



Safe and Calm

LeadingAge Michigan's Response to the
COVID-19 Pandemic
March 25, 2020

A blue square sign with a white crown icon at the top. Below the crown, the text "KEEP CALM AND STAY SAFE" is written in white, bold, sans-serif capital letters. At the bottom right corner of the sign, the text "keep-calm.net" is written in a very small font.

KEEP
CALM
AND
STAY
SAFE

keep-calm.net

Safe and Calm - Purpose



- Provide easy access to pertinent materials – LeadingAge Michigan staff will be reviewing new and updated materials on a daily basis; with a view to limit duplication and unrelated materials
- To keep our member community updated on a daily basis about current spread of the disease with a focus on Michigan
- Noting that the operational issues will be paramount – to identify ways to share ideas and challenges, best practices with a view to standardize care as much as possible. Creating care models based on standards will be critical for any future legal issues.
- To elicit from members ideas about their needs to inform our advocacy here in Lansing

Forum Agenda

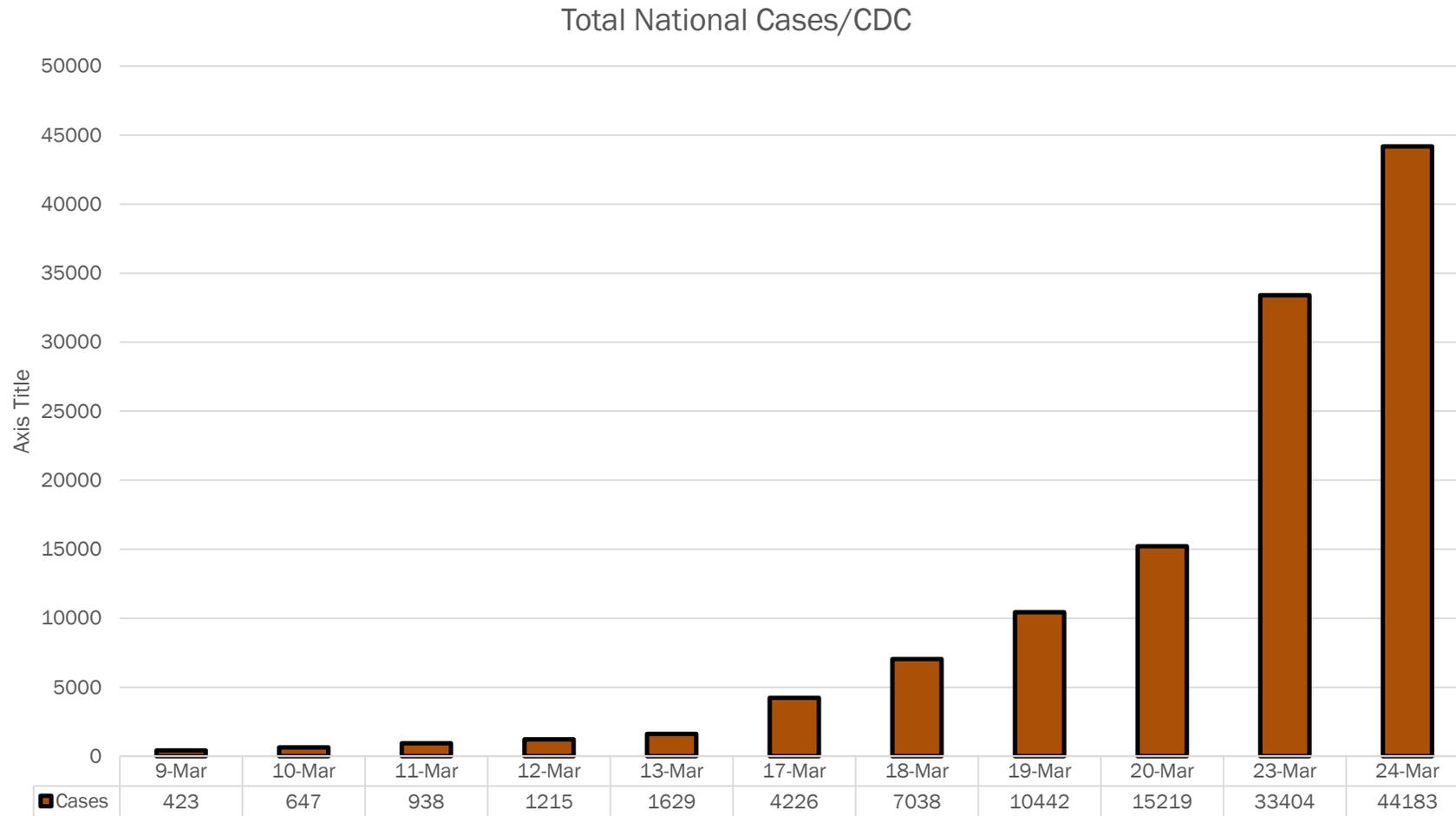
- *National and Michigan current situation*
- *LeadingAge Michigan Advocacy*
- *Updated Resources*
- *Member challenges and sharing*
- *Member Discussion*
- *Input and comments as to resource needs, what is helpful*



