Welcome Nursing Facility Providers!

COVID-19 Updates and Q&A with LTCR and DSHS
August 26, 2020

For more information:
Email: PolicyRulesTraining@hhsc.state.tx.us
Phone: 512-438-3161
COVID-19 Q&A

Panelist

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

• Introduction and overview
• Reminders and updates
Reminder

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.”
CMS/CDC NF COVID-19 Training

CMS-CDC Nursing Facility Trainings are moving to an on-demand, pre-recorded format with bi-weekly Q&A webinars.

Click here to view currently available pre-recorded trainings.

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

Register Here for future Q&A webinars.
New CMS/CDC NF COVID-19 Training

Yesterday CMS announced a scenario-based online training module called “CMS Targeted COVID-19 Training for Frontline Nursing Home Staff and Management”

The training will be available on the CMS Quality, Safety & Education Portal

Facilities may complete an online self-assessment tool at www.qioprogram.org to help identify needs and suggest the appropriate training modules that best reflect those needs.
Voting Options During COVID-19

Residents have the following voting options:

• **Application for a Ballot by Mail** submitted any time from 60th to the 11th day before Election Day.

• **Application for a Ballot by Mail** submitted to any early voting location if no in-person voting is allowed

• Voters unable to enter polling locations may request an election officer deliver and submit a ballot from the voter’s vehicle

See general voting information

See information for voters with disabilities
CMS announced new emergency rules for NF yesterday.

• Facilities will be required to test staff/residents in a manner and frequency determined by US HHS (pending announcement)

• Facilities receiving point-of-care testing kits will be required to submit results to US HHS in a manner and frequency determined by US HHS (pending announcement)
Reminder: Obtaining N95 Masks

N95 masks will be shipped to 215 NF from national stockpile starting tomorrow.

Texas does not have a shortage of N95 masks.

To obtain N95 masks, submit a request to your Hospital Preparedness Program Provider.

Please contact your LTCR Region if:
• If you are told your facility is not eligible to receive PPE
• If you are told that the Hospital Preparedness Program Provider does not have N95 masks to distribute
Reminder: Obtaining N95 Masks

Hospital Preparedness Program Providers by region
Reminder: Obtaining N95 Masks

Contact for Hospital Preparedness Program Providers.

- Panhandle RAC: (806) 322-1290  
  [www.panhandlerac.com](http://www.panhandlerac.com)
- North Central Texas Trauma RAC: (817) 608-0390  
  [www.ncttrac.org](http://www.ncttrac.org)
- Piney Woods RAC: (903) 593-4722  
  [www.RAC-G.org](http://www.RAC-G.org)
- SouthEast Texas RAC: (281) 822-4444  
  [www.setrac.org](http://www.setrac.org)
- Capital Area Trauma RAC: (512) 926-6184  
  [www.catrac.org](http://www.catrac.org)
- Southwest Texas RAC: (210) 233-5850  
  [www.strac.org](http://www.strac.org)
- Far West Texas & Southern New Mexico (DBA BorderRAC): (915) 838-3200  
  [www.borderrac.org](http://www.borderrac.org)
- Coastal Bend Regional Advisory Council (361) 929-5401  
  [www.cbrac.org](http://www.cbrac.org)
Reminder: Obtaining N95 Masks

Please see the links below for information and infographics regarding N95 fit testing and preparation.

- Proper N95 Respirator Use for Respiratory Protection Preparedness
- Fit Testing
- OSHA Fit Testing Procedures
- DSHS Respiratory Protection FAQs
- The Need for Fit Testing During Emerging Infectious Disease Outbreaks
Update Emergency Preparedness Plans

Facilities must ensure emergency preparedness plans are ready and updated.

Facilities must consider the impacts of COVID-19 on their emergency preparedness plans including:

- Transportation of residents (COVID-19 negative, positive, and unknown)
- In the event of an evacuation - receiving facility’s policies/status regarding COVID-19
Emergency Preparedness Alert

If your facility is impacted by severe weather such as wind or flooding, or is in an area under mandatory evacuation orders, contact your local Regional Office (RO).

All requests to exceed licensed capacity due to an emergency must be approved by the director of survey operations.

If your facility is projected to exceed its licensed capacity because it is accepting residents who have been evacuated from another facility, email Renee Blanch-Haley and include State Capacity Increase Request in the subject line.
Reminder: CMS Staffing Reporting

Per QSO 20-34-NH released June 25, 2020, the blanket waiver for reporting staffing data has been lifted.

