NC Department of Health and Human Services

COVID-19 Testing:
Reporting under Secretarial Order #2

Part 1 of 2

August 17, 2020
Overview of Sessions This Week

Today:
- Overview of Secretarial Order #2
- Overview of Testing Reporting Requirements
- Overview of Funding Availability

Friday, 8/21/2020
- Additional detail related to payment processing and related documentation.
- “Tour” of Reporting Tool

Testing-specific questions will be deferred until NC AHEC Long Term Care Call on Thursday (see Resources for registration link).
Secretarial Order #2: Why?

- COVID-related deaths in nursing homes account for over 40% of all COVID deaths in NC.
- Testing to detect transmission early.

Data pulled 8/16/2020 from NC DHHS Dashboards: Total deaths: 2347, nursing home deaths: 966
Secretarial Order #2: Overview

- Applies to nursing homes only.
- Requires bi-weekly (every other week) testing of all staff and related reporting.
- Requires facilities with newly identified positive cases/in Outbreak status follow DHHS testing guidance, which includes weekly testing of staff and residents and related reporting.
- Commits CARES Act funding to assisting with staff testing costs.
- Order went into effect August 7, 2020 and in effect until September 22, 2020 but subject to extension.
Facilities Covered under Secretarial Order #2

- Nursing homes regulated by NC Division of Health Services Regulations’ Nursing Home Licensure and Certification section.
- This includes:
  - Facilities that do not participate in Medicaid and/or Medicare programs.
  - Combination facilities that have HAL/ACH licensed beds within the same building as nursing home licensed beds.
  - Hospital-affiliated nursing homes and rehabilitation centers.
  - State neuro-medical centers under Division of State Operated Healthcare Facilities (DSO HF).
The Scope of Secretarial Order #2

Secretarial Order #2

- Bi-weekly staff testing (Serial Testing)
- Weekly testing of staff (if positive case newly identified or in Outbreak status)

Covered by Reporting Requirements

- Weekly testing of residents (if positive case newly identified or in Outbreak status)

Funding support available through CARES Act

Funding covered through resident’s health plan or other resources.
Defining “Staff” Covered under Secretarial Order #2

- Refers to health care personnel that are employees, contractors, volunteers of the facility.

- CDC’s Health Care Professional (HCP)’s definition.

  HCP refers to all paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances (e.g., blood, tissue, and specific body fluids); contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. HCP include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, contractual staff not employed by the healthcare facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the healthcare setting (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel). For this guidance, HCP does not include clinical laboratory personnel.

- All HCPs within the Facility’s authority are under the scope of Secretarial Order #2.
Who is Outside the Scope of Secretarial Order #2?

- “Facilities do not need to test staff that have tested positive in the 3 months prior to the most recent round of testing and are currently asymptomatic.”*

- Combination facility staff that work exclusively with residents in HAL/ACH-licensed wing.

- HCPs who are not under the facility’s authority/purview (e.g. paramedics)

* Excerpt from Secretarial Order #2
Funding Available Under Secretarial Order #2
CARES Act Funding Overview

- Only available for staff testing, but available for both bi-weekly and weekly testing, as required.
- Funding available for covered nursing homes, even if not currently participating in Medicaid/Medicare programs.
- Funding available to cover eligible testing activity on or after August 7, 2020, subject to funding availability.
- Amount allocated per test: $125

Financial Reporting
- Must report total # tested & cost for each reporting period
- Must provide vendor-specific detail (supported by uploaded detailed invoices, which may lag)
- Detail must include Date of Service (DOS) for each test performed.
Reporting: Process and Data to Be Collected

* Excerpt from Secretarial Order #2
Goals of Testing Reporting

Collect only what’s necessary:
• to inform future testing strategy.
• to track “substantial compliance” with Secretarial Order #2.
• to have necessary supporting documentation for CARES Act funding.
• to provide “real time” dashboards on related activity.

Create a process that:
• Is clear for providers.
• Covers various ownership and reporting submission dynamics.
• Allows for testing and financial reporting to be submitted separately.
• Automates data entry and data tracking wherever possible.
• Can be sustained into future months if needed.

* Excerpt from Secretarial Order #2
Reporting Timelines

Starting with testing conducted August 17, 2020, providers will report applicable testing under “Reporting Periods.”

Reporting periods cover 2 weeks. Providers will be able to report on 1 or both weeks, depending on circumstance.

Week timeframe: Monday-Sunday

Reporting for a reporting period is due one week after the reporting period ends (or next business day).