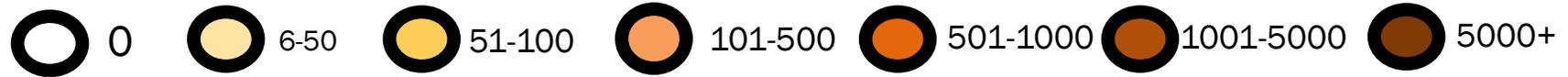
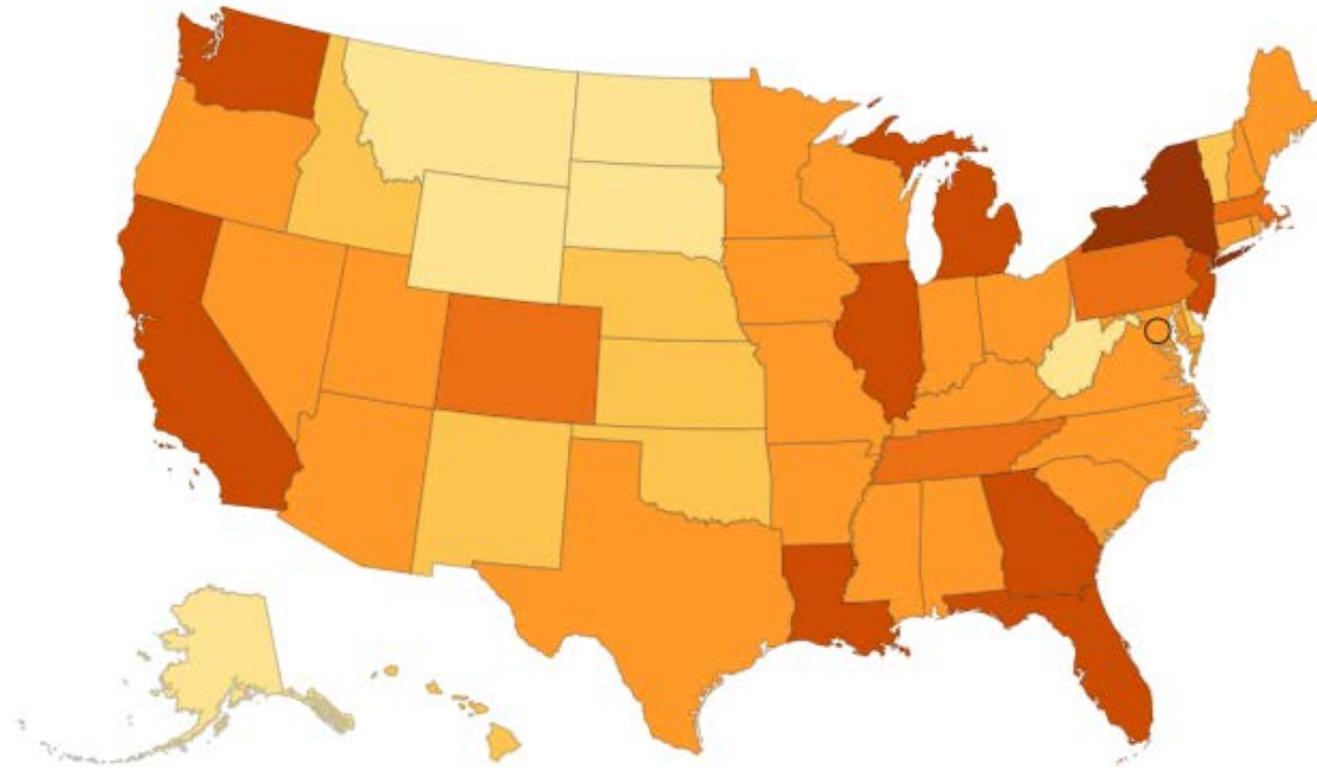
National And Michigan Current Situation

