PACE Weekly: Recap of LeadingAge Updates
August 20, 2021

David Grabowski to appear on LeadingAge Coronavirus Update Call on Monday. More mandate discussion and talk about maintaining staff morale on Wednesday. On Monday, August 23 at 3:30 PM ET, David Grabowski, Professor of Health Care Policy at Harvard Medical School and widely covered national commentator and expert on nursing home policy will join the Update Call to talk about the vaccine mandate plans announced by CMS on August 18. David has deep knowledge of long-term care issues and a deep and clear understanding of providers. We’ll chat about other hot policy and operational topics as well.

Making the vaccine a condition of employment is on the top of minds for LeadingAge members, more so with this week’s announcements. On Wednesday, August 25 at 3:30, we will provide some strategies that members have used to prepare for a mandate and how to handle considerations like exemptions and policies. Staff morale is more important these days for LeadingAge members. Join us to hear from Christy Zeitz from member Fellowship Square communities who will share how her staff is working to bolster morale amid trying times. Join us Monday to also hear the latest policy developments and to hear about LeadingAge’s relevant advocacy work. If you haven’t registered for the calls, you can do so here.

COVID-19 Vaccines Additional Doses: Codes & Payment. The FDA amended the emergency use authorizations (EUAs) for both the Pfizer BioNTech COVID-19 vaccine and the Moderna COVID-19 vaccine to allow for an additional dose in certain immunocompromised people. Effective August 12, 2021, CMS will pay to administer additional doses of COVID-19 vaccines consistent with the FDA EUAs, using CPT code 0003A for the Pfizer vaccine and CPT code 0013A for the Moderna vaccine. CMS will pay the same amount to administer this additional dose as they did for other doses of the COVID-19 vaccine (approximately $40 each). CMS will hold and then process all claims with these codes after we complete claims system updates (no later than August 27).

Learn more about Medicare COVID-19 vaccine:
- COVID-19 Vaccine Codes
- Payment

“The Critical Role of Monoclonal Antibodies as the COVID-19 Pandemic Continues” Webinar Recording Available. The Health Resources and Services Administration recently held a webinar featuring Michael R. Anderson, MD, a Senior Advisor to HHS’ Assistant Secretary for Preparedness and Response, who discussed how monoclonal antibody therapeutics can help prevent serious illness from COVID-19. Dr. Anderson shared updates on available COVID-19 therapeutics including efficacy, new administration routes and novel treatments in the pipeline, reimbursement resources, and provider and patient tools and fact sheets. For further questions, contact Dr. Anderson and his team.

CDC and White House announce plans for boosters. Meanwhile, HHS public health and medical experts released a joint statement today on the plan for COVID-19 booster doses. HHS, CDC, and FDA continue
to study data to understand how long vaccine protection lasts. Right now the only booster doses approved by FDA and the Advisory Committee on Immunization Practices (ACIP) are for immunocompromised people. CDC’s independent advisory committee, the Advisory Committee on Immunization Practices, will continue to meet and discuss data on the evolution of the pandemic and the use of COVID-19 vaccines. ACIP will make further recommendations on the use of boosters for the public after a thorough review of the evidence. People who were fully vaccinated earliest in the vaccination rollout, including many health care providers, nursing home residents, and other seniors, will likely be eligible for a booster.

Notes from meeting with CDC on prioritizing assisted living, memory care, affordable housing, and other providers for boosters. We participated in a small meeting with CDC today on the work they are currently engaged in to ensure that providers in other aging services settings are prioritized and know the steps they need to take to arrange for boosters. They encourage providers to start now, with the expectation the ACIP and FDA will approve boosters in September. Topline points are summarized below. When we shared these notes with CDC they added additional information and links to resources providers can use. More information will be available as plans are solidified. This is an opportunity to help shape the HHS plans.

- There are no plans to bring clinics into any provider organizations, as was done with the original Pharmacy Partnership.
- This has to happen now, but no one can activate any plans until the FDA and the ACIP make a recommendation about boosters. Right now, this has only happened for immunosuppressed individuals.
- Most people will need boosters around 8 months after they were fully vaccinated.
- Clearly CDC recognizes that aging services staff and residents are a top priority. CDC is working with provider associations, pharmacies and jurisdictions’ health departments to plan ahead.
- It’s recognized that the ideal situation is on site clinics; the best way to make this happen will be good planning. Providers need to take the first steps to do this planning.
- CDC reports that 95% of nursing homes have a plan in place now to obtain vaccines. The nursing home message is that their first line is work with their LTC pharmacies. But they too need to work proactively and make their own plan.
- HHS recognizes it may be easier for larger providers with higher numbers of people to be immunized to negotiate onsite clinics; there’s special attention and focus to be sure small providers and rural clinic needs are addressed too.
- **Housing, AL, memory care, CCRCs, adult day, PACE and all aging services providers who offer services in congregate settings need to begin now to make plans.**
- Providers need to do two things right now to get started: figure out as well as possible how many doses you will need; and reach out to retail partners to begin to discuss how to bring them in for clinics or, if necessary, arrange to bring people to them.
- Planning can also include activating all the processes providers learned about in December – the spring. Consent forms, staffing clinics, setting up the space, communicating to families, etc.
- HHS is still working on logistics. Provider experience from the original roll out is incredibly valuable. CDC is looking for our input on things to keep in mind and plan for. Feel free to share your insights and ideas with LeadingAge policy staff and we will compile them for CDC.
New CDC reports on vaccine effectiveness. CDC also put out three new Morbidity and Mortality Weekly Reports (MMWRs) today on vaccine effectiveness.

