NC Department of Health and Human Services

COVID-19 Testing:
Reporting under Secretarial Order No. 4

Office Hours, 10:00-11:00

September 24, 2020

Revised Office Hours Overview

- Goal is to establish resource for nursing homes to access nursing home-specific updates on DHHS COVID Activities.

- Initial priority: Secretarial Order No. 4, Testing and Reporting.

- Anticipated Topics:
  - Visitation
  - Other topics as needed.

Updates and Reminders

- Thank you for Reporting Period 2 Submissions

- Secretarial Order No. 4 now published and also attached.

- Link to COVID-19 Testing: Nursing Home Reporting Portal https://ncgov.servicenowservices.com/csm_nh

- Materials available on NC Medicaid COVID Provider Status Reporting Page will be updated to align with Today's guidance.

- *SPECIAL BULLETIN COVID-19 #129: Reporting Requirements and Financial Support to Nursing Homes under Secretarial Order No.2 posted here.*

Secretarial Order No. 4

- Continues the testing and reporting requirements established in Secretarial Order No. 2, in modified form.

- Established under the authority of *Executive Order 165*.

- Signed on 9/21/2020.

- Works to align with federal testing requirements published by the federal Centers for Medicare & Medicaid Services (CMS) in *QSO-20-38-NH* (the federal requirements).

- COVID-19 Testing: Nursing Home Reporting Portal still in effect.

- Modified reporting under Secretarial Order No. 4 will begin with Reporting Period 4.

The "Federal Requirements" Qualifier

What Secretarial Order No. 4 Requires:

Section III. Effect of this Secretarial Order on Federal Requirements

This Order in no way replaces or otherwise abridges a nursing home's responsibilities under the federal requirements cited within this Order.

What this Means

- Please familiarize yourself with Centers for Medicare & Medicaid Services (CMS) communication: *QSO-20-38-NH*
- Questions specific to federal requirements will be fielded by DHSR.
- Portal submissions do not replace other reporting responsibilities.
- If nursing homes that are not covered under federal requirements directly would like additional guidance, please note in the Chat box so we can consider organizing an ad hoc discussion.

Facilities Covered

Recognizing the correlation between community transmissions and facility outbreaks and in an effort to align with recently released federal requirements, I have determined that nursing homes, including nursing home beds in hospital facilities, must now test in accordance with the requirements published by the federal Centers for Medicare & Medicaid Services (CMS) in QSO-20-38-NH (the federal requirements) and as established in this Order.

What Changes:

Hospitals with Nursing Home Beds will need to report testing detail into the COVID-19 Testing: Nursing Home Reporting Portal beginning with Reporting Period 4.

Guidance for Enrolling is Available Here in "Starter Kit."

Nursing Home
Facility
Enrollment

Register a Nursing Home

Outbreak Testing

What Secretarial Order No. 4 Requires:

For Nursing Homes in Which There Is One or More Positive Case(s)
Consistent with CDC recommendations and aligned with federal requirements, nursing homes with one or more positive case(s) will test residents *and* staff at least weekly. Facilities will continue to test residents and staff at least weekly until "testing identifies no new cases of COVID-19 infection among staff or residents for a period of at least 14 days since the most recent positive result" after which, the facility will resume Routine Staff Testing as described in this Order.

What Changes (in Reporting)

- Federal requirement requires testing every "3-7 days" so if facility tests more frequently than weekly, facility encouraged to reflect in Portal submission.
- Note: DHHS will be issuing additional clarification about "Outbreak" definition.

Routine/Surveillance Testing

For Nursing Homes Conducting Routine Staff Testing

Federal requirements establish Routine Testing Intervals based on the facility's county positivity rate. This Order adopts this federal standard to determine required testing frequency under this Order. Nursing homes shall test all staff who have the potential for direct or indirect exposure to patients with a frequency based on their county's Community COVID-19 Activity Level extracted from Table 2 in *QSO-20-38-NH*, copied below. As noted in *QSO-20-38-NH*, a county's Community COVID-19 Activity level is determined by its county positivity rate. This data are available on the federal webpage, CMS COVID-19 Nursing Home Data, under the COVID-19 Testing section.

Table 2: Routine Testing Intervals Vary by Community COVID-19 Activity Level

Community COVID-19 Activity	County Positivity Rate in the past week	Minimum Testing Frequency
Low	<5%	Once a month
Medium	5% - 10%	Once a week*
High	>10%	Twice a week*

*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours.

A facility will evaluate and apply its county's positivity rate on a schedule and with a frequency specified in *QSO-20-38-NH*.