3/25/2020

National Report History



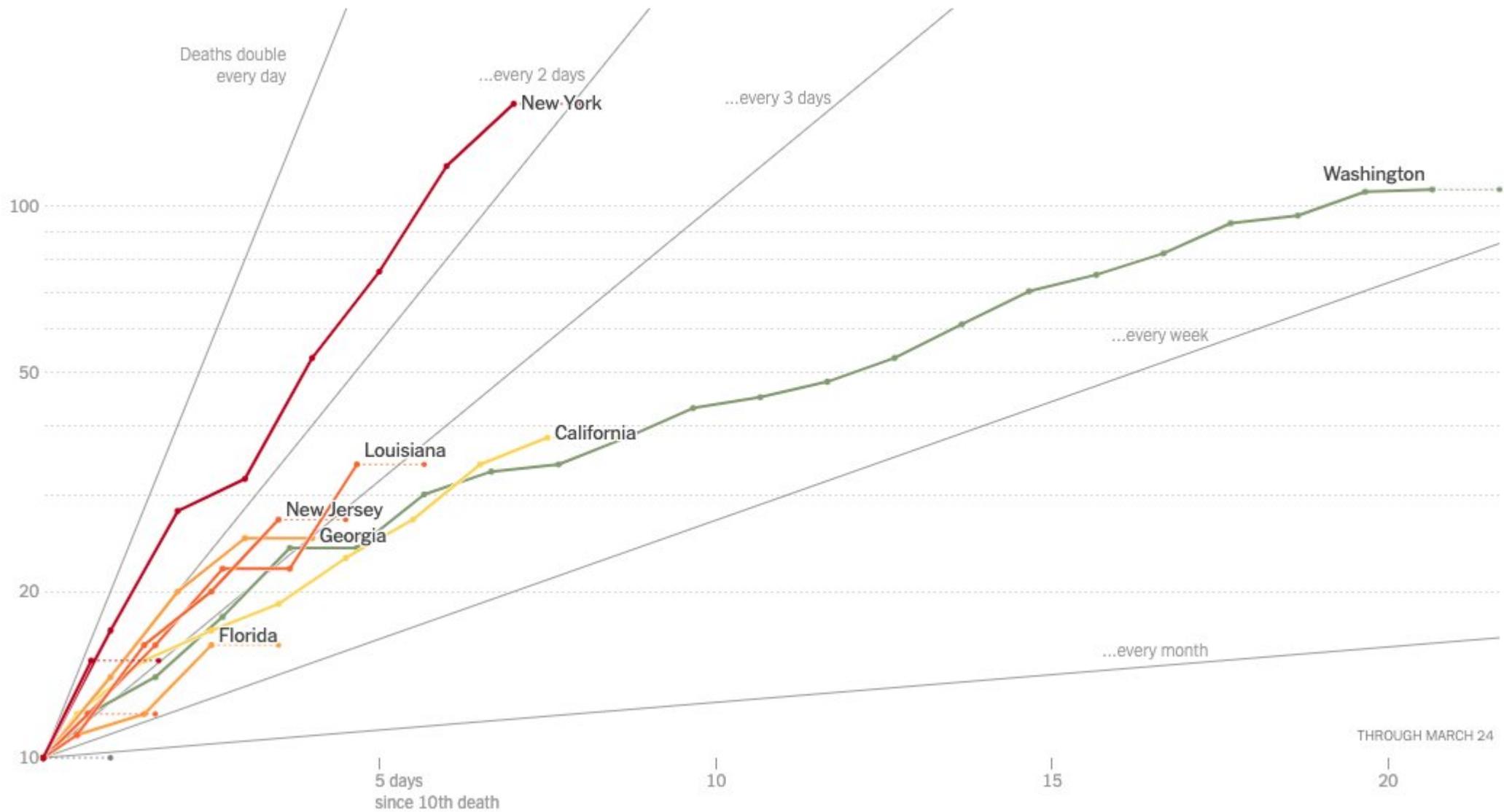
As of March 24, 2020



