



September 30, 2020

Sent Electronically

Ms. Seema Verma  
Administrator  
Center for Medicare & Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244

Dear Administrator Verma:

We have heard from some of LeadingAge's more than 5,000 providers of aging services who are deeply concerned that hospital workers and contractors are not tested regularly for COVID-19. We write asking the Center for Medicare & Medicaid Services (CMS) to address this testing issue. Forty percent of hospital patients in the US are over age 65, the group at highest risk for COVID-19. Older individuals served by nursing homes, assisted living, and memory care communities are frequently hospitalized, then return to the aging services community. They face the possibility of returning to nursing homes and other settings having been exposed and potentially infected with COVID.

A September 4, 2020 Morbidity and Mortality Weekly Report (MMWR) posted by CDC reported that while little is known about the prevalence and features of COVID-19 infection among frontline US health care personnel, "a high proportion of SARS-CoV-2 infections among health care personnel appear to go undetected. (<https://www.cdc.gov/mmwr/volumes/69/wr/mm6935e2.htm>) The MMWR authors suggest that the 6% of frontline hospital workers found to be infected with COVID were not adhering to universal use of face coverings and may have worked in hospitals that did not have dedicated cohorts of health care personnel caring for patients with COVID-19. Nursing home personnel must wear PPE and are surveyed by regulators to ensure PPE is worn correctly and other precautions are taken. Hospitals may allow staff to float in and out of COVID areas and staff share locker rooms and other community space. (WSJ article). All this puts hospital patients, including vulnerable nursing homes residents with multiple chronic conditions, at high risk of becoming infected with COVID in the hospital.

While we know the number of nursing home personnel who test positive, regardless of whether they are symptomatic or not, because nursing home staff must be tested, it is impossible to provide similar data for hospital staff because there is no testing requirement. Nursing homes must report positive staff cases in the National Healthcare Safety Network (NHSN) maintained by CDC CMS updates the data weekly. HHS requires hospitals to report data on capacity, utilization and patient positive cases, but does not require hospitals to report staff COVID-19 status. Requiring hospitals to report positive staff cases would quantify the extent of the challenge.

While there are no aggregate data on hospital workers who contract COVID-19, nor even on the numbers of hospital workers who die from COVID-19, MedPage, Kaiser Health News, and even a [concerned physician](#) are gathering information about healthcare worker mortality. A quick look at the [MedPage](#) listing makes it clear that the vast majority of the individuals on their list who have succumbed to COVID-19 were individuals who worked in hospitals. The National Union of Healthcare Workers has called on the state of California to [require testing](#) of workers in hospitals, correctional facilities and in home care. Individual healthcare worker advocates are [requesting staff testing](#) in hospitals in order to keep both employees and patients safe.

Infectious disease [experts](#) are increasingly convinced that mass testing is an important element in the fight against the spread of COVID-19. As the leader of the National Union of Healthcare Workers put it, “Professional athletes are getting coronavirus tests. Why aren’t healthcare professionals?” Even a [partial list](#) of hospital staff infections demonstrates the significant consequences for those facilities. Some health systems have [initiated employee testing](#) to reassure both staff and patients. And there are many practitioners and researchers who [advocate for healthcare worker testing](#).

Most important, CMS should consider mandating the testing of hospital frontline staff, as it has with nursing home staff, because it is the right thing to do. The Imperial College of London COVID-19 response team modelled weekly screening of hospital staff and found that such testing would reduce the staff contribution to transmission by 25%-33%. The American Nursing Association coronavirus survey of members found that nearly 60% were worried for their own safety. Not only would testing of hospital staff protect patients, but it would also keep staff themselves safer. During this time of dire health care staffing shortages, essential frontline health care personnel would be less likely to be sidelined by COVID. Please revisit the decision not to mandate testing hospital staff for COVID-19.

If you have questions or would like to discuss, please reach out to Ruth Katz, LeadingAge Senior Vice President for Policy.

Respectfully,

A handwritten signature in black ink that reads "Katie Smith Sloan". The signature is written in a cursive, flowing style.

Katie Smith Sloan  
President and CEO