Routine/Surveillance Testing

- Secretarial Order No. 4 modifies Secretarial Order No. 2's bi-weekly survey/routine testing schedule to align with the Routine Testing Interval table established in *QSO-20-38-NH*.
- Portal has been modified to accommodate this change.

Outbreak Facilities in High Activity Counties

What Secretarial Order No. 4 Requires:

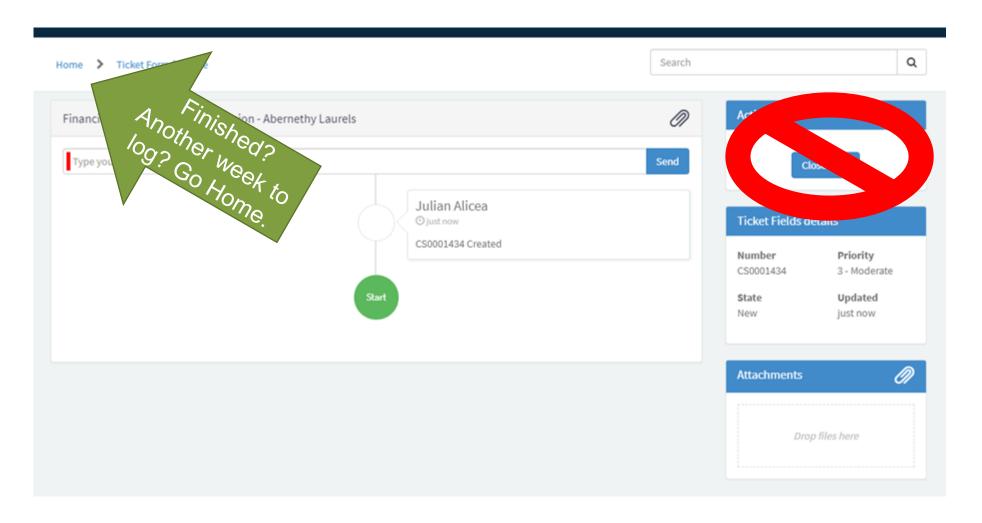**Clarification on Applicable Testing Interval**

If a facility has one or more positive case(s) and is in a county with a High Community COVID-19 Activity level, the nursing home will adhere to the more rigorous testing schedule (twice a week).

What Changes (in Reporting)

- Portal will now accommodate Community Activity Level.
- If a facility is in Outbreak status and in county with a High Community Activity Level, facility will enter "2 rounds" of data for that testing week, one for each testing round.

Tour of Updates in Portal

Reminder: Once Submitted, Where Do I Go?

Reporting Frequency

Facilities will still report updates through Portal following the Reporting Period schedule, which requires reporting every other week.

- To be counted in analysis, facilities in Low Activity counties need to provide status update (not necessarily conduct testing) each reporting period.
- Reporting Periods have been extended through November.
- To streamline the reporting process, nursing homes are strongly encouraged to align their monitoring schedule of the applicable county positivity rate with the reporting period.

Date	Related Activities
Thursday, 9/24/2020	Office Hours 2.0* (10:00-11:00) *note time change from earlier sessions
Monday, 9/28/2020	Reporting Period 4 (under SO No. 4) Begins Testing weeks: 9/28/2020-10/4/2020 and 10/5/2020-10/11/2020
Thursday, 10/1/2020	Office Hours (10:00-11:00)
Monday, 10/5/2020	Due Date: Reporting Period 3 Testing Activity Testing weeks 9/14-9/20 & 9/21-9/27 (Compliance analysis will align with Secretarial Order No. 2)
Thursday, 10/8/2020	Office Hours (10:00-11:00)
Monday, 10/12/2020	Reporting Period 5 (under SO No. 4) Begins Testing Weeks: 10/12/2020-10/18/2020 and 10/19/2020-10/25/2020
Monday, 10/19/2020	Due Date: Reporting Period 4 Testing Activity
Monday, 10/26/2020	Reporting Period 6 (under SO No.4) Begins Testing Weeks: 10/26/2020-11/1/2020 and 11/2/2020-11/8/2020
Monday, 11/2/2020	Due Date: Reporting Period 5 Testing Activity
Monday, 11/9/2020	Reporting Period 7 (under SO No. 4) Begins Testing Weeks: 11/9/2020-11/15/2020 and 11/16/2020-11/22/2020
Monday, 11/16/2020	Due Date: Reporting Period 6 Testing Activity
Additional reporting periods may be established depending on status of Secretarial Order No.4	
Monday, 11/30/2020	Due Date: Reporting Period 7 Testing Activity

Financial Reporting Update

- **Secretarial Order No. 4 continues CARES Act Funding**

Section IV. Funding

Under Secretarial Order No. 2, DHHS allocated $25M of CARES Act (P.L 116-136) funding to support nursing homes with required staff testing. While subject to funding availability, this resource remains available to fund testing requirements covered under the prior Secretarial Order No. 2, including all staff in combination facilities as defined by DHHS that have assisted living/adult care home licensed beds within the same building as nursing home licensed beds. Nursing home providers are strongly encouraged to seek any additional support needed through the federal Provider Relief Fund or other payment mechanism.