Deaths by state for states with at least 10 deaths

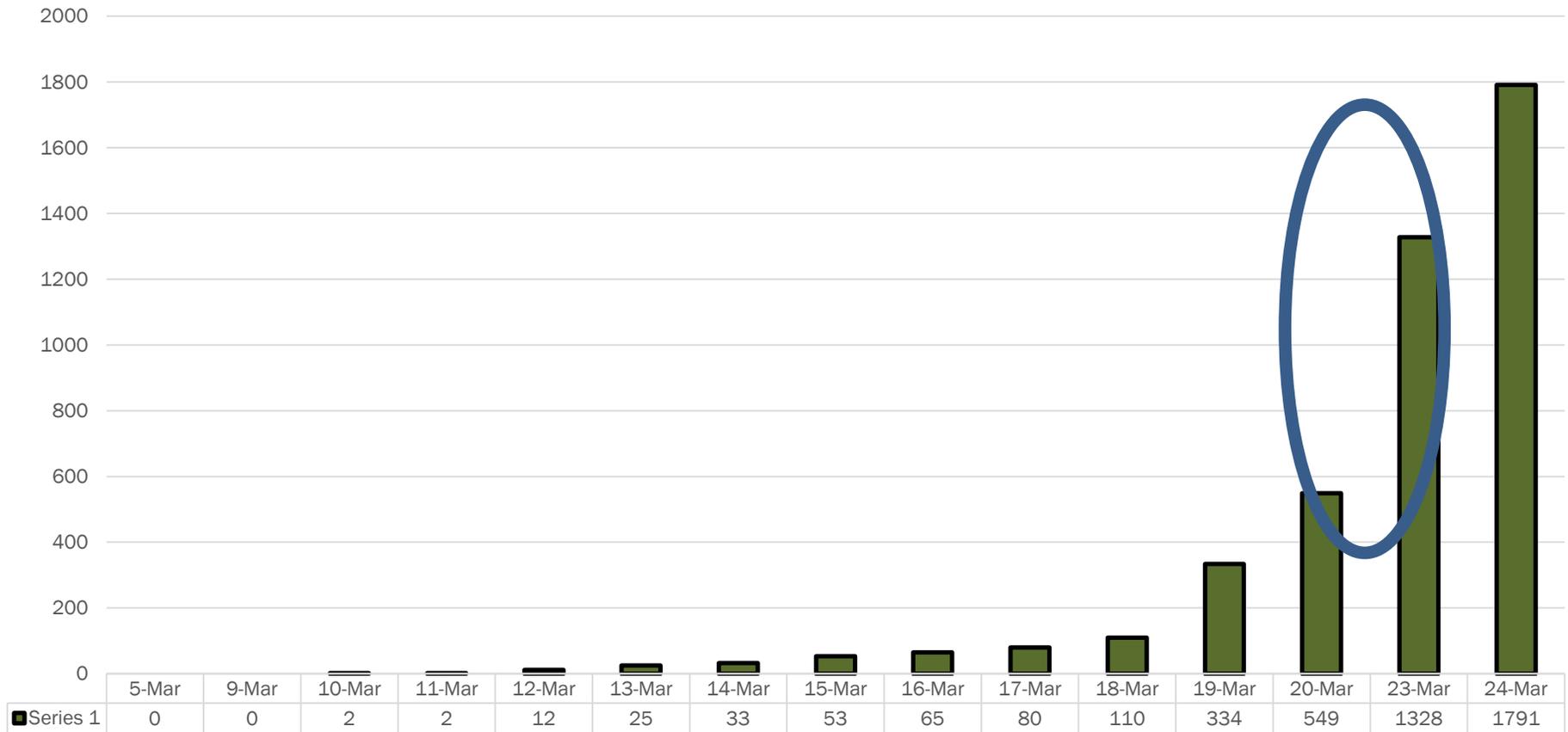
— Reported Partial (today)