All facilities are required to resume submitting staffing data through the Payroll-Based Journal system by August 14.
CMS is delaying the filing deadline of certain cost report due dates due to the COVID19 outbreak.

• the filing deadline of FYE 10/31/2019 and FYE 11/30/2019 cost reports will be June 30, 2020

• the filing deadline of the FYE 12/31/2019 cost reports will be August 31, 2020

• For the FYE 01/31/2020 cost report, the extended due date is August 31, 2020

• For the FYE 02/29/2020 cost report, the extended due date is September 30, 2020
Doctors Without Borders

Doctors Without Borders is offering infection control assistance to certain Texas nursing facilities with:

• Infection mitigation protocols and tools
• Stress-reduction techniques for staff and residents

Facilities that are contacted by Doctors Without Borders (also called Médecins Sans Frontières) are encouraged to accept any assistance offered.
For Facilities Receiving Antigen Test Kits

For facilities receiving Point-of-Care Antigen Test Kits from US HHS:

- Facilities will need to be CLIA certified or receive a waiver – this is done through your regional CLIA licensing group
- **CLIA regulations** for testing still apply
- Facilities are required to report each test result (positive, negative, or otherwise) to DSHS as directed on this [webpage](#)
- Per CMS announcement yesterday, facilities will also be required to report test results to U.S HHS (details to be announced soon)
- See [FDA FAQ](#) for additional information
End-of-Life vs. Compassionate Care

End-of Life Visits

- Allowed in all facilities per the emergency rules issued April 2020
- Allowed for residents facing end-of-life
- May include friends and family
- Facilities should consider appropriate measures to ensure infection control

See QSO 20-14 for additional guidance from CMS
End-of-Life vs. Compassionate Care

Compassionate Care Visits

- Only available in facilities approved for Phase 1 Visitation
- Only for residents with a diagnosis from a physician that meets the Failure to Thrive definition in the Emergency Visitation Rules and PL 20-24
- Resident is allowed one permanent designated visitor
- Visits may occur indoors, separate from all other residents
- Visits must be monitored by staff to ensure social distancing
Closed Window Visits vs. Open Window Visits

Closed Window Visits

• Allowed in all facilities – it is not included in the Emergency Visitation Rules

Open Window Visits

• Only allowed in facilities approved for Phase 1 Visitation

• Visitation must adhere to all requirements in the Emergency Visitation Rules, including
  • Visitors must be screened outside facility
  • Facility must ensure social distancing
COVID-19 Q&A

Panelist

Michelle Dionne-Vahalik, DNP, RN
Associate Commissioner
Long-term Care Regulation
COVID-19 Q&A

Panelist

Renee Blanch-Haley, BSN, RN
Director of Survey Operations
Long-term Care Regulation
COVID-19 Q&A

Panelist

Susan Purcell, BS, RN, CPHQ

Project Director/Regional Task Lead – Nursing Home Quality Improvement

TMF Health Quality Institute, the CMS-designated Quality Improvement Network – Quality Improvement Organization (QIN-QIO) for Texas, Arkansas, Mississippi, Nebraska, Puerto Rico, and US Virgin Islands

Email nhnetwork@tmf.org to submit requests for assistance with NHSN reporting problems.
State Long-Term Care Ombudsman Program

Statewide phone: 800-252-2412
Statewide email:
ltc.ombudsman@hhsc.state.tx.us
State Ombudsman: Patty Ducayet, (or) patty.ducayet@hhsc.state.tx.us

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

Panelists

Samantha Chase
Joint Training Specialist
Policy, Rules, & Training/Regulatory Services Division

Cindy Crim
Joint Training Specialist
Policy, Rules, & Training/Regulatory Services Division
COVID-19 Q&A

Panelist

Heidi Lizyness
Program Specialist
Long-term Care Regulation

• Questions from last week
COVID-19 Q&A

**Question:**
Does weekly testing have to be on the same day every week, or can it be every 7 days for each staff member?

**Answer:**
For NFs seeking phase 1 visitation, each staff member must be tested at least once a week. As long as the facility can provide documentation, upon request from HHSC, that no more than 7 days have lapsed since each staff member was tested, staff testing may take place on different days of the week to accommodate testing of all staff.
COVID-19 Q&A

Question:
Where can I find the positivity rate for my county?

Answer:
The DSHS dashboard lists confirmed cases from all Texas counties reporting COVID-19. Please contact your local health authority to inquire about the most recent positivity rate for your specific county.

CMS issued rule on 8/25/20. However, CMS guidance on testing frequency and testing based on positivity rate is pending.
Questions?

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Thank you!

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