Welcome Nursing Facility Providers!

COVID-19 Updates and Q&A with LTCR and DSHS
July 16, 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
Update

Change to Webinar Format

• Beginning next week
• Addition of micro trainings
• Conducted by LTCHR training staff
Reminder

Sign-up for Gov Delivery
To sign-up for Alerts:

• Go to: https://service.govdelivery.com/accounts/TXHHHSC/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.”
Reminder

Updated NF COVID-19 FAQs

Posted July 7

HHSC Long-term Care Regulation has updated the nursing facility provider

Frequently Asked Questions about COVID-19
COVID-19 Response for Nursing Facilities

Abstract
This document provides guidance to Nursing Facilities on Response Actions in the event of a COVID-19 exposure.

Version 3.1
6/01/20
NF Stakeholders Invited to COVID-19 Comprehensive National Training

Training will be held on the following topics:

• Establishing an infection prevention program, and conducting ongoing infection surveillance in the nursing home
• Implementation strategies for COVID-19 surveillance and early detection
• Cohorting: effective management of residents and staff
• Clinical Care: managing COVID-positive residents
• Personal protective equipment (PPE) strategies for COVID care

Continued...
NF Stakeholders Invited to COVID-19 Comprehensive National Training

Continued

Dates for training:

Register for the webinar here.

• July 17: 1:00 p.m.
• July 21: 4:00 p.m.

If you are unable to attend any of the comprehensive trainings, you may also view recordings, slides and resources on QIOProgram.org.
July 17 Webinar - Special Issues in SNFs and NFs during the COVID-19 Pandemic

Review of the fundamentals of how to approach prevention and management of COVID-19 cases in both residents and staff.

Topics include:
- How to obtain and use PPE
- Staff mental health
- Communication with care partners and family members
- The experience of one nursing home with COVID-19

- July 17: 9:30 – 10:30 a.m
Register for the webinar here
PPE Infection Control Basics Webinar

Prevent or minimize the spread of infectious disease by using PPE. During this webinar:

- Review standard and transmission-based precautions
- Learn proper hand hygiene techniques
- Demonstrate how to utilize PPE
- Discuss the importance of social distancing in an outbreak situation

- July 17: 10:00 a.m. Register for the webinar here.
- July 24: 3:00 p.m. Register for the webinar here.
- July 31: 10:00 a.m. Register for the webinar here.
Emergency Preparedness for Long Term Care Facilities Webinars

- July 23: 1:00 p.m.  
  Register for the webinar here.

- July 27: 9:00 a.m.  
  Register for the webinar here.

- July 29: 1:00 p.m.  
  Register for the webinar here.
MLN Network – NFs & COVID: Five Things to Know, Additional Resources, and Training
Clarification About Free COVID-19 Testing Initiative for NFs and ALFs

The Texas Division of Emergency Management has contracted with Omnicare to administer COVID-19 tests. In nursing facilities, it is for staff only and in assisted living facilities for both staff and residents. This is a clarification.

Omnicare is providing point-of-care testing at no charge to the facility. Most results are provided to the facility within 24 to 48 hours.

Omnicare will contact certain facilities to schedule COVID-19 testing. They will provide more detail about the process at that time. Facilities can request testing by contacting their HHSC regional director if they have not been contacted by Omnicare.
COVID-19 Q&A

Panelist

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

- Updates
- NF Surges
Reminder

Death Reporting

NFs are required to submit death reports to HHSC within ten working days after the last day of the month via TULIP. They must report all deaths that occur within the facility and those that occur within 24 hours after transferring a resident to a hospital from the NF. NFs can be cited for failing to submit timely and accurate death report information to HHSC.

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, 737-704-9075 (or) patty.ducayet@hhsc.state.tx.us

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

Update: Ombudsman preparing for outdoor visits to NFs
  • Goal is to coordinate with administrators or designee prior to first visit
  • Anticipate contact from your ombudsman
  • Ombudsman are classified in state emergency rules as essential
COVID-19 Q&A

Panelists

Lisa Glenn
Associate Commissioner
Regulatory Operations Support

Vanessa Rios
Director of Workforce Support
Civil Money Penalties Program
Special Application Period for Communicative Devices in Nursing Facilities

Texas nursing facility providers are encouraged to submit applications for available Civil Money Penalty funding to purchase technology to help residents communicate with their loved ones during the COVID-19 crisis.