Doubling time, in days

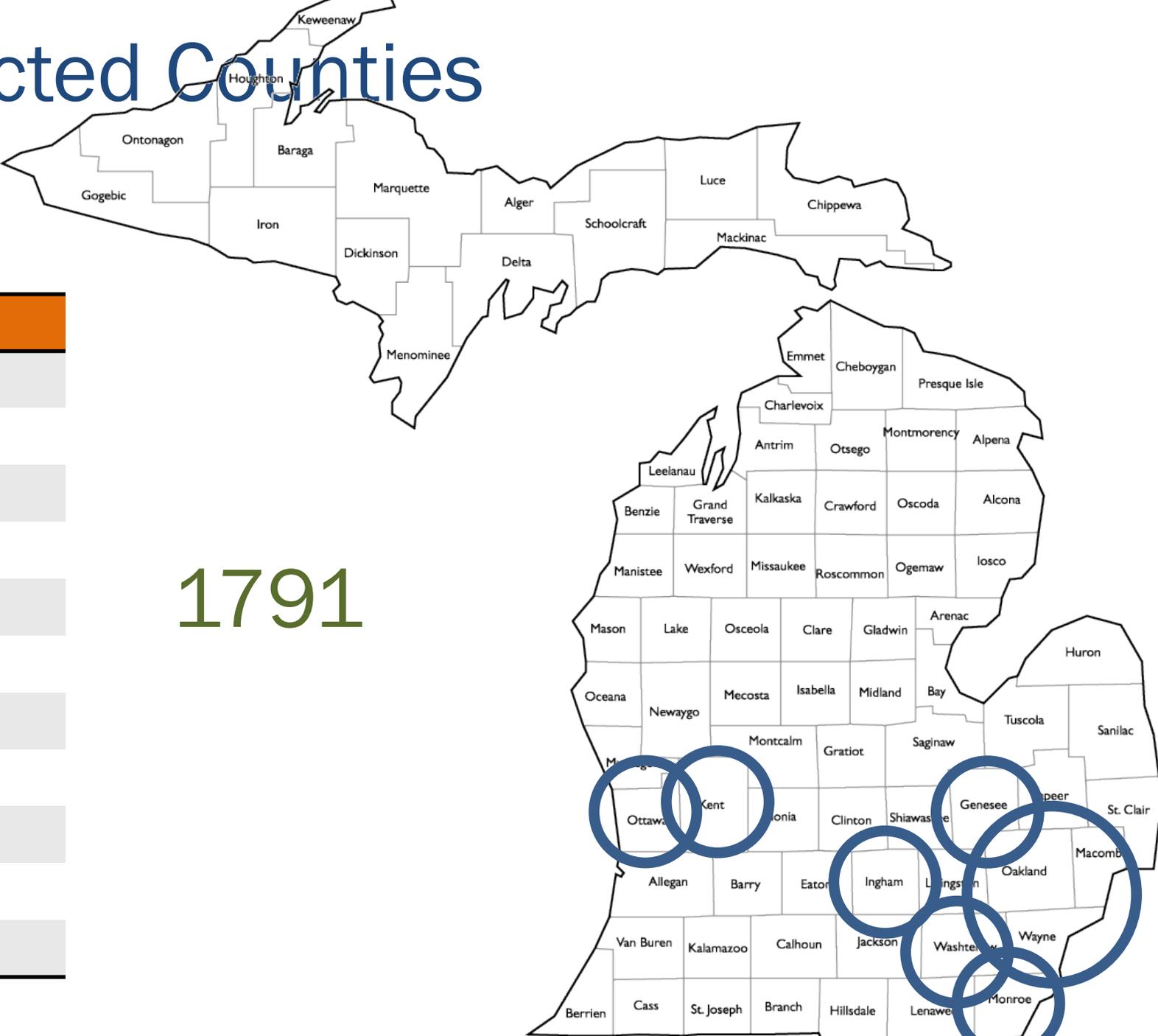


THROUGH MARCH 24

Michigan Total Positive COVID -19 Cases per MDHHS



Michigan Affected Counties



42 Counties

Wayne - 873 (563)

