



GREATER NEW YORK HEALTH CARE FACILITIES ASSOCIATION

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Memo 20-31

To: Administrator, DNS, Medical Director, Infection Preventionist and QA Committee

From: Mary Gracey-White RN, Director of Regulatory Compliance

Date: August 28, 2020

Re: Member Updates

GNYHCFA received confirmation that the Federal government announced it has now distributed almost \$2.5 billion of a [planned \\$5 billion](#) distribution to nursing homes to support increased testing, staffing, and personal protective equipment (PPE) needs. New York's 612 Nursing Facilities will receive \$171,907,200. These payments are based on \$10,000 lump sum and an additional \$1,450/ per bed. Providers will have to complete an attestation for the funds within 90 days. This attestation can be accessed via : <https://cares.linkhealth.com/> .

This distribution of almost \$2.5 billion in additional funding to over 15,000 nursing homes nationwide supplements the [\\$4.9 billion](#) that was previously distributed to skilled nursing facilities. **HHS plans on distributing another \$2 billion to nursing homes later this fall based on certain performance indicators that will be shared in the future.**

To further support nursing homes, the Agency for Healthcare Research and Quality (AHRQ) will be partnering with America's nursing homes to create the National Nursing Home COVID Action Network. Through the Network, AHRQ will offer training, and mentorship to the approximately 15,400 nursing homes across the country to supplement efforts aimed at protecting residents and staff. Outlined in GNYHCFA email blast on August 27th, CMS with State QIO has also provided information on key trainings for Nursing Home Infection Prevention Training that can be accessed at <https://qsep.cms.gov/welcome.aspx> . The CMS Targeted COVID-19 Training for Frontline Nursing Home Staff & Management is available now, with five specific modules designed for frontline clinical staff and 10 designed for nursing home management. The training will be available on the CMS [Quality, Safety & Education Portal](#).

The HHS press release can be found here: <https://www.hhs.gov/about/news/2020/08/27/trump-administration-announces-2-5-billion-to-nursing-homes-for-covid-19-relief-funding.html>



GNYHCFA has received confirmation from the NYSDOH that the Antigen tests/equipment distributed by CMS are categorized as a “waived” test and would require that the nursing home be approved as a limited service laboratory. As most nursing homes in New York already have been approved as a limited service laboratory facility would need to contact the Clinical Laboratory Evaluation Program (CLEP) to **add the test** and be informed of reporting requirements. This can be done by emailing clepltd@health.ny.gov.

As outlined in the interim guidance by the CDC regarding antigen testing” Negative results should generally be treated as presumptive, do not rule out SARS-CoV-2 infection and should not be used as the sole basis for treatment or patient management decisions, including infection control decisions. If necessary, confirmation with a molecular assay for patient management may be performed. Negative results should be considered in the context of a patient’s recent exposures, history, and the presence of clinical signs and symptoms consistent with COVID-19” https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html#anchor_1597521649237

In addition, we are attaching CMS Memo 20-38 regarding testing requirements and the revised Covid survey tool that added testing requirements to the surveys. The CMS guidance outlines testing frequency of staff and resident testing based on community transmission outlined below:

Table 1: Testing Summary

Symptomatic individual Staff with signs and Residents with signs and identified symptoms must be tested symptoms must be tested

Testing Trigger	Staff	Residents
Symptomatic individual identified	Staff with signs and symptoms must be tested	Residents with signs and symptoms must be tested
Outbreak (Any new case arises in facility)	Test all staff that previously tested negative until no new cases are identified*	Test all residents that previously tested negative until no new cases are identified*
Routine testing	According to Table 2 below	Not recommended, unless the resident leaves the facility routinely.

*For outbreak testing, all staff and residents should be tested, and all staff and residents that tested negative should be retested every 3 days to 7 days 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. For more information, please review the section below titled, “Testing of Staff and Residents in Response to an Outbreak.”



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.**

The Association has requested and is awaiting further guidance from NYSDOH regarding Covid 19 testing including the use of Antigen testing. Please contact us if you need more information and/or email nursinghometesting@health.ny.gov. for questions relating to Covid 19 testing.