Providers that correctly complete an application to Texas HHSC are eligible to receive up to $3,000 per facility to purchase communicative technology devices (e.g. iPads, tablets, webcams) and accessories (e.g. headphones, protective covers). Exceptions by CMS may be made for large facilities based on the one device per seven-to-10 resident ratio.

Devices should be shared among residents, with a ratio of one device per seven-to-10 residents. Applications or requests for exceptions will be considered in certain circumstances, such as in a facility with a high number of residents.

Facilities will not be permitted to purchase personal devices for any resident. Devices also should not be shared between COVID-19 positive (or suspected) and other residents (COVID-19 negative or observation status). Additionally, devices must be cleaned and disinfected between every use by a resident.

Applications must be submitted using the COVID-19 communicative technology application template. Incomplete applications will not be accepted. Providers also must complete all portions of form AP-152.

(Continued)
Special Application Period for Communicative Devices in Nursing Facilities

• **COVID-19 Application Template (PDF)**

• **Form AP-152 – Application for TIN (PDF)**

• Completed applications should be submitted to the CMP mailbox: [CmpApplication@hhsc.state.tx.us](mailto:CmpApplication@hhsc.state.tx.us)
MDS Information Update

Panelist

Susan Edgeman BSN, RN, RAC-CT
State RAI Coordinator,
Policy, Rules and Training
Long-term Care Regulation

Susan.edgeman@hhsc.state.tx.us

- Overview of MDS waivers during current Public health emergency (PHE)
- Reminders and updates
MDS Information Update

Objectives:

• Understand a basic overview and tips on MDS waivers and applicable issues during current Public health emergency (PHE)

• Understand Skilled Nursing Care/Services

• Understand who makes these skill/waiver determinations

• Understand how the PHE affected PBJ and QM reporting deadlines
MDS Information Update

Disclaimer:

• The information discussed is current at the time it was written

• The current Public Health Emergency is still evolving

• Please continue to check the CMS current emergencies website: https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page
MDS Information Update

Disclaimer:

• Please subscribe to CMS GOV Alert

• Please visit the CMS websites, and review PBJ and SNF QRP information

• Today’s topic deals with CMS federal requirements, please continue to check the LTC announcements at the Texas Medicaid Partnership (TMHP)
  http://www.tmhp.com/Pages/LTC/Ltc_home.aspx
History of current PHE Waivers


Source: CMS Current Emergencies Website
MDS Information

History of current PHE Waivers

• Waivers in effect until the termination of the public health emergency

• Waivers still in place

• Based on the original date of Mar 1, the end of July is expected to be a time of an update on the status of waivers
MDS Update

MDS Extensions for PPS Assessment Completion and Transmission

• Please Make sure the Assessment Reference Date (ARD) is set and the assessment is opened on time
• Setting the ARD hasn’t been waived
• Only timeframes for completion and submission
• Please try to stay on schedule when possible.
MDS Information

1135 Waivers

- Requirement for 3-day Hospital Stay

- Using the authority under section 1812(f) of the Social Security Act, CMS is waiving the requirement for a 3-day prior hospitalization for coverage of a SNF stay, which provides temporary emergency coverage of SNF services without a QHS, for those people who experience dislocations, or are otherwise affected by COVID-19.
MDS Information

Key Concepts:

• Patients may be admitted directly to the SNF, from home or the ED without a qualifying hospital stay

• The Resident must meet criteria for Skilled Services under Part A

• Medicare Part A benefits for Skilled services outlined in Chapter 8 of Medicare Benefits Policy Manual remain unchanged
MDS Information

Key Concepts and Suggestions:

• Document what’s going on in the clinical record (Nursing Notes.)

• Save all applicable information from the hospital, home health company etc.

• You would want to address the situation in care planning, For example was the resident scheduled for an elective surgery that was postponed due to the PHE?

• Physician/provider write a detailed note
MDS Information

Key Concepts and Suggestions:

• “SNF coverage isn't based on particular diagnoses or medical conditions, but rather on whether the beneficiary meets the statutorily-prescribed SNF level of care definition of needing and receiving skilled services on a daily basis which, as a practical matter, can only be provided in a SNF on an inpatient basis.”