Example:

<table>
<thead>
<tr>
<th>Reporting Period (Mon-Sun)</th>
<th>Weeks Covered</th>
<th>Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>8/17-8/23</td>
<td>9/8/2020</td>
</tr>
<tr>
<td></td>
<td>8/24-8/30</td>
<td></td>
</tr>
</tbody>
</table>
Report Content Divided Into 3 Sections

Section 1: Facility Information

Section 2: Testing Reporting

Section 3: Invoice/Financial Reporting

* Excerpt from Secretarial Order #2
Section 1: Facility Information

• Facility Information will provide drop down options.
• Will “re-populate” for future entries: should only have to enter one time.
• Will accommodate single facility reporting and one user reporting on multiple facilities.
• Only registered users/ will be able to enter information
### Section 1: Facility Information

<table>
<thead>
<tr>
<th>Data Elements</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name/Address of Tested Facility</td>
<td></td>
</tr>
<tr>
<td>Licensee</td>
<td></td>
</tr>
<tr>
<td>License Number</td>
<td></td>
</tr>
<tr>
<td>NPI</td>
<td></td>
</tr>
<tr>
<td>Combination Facility Status</td>
<td></td>
</tr>
<tr>
<td>Licensed Bed Counts</td>
<td></td>
</tr>
<tr>
<td>Contact information of staffer entering data</td>
<td></td>
</tr>
</tbody>
</table>
Section 2: Testing Reporting

• Summary level only.

• Accommodates both bi-weekly testing and weekly testing reporting (in the event of a newly identified positive case/Outbreak).
  – Only required to complete fields applicable to status.

• Requests summary level testing outcome information (“Did testing result in newly identified positive cases this reporting period?”) but does not require reporting test results with week’s test count.

• Will accommodate “change in status” during reporting period.
### Section 2: Testing Reporting

<table>
<thead>
<tr>
<th>Data Elements Tracked if No Newly Identified Positive Cases/Outbreak</th>
<th>Data Elements Tracked Newly Identified Positive Cases/Outbreak</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff/HCP Census for Reporting Period</td>
<td># of Residents Tested</td>
</tr>
<tr>
<td>Resident Census for Reporting Period</td>
<td>Date of positive test that triggered weekly testing</td>
</tr>
<tr>
<td># of Staff/HCPs Tested for Reporting Period</td>
<td>Date Outbreak confirmed by LHD</td>
</tr>
<tr>
<td>Did testing result in newly identified positive case?</td>
<td>Date Outbreak concluded (if applicable)</td>
</tr>
<tr>
<td></td>
<td>Free text narrative to describe testing strategy and any necessary explanation of data</td>
</tr>
<tr>
<td></td>
<td>Attestation</td>
</tr>
</tbody>
</table>
Section 3: Financial Reporting/Documentation

• Can be completed by different user than testing reporting section.

• Enables user to submit data necessary under CARES Act requirements and for payment.

• Will be able to upload multiple documents into reporting platform--no emailing required.
### Preliminary Data Elements*

<table>
<thead>
<tr>
<th>Vendor Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Testing Dates of Service Covered</td>
</tr>
<tr>
<td>Tests Performed</td>
</tr>
<tr>
<td>Reference number</td>
</tr>
</tbody>
</table>

* Subject to modification pending the final confirmation of data requirements necessary to comply with CARES Act audit requirements.
Attestation

- 2 short attestations: 1 for Testing Reporting submission and 1 for Financial Reporting submission.

- Attesting to substantial compliance with Secretarial Order #2, good faith submission (truthful and accurate to best of submitter’s knowledge) and adherence with guidance provided.

- Requires naming of executive level administrator providing the authority to submit reports.

* Excerpt from Secretarial Order #2
* Web-based platform.
  * Requires one-time registration for each user.
  * NC DHHS anticipates each facility will have between 1 and 3 internal users.
  * Will distribute registration portal and registration code to training attendees and to larger nursing home listserv.
Resources

• Training materials will be housed both on NC Medicaid’s site (see link) and within Service Now as “Knowledge Articles.”

• FAQs in development and will be shared on Thursday’s NC AHEC’s COVID-19 Update for Long-term Care Settings
  – NC AHEC THURSDAY, AUGUST 20
    FROM 10 A.M. TO 11 A.M.
  – Registration through: https://www.ncahec.net/covid-19/webinars/
  – Join the Zoom meeting room on your computer, or dial-in at (646) 558-8656 using webinar ID 997-9499-7344.

Office Hours

• DHHS will host voluntary “Office Hours” to provide reporting guidance and technical assistance.

• Occur Thursdays, 10:30-11:30a
  – 8/27/2020
  – 9/3/2020
  – 9/10/2020
  – 9/17/2020

• To register, please visit: https://attendee.gotowebinar.com/register/6373135940969598219
Next Steps

• Please attend Friday, 8/21/20 Part 2 session.

• Please be on the look out for a registration link and code from Medicaid.ProviderReimbursements@dhhs.nc.gov

• When receive link, please register as a portal user by completing a registration form that will look similar to this.

• Platform will go live on 8/24/2020
Questions?

Please submit to Medicaid.ProviderReimbursement@dhhs.nc.gov