- **Sustained Effectiveness of Pfizer-BioNTech and Moderna Vaccines Against COVID-19-Associated Hospitalizations Among Adults — United States, March–July 2021**
  
  **Key finding:** Among 1,129 patients who got two doses of mRNA vaccine, no decline in effectiveness against hospitalization was observed for 24 weeks. Vaccine effectiveness was 86% 2-12 weeks after vaccine and 84% at 13-24 weeks. The duration of protection is uncertain after that.
  
  [https://www.cdc.gov/mmwr/volumes/70/wr/mm7034e2.htm?s_cid=mm7034e2_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7034e2.htm?s_cid=mm7034e2_w)

  
  **Key finding:** During the period from May 3 – July 25, 2021, vaccines prevented hospitalization in NY 91-95%. Vaccine effectiveness against infection during that period for all adults in NY declined from 91.7% to 79.8%.
  
  [https://www.cdc.gov/mmwr/volumes/70/wr/mm7034e1.htm?s_cid=mm7034e1_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7034e1.htm?s_cid=mm7034e1_w)

- **Effectiveness of Pfizer-BioNTech and Moderna Vaccines in Preventing SARS-CoV-2 Infection Among Nursing Home Residents Before and After Widespread Circulation of the SARS-CoV-2 B.1.617.2 (Delta) Variant — National Healthcare Safety Network, March 1–August 1, 2021**
  
  **Key finding:** Two doses of mRNA vaccines were 74.7% effective for nursing home residents early in the program, from March to May. During June to July, 2021, when the Delta variant circulation predominated, effectiveness declined to 53.1%.
  
  [https://www.cdc.gov/mmwr/volumes/70/wr/mm7034e3.htm?s_cid=mm7034e3_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7034e3.htm?s_cid=mm7034e3_w)

New CDC Forecasting Center. CDC announced that it has created a new center to forecast and analyze disease outbreaks and make data more accessible to public health experts and policymakers. The new Center for Forecasting and Outbreak analytics will be funded with money from last spring’s relief bill. In trying to rely on states to identify and monitor outbreaks of COVID, many observed the country’s patchwork system, often with outdated surveillance systems in states, systems that just couldn’t keep up. This center aims to provide a national focal point for tracking and reporting.

Update from Capitol Hill. Congress has adjourned until around September 20, except that the House will have to return to vote on the budget resolution (needed to give the House and Senate committees their “marching orders”) and leadership will have to decide when to vote on the bipartisan infrastructure bill. The Speaker has indicated that the House will reconvene next week and vote probably on both of these Senate-passed provisions. Our advocacy task is to make sure that the bills that will proceed by reconciliation contain our robust but essential advocacy asks on behalf of the aging services community and the people we serve and who work with us, so please continue to share the Advocacy Alert and encourage your members to contact their representative and senators.

Smart Planning for the Future of Your Organization. Nonprofit boards of directors play a critical role in guiding our organizations through turbulent times. That’s why LeadingAge has invested considerable time and energy developing new governance tools. The first, Strategic Foresight and Strategy Development, offers a practical guide to help boards anticipate future changes, articulate them to stakeholders, and then take action. LeadingAge members receive a 50% discount on already reduced pricing for early adopters.
Building a Better Workplace. It takes thoughtful action to create a professional culture that is free from bias. In this 9-minute QuickCast, Ayana King outlines how we all can strive for a workplace that’s more impartial. Free for LeadingAge members.

U.S. Adults Highly Value Aging Services Caregivers, New Research Finds! Compassionate, dedicated, professional, essential. That’s how U.S. adults describe caregiving professionals for older adults. This is an important finding from the foundational research conducted for LeadingAge’s new initiative, Opening Doors to Aging Services. This long-term initiative will help members better understand public views and perceptions of the aging services sector—and to communicate about them. This extensive body of research is now available for LeadingAge members, partners, and the field. You’ll find an executive summary, landscape visualizations, and a deep dive into all our detailed findings. Visit LeadingAge.org to explore the findings now.

LeadingAge Annual Meeting + EXPO Presents Tech Sessions. The COVID-19 pandemic has elevated the importance of technology in senior living, and CAST is bringing you invaluable information on how best to position your organization. Be sure to attend the LeadingAge Annual Meeting + EXPO and the carefully prepared sessions on the Aging Services Technologies Track, Oct. 24-27, 2021, in Atlanta. Register today!