Oakland - 428

Macomb - Macomb 225

Three County Total - 1526

85%

Washtenaw - 50

Genesee - 34

Kent - 31

Ingham - 15

Ottawa - 15

Monroe - 12

1791

LeadingAge Michigan Advocacy

March 25, 2020

State is NOT Going Far Enough

LTSS Unmet Needs

- In anticipation of serving the increasing COVID-19 cases across the health care system, we will need access to PPE. We believe the state can work to improve availability – otherwise LTSS providers will not be able to take care of affected patients. Manufacturers are stepping up.
- Use of current beds – especially nursing homes. MDLARA has the ability to remove barriers to access licensed settings. MDHHS is sending out a memo shortly about using unavailable beds. Providers will not be able to increase their size beyond their current licensure.
- Waiver of pre-employment requirements and specific position requirements/abbreviated training. Flexibility in assignments



State is NOT Going Far Enough



LTSS Unmet Needs

- Temporary wage pass throughs for Medicaid programs to assist in attracting staff and sustain quality operations
- Cease work toward nursing home rate cuts associated with new reimbursement system scheduled for 10/1
- **Question to Participants – what other PRIORITY issues do we need to advocate for....????**

Using State Waivers as Leverage

- CMS approved Florida's emergency Medicaid waiver request
 - *Fast Track provider enrollment*
 - *Waive some Medicaid preauthorization requirements*
 - *Waiver pre-admission screening for 30 days*
 - *Provide care in alternate settings*
 - *Temporarily delay Medicaid hearings and decisions*
- Pennsylvania
 - *Waiving their SNF staffing minimum requirements – 2.7 hours PPD*
 - *Waiving Personal Care Home and AL staffing requirements as long as providing adequate quality of care*
 - *Providers must notify when staffing drops below the minimum*
 - *Provides flexibility for individuals to perform certain tasks with abbreviated, focused training. Does not extend to functions covered under licensure.*
 - *Permits immediate licensure for nurses licensed in other states*
 - *Did not permit LTSS provider staff to bring child care onsite*

Resource Updates

3/25/2020

Family First Coronavirus Response Act

- Emergency Paid Sick Leave Act/ Effective April 2
- FMLA: Emergency Family and Medical Leave Expansion Act
- The Bill provides for credits against the employer's payroll taxes equal to 100% of the qualified family leave wages and paid sick leave wages paid by an employer
- Expect details from both the Department of Labor and the Department of Treasury

Emergency Paid Sick Leave Act

Through December 31, 2020

Paid sick leave for persons who cannot work because of

- Subject to government quarantine or isolation order related to COVID-19
- Advised by healthcare provider to self-quarantine
- Experiencing symptoms and seeking medical diagnosis
- Caring for individual who is quarantined or isolation due to the virus; caring for child when schools closed
- Experiencing any other substantially similar condition specified by HHS

Covered Employers

- Employers with under 500 employees must comply.
- Employers with under 50 employees can ask for an exemption where complying would jeopardize the business as a going concern. Expect details from the Department of Labor
- Employers may exclude from coverage, as is current FLMA law, “health care provider” employees, currently limited to MDs, Nurse Practitioners, midwives, clinical social workers.

Eligibility

- Employees are immediately eligible (no waiting period after hire)
- Full time employees entitled to 80 hours; part-time based on average hours worked over 2-week period.
- This sick leave provision is not carried over, and is not available to be paid out if not used.
- Pay is at employee's regular rate with max of \$511 per day and \$5,110 in aggregate for leave due to quarantine, advised by medical provider, or having symptoms and seeking medical diagnosis
- 2/3 of pay up to \$2000 for caring for someone else.

Emergency Family and Medical Leave Expansion Act

- Employees covered: those who have been employed for at least 30 days based on having a qualified need relating to the public health emergency: employee must be unable to work or telework because of need to care for child under 18 if school or care place has been closed and child care is unavailable
- Employers covered – those with fewer than 500 employees
- Same provisions as for paid sick leave for excluded employees and exemptions for small business

Emergency Family and Medical Leave Expansion Act

- Eligibility: first ten days of leave under this expanded definition (caring for a child at home) is unpaid
- Employee can substitute any unused paid leave time in lieu of unpaid leave
- Pay rate about 2/3 of current pay, not to exceed \$200/day or \$10,000 aggregate
- Available for the 12 weeks currently in FMLA

Questions?



“I spent 2 years in nursing school. There was 3 months of anatomy, 3 months of clinical and 18 months learning how to wash our hands properly.”

