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**Welcome Nursing Facility Providers!**

**COVID-19 Updates and Q&A with LTCR  
and DSHS  
September 23, 2020**

For more information:

Web: <https://hhs.texas.gov/services/health/coronavirus-covid-19/coronavirus-covid-19-provider-information>

Email: [PolicyRulesTraining@hhsc.state.tx.us](mailto:PolicyRulesTraining@hhsc.state.tx.us)

Phone: 512-438-3161

# COVID-19 Q&A

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## Panelist

Robert Ochoa  
Senior Policy Specialist  
Policy, Rules and Training  
Long-term Care Regulation

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- Introduction and overview
- Reminders and updates



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# Reminder

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## Sign-up for Gov Delivery

### To sign-up for Alerts:

- Go to:  
<https://service.govdelivery.com/accounts/TXHHSC/subscriber/new>
- Enter your email address.
- Confirm your email address, select your delivery preference, and submit a password if you want one.
- Select your topics.
- When done click "Submit."



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# CMS/CDC NF COVID-19 Training

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CMS is offering free online training for nursing facilities related to COVID-19

[Click here](#) to view currently available pre-recorded trainings.

Facilities also have access to the [CMS Targeted COVID-19 Training for Frontline Nursing Home Staff and Management](#)

Bi-weekly Live Q&As will be held Thursdays at 4pm E.T. (3pm Central) starting August 27<sup>th</sup>.

[Register Here](#) for future Q&A webinars.



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# Voting Information

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The last day to apply for voting by mail is October 23<sup>rd</sup>.

Voting by mail applies to residents who are:

1. 65 years of age or older on Election Day; or
2. Have a sickness or physical condition that prevents the voter from appearing at the polling place on election day without a likelihood of needing personal assistance or of injuring the voter's health.

[Application for a Ballot by Mail \(PDF\).](#)

[Helpful Hints on Voting Early by Mail](#)



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# Voting Information

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A resident may qualify for late voting by mail if the resident:

- has a sickness or physical disability that originates on or after the day before the last day for submitting an application for a ballot to be voted by mail, and
- is unable to go to the polling place on Election Day.

The voter must appoint a representative to deliver an application in person to the early voting clerk by 5:00pm on election day.

[Application for Emergency Voting Ballot Due to Sickness or Physical Disability\)](#)

[Instructions for Balloting Materials](#)



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# Requirements to Report to Resident & Representative

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Correction from last week's webinar:

Facilities must report to residents, their representatives and family by 5:00 PM the next calendar day:

- Each single confirmed case of COVID-19
- Three or more residents or staff have new-onset respiratory symptoms

Communication must include at least weekly updates until no new cases or new-onset respiratory symptoms occur.

See [PL 30-37](#), [QSO 20-29](#), or [42 CFR §483.80](#) for more information



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# POC Antigen Test Reporting

To meet state and federal requirements, facilities must send daily test results to:

1. Register here:  
<https://www.dshs.texas.gov/coronavirus/labreporting.aspx>
2. Submit required testing data to DSHS.

AND

1. Locate your local health department or DSHS Region through  
<https://dshs.texas.gov/regions/2019-nCoVLocal-Health-Entities/>
2. The LHD or DSHS region will provide the input forms and process for you. The required data elements are submitted to your Local Health Department or DSHS Region using the forms and process they provided.



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# POC Antigen Test Reporting

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For facilities facing issues with registering through DSHS, DSHS is currently considering alternative solutions for registering and onboarding that would create a new, more simplified and streamlined method for uploading electronic lab results.

DSHS will notify all facilities that have registered so far as to any changes made.

Facilities that have successfully registered may contact the email below with any questions related to registration or reporting through DSHS.

[COVID-19ELR@dshs.texas.gov](mailto:COVID-19ELR@dshs.texas.gov)



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# POC Antigen Test Reporting

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Facilities facing issues with registering through DSHS must keep all testing result documentation until the facility is able to submit reports.

DSHS will provide information for possible reporting alternatives later in the presentation.

Once the facility successfully registers with DSHS reporting system (or alternative method created by DSHS), the facility will then submit all previous testing result data.



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# COVID-19 Q&A

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## Panelist

Michelle Dionne-Vahalik, DNP, RN  
Associate Commissioner  
Long-term Care Regulation

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- Biohazard waste



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# COVID-19 Q&A

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## Question

Do facilities have to treat COVID-19 waste as biohazard and use biohazard containers (red bags)?

## Answer

No. Medical waste (trash) coming from NFs treating residents with COVID-19 is no different than waste coming from NFs without COVID-19.