• SOURCE: CMS COVID-19 Frequently Asked Questions (FAQs) on Medicare Fee-for-Service (FFS) Billing
MDS Information

Key Concepts:

• Per John Kane (CMS) in instructions to State RAI Coordinators

• All case by case determinations regarding Skilled Nursing/Services or if waiver criteria apply, will be made by the Medicare Administrative contractor (MAC)

• In Texas, NOVITAS, JH https://www.novitas-solutions.com/webcenter/portal/MedicareJH
MDS Information (PBJ)

Key Concepts and Suggestions:

• The PBJ system allows CMS to collect nursing home staffing information which impacts the quality of care residents receive. The blanket waiver was intended to temporarily allow the agency to concentrate efforts on combating COVID-19 and reduce administrative burden on nursing homes so they could focus on patient health and safety during this public health emergency.
MDS Information (PBJ)

Key Concepts and Suggestions:

- **Nursing facilities**
- Today, the Centers for Medicare & Medicaid Services (CMS) announced plans to end the emergency blanket waiver
- All nursing homes to resume submitting staffing data through the Payroll-Based Journal (PBJ) system by August 14, 2020

SOURCE: Source: CMS News Room Jun 25, 2020
MDS Information (PBJ)

Key Concepts and Suggestions

• All nursing homes to resume submitting staffing data through the Payroll-Base Journal (PBJ) system by August 14, 2020

• (The May 14, 2020 deadline, was waived in that no penalty for not meeting this deadline)

• So, it would be best to plan to have your April through June data, and your Jan through March data submitted too.

• Be aware that PBJ data although originally used for 5 star, may now be used as general information about your staffing

• If you haven’t reported other staff members, and are only reporting nursing staff, you may want to consider reporting all staff members
COVID-19 Q&A

Panelist

David Gruber
Associate Commissioner for Regional and Local Health Operations
DSHS

- Updates
- Answers to questions from last week
COVID-19 Q&A

Question:
Antigen and antibody tests are different. Is either acceptable for use in residents or staff at this time?
COVID-19 Q&A

Question:
Is COVID-19 upgraded to airborne isolation vs droplet isolation?
COVID-19 Q&A

Question:
We were told that the whole facility is considered a warm zone because the mandate to wear masks. How do we treat them the same as a hot zone? We are COVID free at this time.
COVID-19 Q&A

Question:
We completed just-in-time fit testing for N95s. We are getting the supplies in to do regular fit testing but are having challenges securing different size masks. Should we still do the traditional fit testing if we cannot get the different N95 masks?
COVID-19 Q&A

Panelist

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

• Questions and answers from the week
HOW TO ENTER CHANGE OF CONDITION FOR A RESIDENT IN A NURSING FACILITY (PASRR POSITIVE RESIDENT)

You can find information on how to enter a change of condition in the TMHP PASRR User Guide in the section called Resident Review. User Guide has been added to the webinar as a handout.

Other questions can be emailed to: PASRR.Support@hhsc.state.tx.us
COVID-19 Q&A

Question:
Will HHSC schedule appointments with Omnicare for testing of Adult Day Care Centers?

Response:
At this time Omnicare testing for NF staff and for ALF residents and staff only. If this changes we will notify stakeholders immediately.
COVID-19 Q&A

Question:
When you have a positive COVID test result, what is the time frame for notifying family members, etc. Initially it was by 5pm the next day, now it is 12 hours. Which is the guideline we are to follow with these notifications?

Response: Report either a single confirmed infection of COVID-19, or three or more residents or staff with new-onset of respiratory symptoms occurring within 72 hours of each other, to residents, their representatives, and families by 5p.m. the next day. Update weekly or sooner of new COVID-19+ cases or three or more residents or staff with new-onset of respiratory symptoms.

42 CFR §483.80(g)(3)
Questions?

For more information:
Email: PolicyRulesTraining@hhsc.state.tx.us
Phone: 512-438-3161
Thank you!

For more information:
Email: PolicyRulesTraining@hhsc.state.tx.us
Phone: 512-438-3161