding Variants: Viruses constantly change through mutation, and new variants of a virus are expected to occur. Sometimes new variants emerge and disappear. Other times, new variants persist. Multiple variants of COVID-19 have emerged in the United States. At this point, the original variant that caused the initial COVID-19 cases in January 2020 is no longer circulating as newer variants have increased. View CDC’s video on what you need to know about variants. See specific information on the Delta Variant.
2. **FDA Testing updates**: As of last week, *399 tests and sample collection devices are authorized by the FDA under emergency use authorizations (EUAs)*. These include 279 molecular tests and sample collection devices, 87 antibody and other immune response tests and 33 antigen tests. There are 53 molecular authorizations and one antibody authorization that can be used with home-collected samples. There is one molecular prescription at-home test, three antigen prescription at-home tests, six antigen over-the-counter (OTC) at-home tests and two molecular OTC at-home tests. The FDA has authorized 13 antigen tests and eight molecular tests for serial screening programs. The FDA has also authorized 596 revisions to EUA authorizations.

3. **FEMA COVID-19 Funeral Assistance Tops $968 Million**: FEMA has provided over *$968 million to more than 147,000 people to assist with COVID-19-related funeral costs* for deaths occurring on or after Jan. 20, 2020. The assistance comes from the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 and the American Rescue Plan Act of 2021. Eligibility determinations are not driven by state/location; instead, they are based on when the applicant submits all required documentation.

4. **Effectiveness of COVID-19 Vaccines in Preventing Hospitalization**: CDC released an *MMWR on the effectiveness of the COVID-19 vaccine in preventing hospitalizations among adults aged ≥65 years*. Clinical trials of COVID-19 vaccines currently authorized for emergency use in the United States (Pfizer-BioNTech, Moderna, and Janssen [Johnson & Johnson]) have shown high efficacy in preventing symptomatic (including moderate to severe) COVID-19. Among adults aged 65–74 years, effectiveness of full vaccination for preventing hospitalization was 96% for Pfizer-BioNTech, 96% for Moderna, and 84% for Janssen COVID-19 vaccines; among adults aged ≥75 years, effectiveness of full vaccination for preventing hospitalization was 91% for Pfizer-BioNTech, 96% for Moderna, and 85% for Janssen COVID-19 vaccines. Efforts to increase vaccination coverage are critical to reducing the risk for COVID-19–related hospitalization, particularly in older adults.

5. **Reduced Risk of Reinfection After COVID-19 Vaccination**: CDC released an *MMWR on the reduced risk of reinfection with SARS-CoV-2 after COVID-19 vaccination*. Reinfection with human coronaviruses, including SARS-CoV-2, the virus that causes COVID-19, has been documented. Currently, limited evidence concerning the protection afforded by vaccination against reinfection with SARS-CoV-2 is available. Among Kentucky residents infected with SARS-CoV-2 in 2020, vaccination status of those reinfected during May–June 2021 was compared with that of residents who were not reinfected. In this case-control study, being unvaccinated was associated with 2.34 times the odds of reinfection compared with being fully vaccinated. To reduce their likelihood for future infection, all eligible persons should be offered a COVID-19 vaccine, even those with previous SARS-CoV-2 infection. The CDC Newsroom issued a media statement on the study.

**CDC requesting vaccine access information.** CDC sent an email blast to NHSN users today requesting information on vaccine access. This information is reported through the required weekly reporting for nursing homes on both the resident and staff vaccine reporting sections (Table of Instructions for this reporting available [here](#)). CDC is urging providers to review and report this information as accurately as
possible in order to assist CDC is identifying where vaccine shortages or access issues exist. If you are having issues with vaccine access, please be sure to report this on your weekly reporting and reach out to your local or state public health.

Elder Justice Reauthorization bill introduced. As we hinted last week, The Elder Justice Reauthorization and Modernization Act of 2021 (S. /H.R. ) was introduced on Friday by Sen. Wyden (D-OR), Chair, Senate Finance, and Sen. Casey (D-PA), chair, Senate Special Committee on Aging, and Rep. Neal (D-MA), chair, Ways & Means, and Rep. Bonamici (D-WA), Co-Chair of the House Elder Justice Caucus. LeadingAge worked with committee staff alone and as part of the steering committee of the Elder Justice Coalition. This bill contains 5 major sections:

- **Nursing Home Worker Training Grants** ($1.6B over 4 years) (actually available to all non-RN healthcare/personal care staff in all Medicare/Medicaid LTSS settings and home-based), administered through the states and tribal governments, providing grants for wage subsidies, child care, transportation, legal assistance, employer subsidies for paid leave, etc., designed to support recruiting and retaining workers.

- **Medical-Legal grants** ($500M over 4 years) to states and tribal organizations to develop “evidence based approaches to establishing or improving...linkages between health and social services”, creating medical-legal partnerships, elder abuse hotlines, etc. (LTSS providers are not listed as eligible grantees to develop/administer/support these programs, and this will be one area where we will advocate to include our members, as the goal here is similar to the legal services component in the elder abuse shelter programs pioneered by LeadingAge members).

- **Grant program** ($250M over 4 years) to assist AAAs and community based organizations (which we interpret to include LeadingAge nonprofit members) to address social isolation among vulnerable older adults and adults with disabilities.

- **Funding for Adult Protective Services** ($1.4B over 4) and for training and other supports for the LTC Ombudsman program ($175M over 4).

LeadingAge issued a [press release](#) supporting the bill shortly after it was introduced. We expect it to “move” since it was introduced by the chairs of the key authorizing committees. As noted, we will advocate to include LTSS providers in the medical-legal grant program.

**Provider Relief Fund Webinar Recording Now Available.** If you missed the LeadingAge “Complying with the New Provider Relief Fund Reporting Requirements” webinar on July 27, you can still access it [here](#). The recording is now available on the LeadingAge Learning Hub. It walks providers through step-by-step what they need to know, where the risks may be, and includes 45-minutes of Q &A to help aging service providers understand what they need to report. The first report is due September 30.

**SNF and Hospice Quality Reporting Program.** A reminder to SNFs and Hospices that received July notices that they are considered non-compliant with their respective Quality Reporting Program requirements...the deadline to request reconsideration of this status is this Friday, August 13 at 11:59 PM ET. Please don’t confuse this deadline with deadlines to report first quarter 2021 data. Remember non-compliance will result in a 2% annual rate reduction beginning October 1, 2021. [Here](#) is an article on these non-compliance notices.
Navigating Nursing Home Regulations and Oversight. Join us for a live webinar on August 31 to gain an insider’s perspective on nursing home regulations and get answers to key questions about the survey process in the wake of COVID-19. Experts will address how to approach any inadequate documentation that might be identified during the survey process and share strategies for managing a successful informal dispute resolution. Register today.

How Your Community Can Create a Culture of Belonging. As we strive to increase diversity among elders and team members, how can we ensure those who join our communities and organizations feel a sense of belonging? It begins with honest conversations and a willingness to do better. Join us for a highly interactive virtual event on September 22, where we’ll explore ways provider organizations are creating inclusive cultures where everyone is welcomed, valued, and respected. Learn more and register.

Education You Can Use at the 2021 LeadingAge Annual Meeting + EXPO. Learning at the LeadingAge Annual Meeting is different from offerings available anywhere else. We don’t shy away from the tough topics and you can count on your LeadingAge community for openness and support through even the most difficult discussions. No matter what the subject matter of the sessions you choose, you’ll walk away with measurable, actionable and scalable ideas to apply when you get back home. Make plans to join us in Atlanta October 24-27.