The [CDC's guidance](#) states that management of medical waste should be performed in accordance with routine procedures. There is no evidence to suggest that facility waste needs any additional disinfection.

More environmental infection control guidance is available in section 7 of the CDC's [Interim Infection Prevention and Control Recommendations](#).



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# COVID-19 Q&A

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## Panelist

David Gruber  
Associate Commissioner for Regional and  
Local Health Operations  
DSHS

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- Reporting Testing Data



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# Reporting Testing Data

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Reporting to DSHS can be either:

- Directly into NEDSS
- Fax to DSHS regional office
- Fax to DSHS central office

Reporting to LHDs can be either:

- Fax
- other method indicated by LHD

Contact LHD to determine requirements.

DSHS understands that POC testing may not provide complete lab report info. NFs should provide what information they have.

- Notification of positive test results is critical<sup>14</sup>



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# COVID-19 Q&A

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## Panelist

Catherine Anglin  
Program Manager; NF, ICF, LSC  
Policy, Rules and Training  
Long-term Care Regulation

- Expansion of Reopening Visitation Rules



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# Webinar: Review of NF Visitation Rules

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The purpose of this webinar is to provide an overview of the visitation rules and to discuss practical implementation of them in NFs.

NF Provider Webinar  
September 25, 2020  
1 p.m. – 2:30 p.m.

[Register for the COVID-19 webinar](#)

September 28, 2020  
3 p.m. – 4:30 p.m.

[Register for the COVID-19 webinar](#)

Additional dates on next slide



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# Webinar: Review of NF Visitation Rules

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September 29, 2020

11 a.m. – 12:30 p.m.

[Register for the COVID-19 webinar](#)

October 2, 2020

1 p.m. – 2:30 p.m.

[Register for the COVID-19 webinar](#)



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# Expansion of Reopening Visitation Rules

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Expansion of Reopening Visitation Rules were issued September 22<sup>nd</sup> and are effective September 24<sup>th</sup>.

- Rules replace previous Phase 1 visitation rules
- Adds essential caregiver visits for all NF
- Adds indoor plexiglass visits for NF approved for expansion of reopening visitation
- Permits flexibilities on the requirements for expansion of reopening visitation
- Visitation is mandatory for all NF



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# Expansion of Reopening Visitation Rules

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## Visitation Allowed in All NFs

All NF must allow the following visitation:

- Closed window visits (*regardless of resident COVID-19 status*)
- End-of-life visit (*regardless of resident COVID-19 status*)
- Persons providing critical assistance
- **NEW:** Essential caregivers (*for residents without an active COVID-19 infection*)

All NF may allow the following visitation:

- **NEW:** Salon Services Visit (*for COVID-19 negative residents*)



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# Expansion of Reopening Visitation Rules

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## All Facilities Must Apply for Reopening Visitation

Facilities must submit to their LTCR Regional Director:

- Completed Form 2194
- a facility map indicating which areas, units, wings, halls, or buildings accommodate residents who have COVID-19 negative, COVID-19 positive, and unknown COVID-19 status



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# Expansion of Reopening Visitation Rules

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Facilities that do not meet criteria for expansion of reopening visitation must:

- develop and implement a plan to meet the expansion of reopening visitation criteria
- submit the plan to the Regional Director in their LTCR Region within 5 days of submitting the form or of receiving notification from HHSC



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# Expansion of Reopening Visitation Rules

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Before allowing plexiglass indoor visitation, facilities must submit a photo of the plexiglass visitation booth and its location in the facility to the Life Safety Code Program Manager in their LTCR Region.

- A plexiglass visitation booth does not have to be three-sided or a specific size.
  - It may be any configuration that provides a physical barrier to aid in infection control measures.
- A plexiglass visitation booth must not impede the means of egress or block fire safety features.



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# Expansion of Reopening Visitation Rules

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## Essential Caregiver

- Family member or other outside caregiver who is at least 18 years old
- Designated to provide regular care and support to a resident within a resident's room or designated visitation area
- Visitors do not have to maintain physical distancing from resident but must maintain distance from other residents and staff

A resident without an active COVID-19 infection may have:

- Up to two permanently designated essential caregivers
- Visitation from one essential caregiver at a time, limited to two hours



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# Expansion of Reopening Visitation Rules

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Facilities must develop and enforce essential caregiver visitation policies and procedures, which include:

- Testing strategy
- Essential caregivers must have a negative COVID-19 test result no more than 14 days before first visit
- Training on PPE usage and infection protocol in accordance with CDC guidance and facility policy
- A written agreement with essential caregiver visitor to follow all infection control protocols and visit policies



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# Expansion of Reopening Visitation Rules

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## Salon Services Visit

Facilities may allow services from a beautician/barber for a resident who is COVID-19 negative.