- **Point of Care Testing Functionality**
  - Will provide overview next Office Hours.
  - Please hold POC testing invoices if not otherwise submitted.

Next Session

- A note about invitation/registration link.

- Priority discussions:
    - Financial Reporting and Payment updates.
    - Update on visitation policy.

Questions and Answers

Appendix

Accessing Your Facility's Community COVID-19 Activity Level

The Community COVID-19 Activity Level Testing Requirement was first communicated on pages 4 and 5 (and in Table 2) in CMS's QSO-20-38-NH memo, dated 8/26/2020.

Routine Testing of Staff
Routine testing should be based on the extent of the virus in the community, therefore facilities should use their county positivity rate in the prior week as the trigger for staff testing frequency. Reports of COVID-19 county-level positivity rates will be available on the following website by August 28, 2020 (see section titled, "COVID-19 Testing"): https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg

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Table 2: Routine Testing Intervals Vary by Community COVID-19 Activity Level

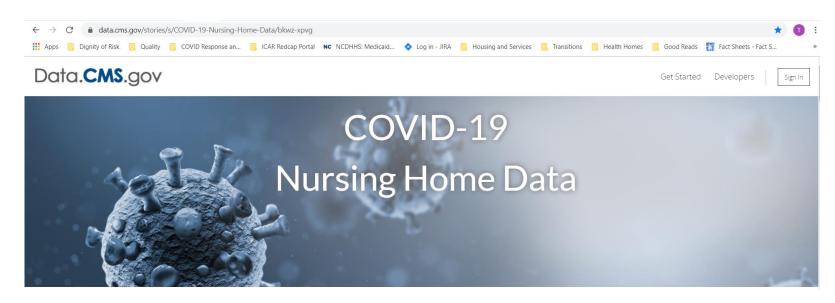| Community COVID-19 Activity	County Positivity Rate in the past week	Minimum Testing Frequency
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*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours.

If the 48-hour turn-around time cannot be met due to community testing supply shortages, limited access or inability of laboratories to process tests within 48 hours, the facility should have documentation of its efforts to obtain quick turnaround test results with the identified laboratory or laboratories and contact with the local and state health departments.

The facility should begin testing all staff at the frequency prescribed in the Routine Testing table based on the county positivity rate reported in the past week. Facilities should monitor their county positivity rate every other week (e.g., first and third Monday of every month) and adjust the frequency of performing staff testing according to the table above.

Accessing Your Facility's Community COVID-19 Activity Level

QSO reference a link on page 4 where Community Activity Level is housed, on COVID-19 Nursing Home Data website, under COVID-19 Testing header

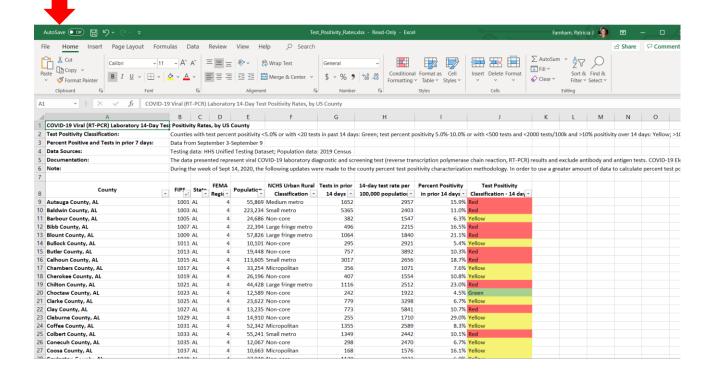https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg

COVID-19 Testing

As part of CMS' commitment to protecting nursing home residents, and to boost the surveillance of COVID-19, nursing homes are now required to conduct testing of residents and staff. More information about these requirements and guidelines can be found here. These guidelines include testing staff on a certain frequency based on the COVID-19 positivity rate for the county the nursing home resides in. Rates of county positivity are posted here. (Archive is here.) Facilities should monitor these rates every other week and adjust staff testing accordingly.

Accessing Your Facility's Community COVID-19 Activity Level

Clicking the circled "here" will download the most current Community Activity Levels by County.

Accessing Your Facility's Community COVID-19 Activity Level

If you Sort by "State" for NC, you will see all NC's Counties.