Resources for LTSS

- Infectious Disease Society of America Offers [Testing Recommendations](#) - *Posted 3/20/2020*
- MDLARA Issues [Guidance](#) for Healthcare Workers - *Posted 3/23/2020*
- CDC Updates - [Retirement Communities & Independent Living](#) and [Interim Guidance for Businesses and Employers](#) - *Posted 3/23/2020*
- Governor Whitmer Orders Sheltering in Place for Michigan - [EO 2020-21](#) and [Summary](#) - *Posted 3/23/2020*
- [Resources](#) for State Agencies for Medicaid Home and Community Based Services- *Posted 3/24/2020*
- Kaiser Health [News and Testing Decisions](#) - *Posted 3/24/2020*
- CMS Announces Focused Surveys for Acute and Continuing Care Providers - [QSO-20-20-All](#) and [LeadingAge Michigan's Summary](#) - *Posted 3/24/2020*

Blanket Waivers to Date

- **Section 1812(f)**: This waiver of the requirement for a 3-day prior hospitalization for coverage of a SNF stay provides temporary emergency coverage of SNF services without a qualifying hospital stay, for those people who are evacuated, transferred, or otherwise dislocated as a result of the effect of disaster or emergency. In addition, for certain beneficiaries who recently exhausted their SNF benefits, it authorizes renewed SNF coverage without first having to start a new benefit period (Blanket waiver for all impacted facilities).
- **42 CFR 483.20**: This waiver provides relief to SNFs on the timeframe requirements for Minimum Data Set assessments and transmission (Blanket waiver for all impacted facilities).

QSO-20-20-ALL

- Focus on complaints/FRIs that triage at IJ level, targeted infection control surveys, and initial certifications
- Revisits suspended except for IJs
- DPNAs and per diem CMPs suspended
- Current onsite surveys will be terminated
- Surveyors must meet PPE expectations according to current CDC guidance or cannot enter a facility
- All other issues may be followed upon later

QSO-20-20-ALL

- Infection Control Surveys – unclear whether these are random or will be assigned based on Provider Support and Wellness Contacts
- Facilities expected to use the self-assessment tool – will be asked for during survey
- Consider
 - *Facility process for surveillance – tracking infections as they may emerge in the facility*
 - *Actions taken to obtain necessary supplies if there is a shortage/workarounds in policy and staff knowledge*
 - *Staff awareness of the individual status of the patients and what level of contact means*
 - *Cleaning protocols for reusable equipment*
 - *Emergency staffing plans – back up plans when essential staff become unavailable*
 - *Staff knowledge about how to obtain and who to contact to get necessary supplies*
 - *Environmental cleaning*
 - ***Screening – confusion over screening for travel***

Provider Support and Wellness Calls

- On behalf of the Bureau of Community and Health Systems within the Department of Licensing and Regulatory Affairs, we would like to inform you of the wellness checks we will be conducting for your facility.
- We are asking that you provide your survey team's manager the name of the point of contact and e-mail for your facility.
- The team manager will then assign the contact information to a survey team member who will reach out to schedule a phone call to review the completed questionnaire.

Provider Support and Wellness Calls

- Contact Person/Capacity/Estimated Census
- Do you have enough staff?
- Do you have enough essential supplies – food, linens, general cleaning, etc.?
- Do you have enough PPE – face masks, gloves, hand sanitizer?
- **Are there any other significant operational concerns you want to share with the state?**
- Did you implement restrictions on visitation as required by Executive Order 2020-6 and educate staff, residents, and family members on the restriction and available forms of communication?

Questions?



Use of Nursing Home Beds

- MDHHS is currently working on a provider letter that will allow for flexibility in use of beds, providing private rooms for Medicaid residents without prior approval, and access to non-available beds without a request – **in process/expected this week**
 - *Ability to place Medicaid patients in Medicare beds/ vice versa*
 - *Non available beds can be placed back into service – notification*
 - *Single room conversions/double room conversions*
 - *Cohorting regardless of distinct part requirements*
 - ***NO PARAMETERS TO MOVING BEYOND CURRENT NUMBER OF LICENSED BEDS FOR YOUR FACILITY***