- Visitation limited to two hours per resident.
- Visit must occur outdoors, in the resident's bedroom, or in another area that limits visitor movement through the facility.
- Visitors do not have to maintain physical distancing from resident but must maintain distance from other residents and staff.



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# Expansion of Reopening Visitation Rules

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Facilities must develop and enforce salon services visitation policies and procedures, which include:

- Testing strategy
- Salon service visitors must have a negative COVID-19 test result no more than 14 days before first visit
- Training on PPE usage and infection protocol in accordance with CDC guidance
- A written agreement with the salon service visitor to follow all infection control protocols and visit policies.



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# Expansion of Reopening Visitation Rules

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## Expansion of Reopening Visitation

The following visitation is allowed in approved facilities for residents who are COVID-19 negative:

- Outdoor visits
- Open window visits
- Vehicle parades
- **NEW:** Plexiglass indoor visits (with prior approval from the Life Safety Code Program Manager)



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# Expansion of Reopening Visitation Rules

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## Expansion of Reopening Visitation Requirements

- Separate areas for resident cohorts based on COVID-19 status (positive, negative, and unknown)
- Separate staff dedicated to each cohort without changes from one day to another
- Must be in compliance with CMS testing requirements
  - Note: this replaces the previous weekly testing requirement under Phase 1 visitation



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# Expansion of Reopening Visitation Rules

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- No COVID-19 cases in staff for at least 14 days in the COVID-19 negative area
- No facility-acquired COVID-19 cases in residents for at least 14 days in the COVID-19 negative area
- If a facility has had previous cases of COVID-19 in staff or residents in the COVID-19 negative area, HHSC LTCR has conducted a verification survey and confirmed:
  - All staff and residents have fully recovered
  - Facility staffing is adequate
  - Facility is in compliance with infection control requirements



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# Expansion of Reopening Visitation Rules

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## Instructional Signage & Visitor Education

A NF must provide:

- instructional signage throughout the facility
- visitor education regarding:
  - signs and symptoms of COVID-19;
  - infection control precautions
  - other applicable facility practices
    - use of facemask or other PPE
    - hand hygiene
    - specified entrances and exits
    - routes to designated visitation areas



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# Expansion of Reopening Visitation Rules

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## County Positivity Rate

A NF shall use the COVID-19 county positivity rate as additional information to determine how to facilitate indoor visitation.

- A NF located in a county with a positivity rate up to 10 percent must permit visitation in accordance with the rule.
- A NF located in a county with a COVID-19 positivity rate of greater than 10% must limit visitation to:
  - Outdoor visits
  - Closed window visits
  - End-of-life visits
  - Essential caregiver visits



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# Expansion of Reopening Visitation Rules

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Additional expansion of reopening visitation requirements:

- Visits must be scheduled in advance, allowing time for cleaning and sanitization of visitation area between visits
- Physical distancing is required (except for end-of-life, essential caregiver, and salon service visits)
- Visitors must wear a face covering (except for closed window visits or vehicle parades)
  - Essential caregiver and salon services visitors must wear a facemask and any appropriate PPE



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# Expansion of Reopening Visitation Rules

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Additional expansion of reopening visitation requirements:

- Residents must wear a face covering (if tolerated)
- Visitors must be screened in accordance with rules outside the facility before entering, except for:
  - Vehicle parade visitors
  - Closed window visitors



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# Expansion of Reopening Visitation Q&A

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## Question

CMS [QSO 20-39](#) states that compassionate care types of visits include more than end-of-life visits, do the new rules allow these types of visits?

## Answer

Yes, while the rule does not specifically use the term compassionate care visits, visits in situations described by CMS as “compassionate care” are permitted. The new visitation rules allow essential caregiver visits, and other types of visits, that permit visitation in the compassionate care situations described in the CMS guidance.



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# Expansion of Reopening Visitation Q&A

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## Question

Do facilities with current Phase 1 designation need to apply for the Expansion of Reopening Visitation?

## Answer

No. Unless the Phase 1 approval has been withdrawn, rescinded, or cancelled, a facility does not need to submit Form 2194 or a facility map to their LTCR Regional Director.

Facilities will need to submit a photo of the plexiglass visitation booth and its location in the facility to the Life Safety Code Program Manager in their LTCR Region.



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# Expansion of Reopening Visitation Q&A

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## Question

Do facilities have to apply for Phase 1 designation before applying for the Expansion of Reopening Visitation?

## Answer

No, a NF does not have to apply for Phase 1 designation before applying for the Expansion of Reopening Visitation designation since the new rules replace Phase 1 visitation rules. A NF must apply for visitation designation under the new rules, unless they already have Phase 1 designation as discussed on the previous slide



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# Expansion of Reopening Visitation Q&A

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## Question

Does the facility have to apply for visitation designation prior to allowing the essential care givers into the facility?

## Answer

No, essential caregiver visits do not require a visitation designation A NF must comply with all rules related to essential caregiver visits.



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# Expansion of Reopening Visitation Q&A

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## Question

Do the new visitation rules apply to licensed-only nursing facilities?

## Answer

Yes, the new visitation rules apply to all nursing facilities. Additionally, the new visitation rules also require licensed-only nursing facilities to follow the CMS testing requirements at 42 CFR §483.80(h). The testing requirements are described in [QSO 20-38](#).



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# Expansion of Reopening Visitation Q&A

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## Question

Are facilities required to provide PPE to Essential Caregivers?

## Answer

Per the expansion of reopening visitation rules, the facility must either approve or provide the visitor's facemask and any other appropriate PPE recommended by CDC guidance and the facility's policy.



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# Expansion of Reopening Visitation Q&A

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## Question

Do essential caregiver visitors have to demonstrate they had a negative test result within the two weeks before their first visit?

## Answer

Yes, an essential caregiver must have a negative COVID-19 test result from a test performed no more than 14 days before the first essential caregiver visit, unless the nursing facility chooses to perform a rapid test prior to entry in the nursing facility.



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# Expansion of Reopening Visitation Q&A

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## Question

Do essential caregiver visitors have to provide evidence they've tested negative before each visit after the first visit?

## Answer

It would depend on how frequently they visit. The NF must develop a testing strategy for the essential caregiver visitor.



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# Expansion of Reopening Visitation Q&A

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## Question

Are facilities responsible for testing or paying for the COVID-19 test for the Essential Caregivers?

## Answer

No, the facility does not have to provide or pay for the essential caregiver's COVID-19 test, but they are not prohibited from doing so.



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# COVID-19 Q&A

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## Panelist

Renee Blanch-Haley, BSN, RN  
Director of Survey Operations  
Long-term Care Regulation



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# COVID-19 Q&A

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## Panelist

Valerie Krueger, PASRR Specialist  
Mental Health PASRR  
IDD Program Services, IDD-BH



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# State Long-Term Care Ombudsman Program

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Statewide phone: 800-252-2412

Statewide email:

[ltc.ombudsman@hhsc.state.tx.us](mailto:ltc.ombudsman@hhsc.state.tx.us)

State Ombudsman: Patty Ducayet,  
737-704-9075 (or)

[patty.ducayet@hhsc.state.tx.us](mailto:patty.ducayet@hhsc.state.tx.us)



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Weekly Facebook Live Q&A for Families of LTC  
Residents: Every Wednesday, 12:15 to 12:45

<https://www.facebook.com/texasltcombudsman?ref-ts>

# COVID-19 Q&A

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## Panelist

Heidi Lizyness  
Policy Specialist  
Long-term Care Regulation

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- Questions from last week



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# COVID-19 Q&A

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## Question:

Will the waiver allowing for staff to work as a CNA but without certification in a SNF continue until testing with Prometric can start and catch up for all people pending to take the CNA tests?

## Answer:

The waiver lifting the requirements for CNA certification are in effect until terminated by the Office of the Governor or until the March 13, 2020 disaster declaration is lifted or expires. HHSC will notify providers at a later date when compliance is required for suspended provisions of statutes and rules.



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# CMS Testing Q&A

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## Question:

How should facilities respond to asymptomatic staff who refuse routine testing?

## Answer:

CMS [QSO-20-38](#) guidance states that facilities should have procedures in place to address staff who refuse testing. If outbreak testing is triggered and a staff member refuses testing, the staff member should be restricted from the building until the procedures for outbreak testing have been completed.



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# CMS Testing Q&A

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## Question:

Assuming vaccines are available this fall, will the new staff testing requirements be relaxed or completely eliminated for facilities who have vaccinated staff?

## Answer:

COVID-19 vaccination information is not available at this time. When vaccines are available, any policy updates will be provided.



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# CMS Testing Q&A

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## Question:

Facilities are reporting that antigen testing supplies beyond the initial supply, will not be available for 4-6 weeks. The costs to conduct PCR testing are significantly higher. Will there be additional funding to cover the costs of testing?

## Answer:

Per CMS: Questions related to testing supply availability should be directed to the Office of the Assistant Secretary of Health (OASH) and the manufacturer of the device. *(Cont. on next slide)*



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# CMS Testing Q&A

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Re-supply of these testing kits is expected soon as the remainder of facilities are shipped their devices/kits.

In addition, the Trump Administration has provided \$4.9 billion to nursing homes to offset revenue losses and assist facilities with additional costs related to responding to the COVID-19 public health emergency. An additional \$5 billion will be allocated from the Provider Relief Fund in the CARES Act for nursing homes participating in Medicare and Medicaid. This funding could be used to address critical needs in nursing homes including increased testing.



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# CMS Testing Q&A

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Reminder: In the event that additional test supplies will not be received in time, facilities should reach out to their local health department to assist with identifying alternative testing.

Facilities should not attempt to obtain testing supplies from their local health departments or through the STAR process/rapid response teams.

Facilities must document all efforts to obtain testing supplies or alternative testing methods in order to maintain compliance with CMS testing requirements



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# CMS Testing Q&A

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## Question:

Should residents get tested weekly?

## Answer:

Per CMS [QSO-20-38](#), residents are only required to be tested if they are exhibiting signs or symptoms of COVID-19 or as a part of an outbreak response. The CMS routine testing requirements apply only to facility staff. Regular or routine testing of asymptomatic residents is not recommended.



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# CMS Testing Q&A

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## Question:

For outbreak testing can a nasal swab test be used or is it required to have nasopharyngeal swab? Also, can antigen testing be used during outbreak testing or does it have to be a PRC test?

## Answer:

Facilities with antigen point-of-care testing should refer to the manufacturer instructions to determine if a nasal swab or nasopharyngeal swab is necessary. Antigen point-of-care tests may be used to fulfill all CMS testing requirements. However, facilities should follow [CDC guidance](#) for when to confirm point-of-care antigen tests.



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# COVID-19 Q&A

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## Question:

Where do we find our county positivity rate?  
Who do we contact to question if that number is incorrect?

## Answer:

Facilities can find their county positivity rate on website below or through their county

<https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg>

Facilities must choose a consistent source for tracking their county positivity rate. *(cont. on next slide)*



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# COVID-19 Q&A

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## Answer cont.:

Facilities may use county-issued COVID-19 positivity rates instead of the county positivity rates posted by CMS so long as:

- The county-issued rates are updated at the same frequency as the CMS file (weekly).
- The facility documents the county rate, the date in which the rate was acquired, and cite the source of the county rate.

For questions regarding individual county rates, the facility must contact either CMS or their county (depending on the source of the positivity rate)



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# COVID-19 Q&A

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## Question:

If a facility is still using a private lab for their testing, do they need to report all the results to the DSHS site?

## Answer:

No, the federal and state test result reporting requirements only apply to facilities that conduct testing.

Facilities will still need to report new confirmed COVID-19 cases in line with federal and state reporting requirements as outlined in [PL 20-37](#).



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# COVID-19 Q&A

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## Question:

Do we still need a designated COVID unit in the event we have a COVID positive patient? If we have a contract with a COVID accepting facility can we do away with the COVID unit?

## Answer:

Per the [mitigation emergency rules](#), a facility is required to have in place “cohorting plans that include designated space for residents who are COVID-19 negative, COVID-19 positive, and unknown COVID-19 status.”  
*(Cont. on next slide)*



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# COVID-19 Q&A

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## Answer cont.:

The rules do not require that an unused area/unit be left empty, but rather that a response plan is in place that will allow a facility to take immediate action in the event of a suspected or confirmed case of COVID-19.



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# COVID-19 Q&A

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## Question:

Can you please review if a resident's COVID status will change if they go with family or public transport to a medical appointment?

## Answer:

A resident who is transported to a medical appointment by friend or family member must be placed into a 14-day quarantine. A resident who uses public transportation to a medical appointment and adheres to all necessary infection control measures will be considered to have the same COVID-19 status upon returning to the facility.



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# Questions?

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For more information:

Web: <https://hhs.texas.gov/services/health/coronavirus-covid-19/coronavirus-covid-19-provider-information>

Email: PolicyRulesTraining@hhsc.state.tx.us

Phone: 512-438-3161



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# Thank you!

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For more information:

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