Governor Executive Order 2020-13

- Effective immediately and until 4/15
- MDHHS and MLARA may take steps to ensure more persons receive care through emergency certificates of need.
 - *Waive or defer certain requirements to expedite bringing additional care facilities online. LARA can ensure there are enough providers and waive licensing, registration, and workflow requirements.*
 - *Any licensed hospital can construct, acquire or operate a temporary or mobile facility for any healthcare purpose, no matter location*
- **LARA may issue temporary registrations as certified nurse aides without examination requirements, valid for 28 days and can be renewed by LARA**
- LARA nurse license renewal granted whether requirements met
- LARA may recognize hours worked in COVID19 response as hours for CEUs
- Non nursing assistants such as activity coordinators, social workers, and volunteers may help to feed or transport patients consistent with their care plan.

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Governor Executive Order 2020-21

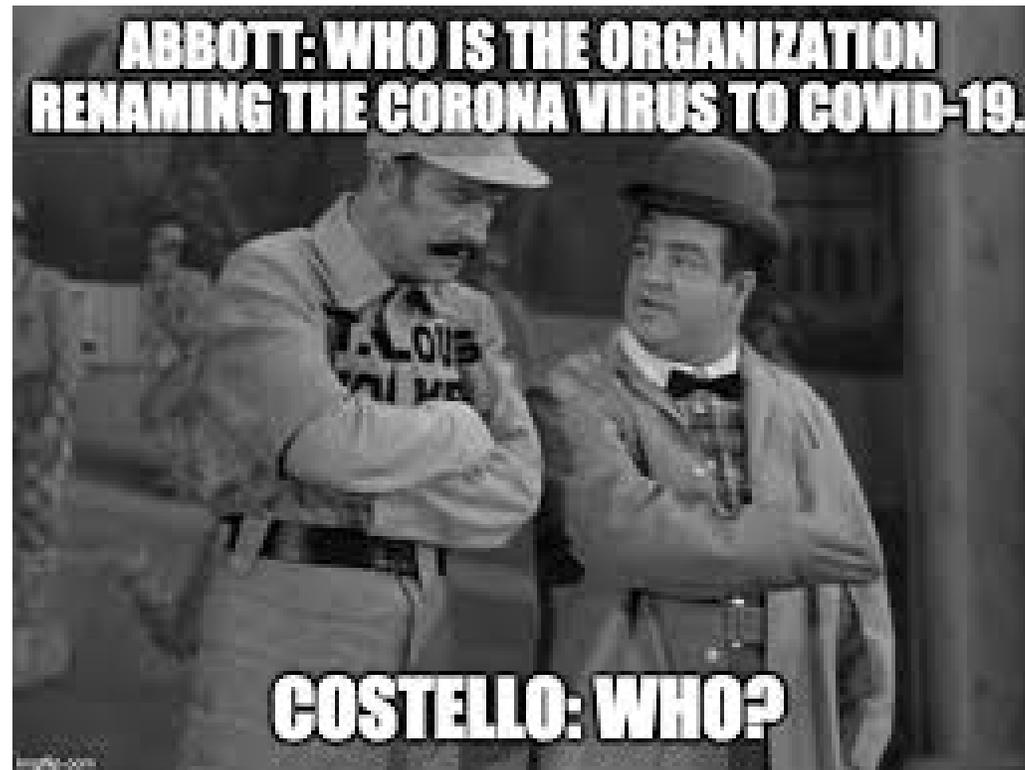
Highlights

- Businesses must determine which employees are considered essential and inform them...and must make such declarations in writing – may be made orally until March 31
- Adopting policies to prevent workers from entering the premises if they display respiratory symptoms or have had contact with a person who is known or suspected to have COVID-19.
- Keeping workers and patrons who are on premises at least six feet from one another to the maximum extent possible, including for customers who are standing in line.
- Increasing standards of facility cleaning and disinfection to limit worker and patron exposure to COVID-19, as well as adopting protocols to clean and disinfect in the event of a positive COVID-19 case in the workplace.

LeadingAge Michigan has created a specific email address for member questions, comment, and discussion regarding COVID-19 – safeandcalm@LeadingAgeMI.org. Our internal workgroup will use this communication to identify member concerns and challenges, advocate for consumer and provider needs, and disseminate best practices.



Questions



Staff Contacts



- Team Covering COVID-19 for LeadingAge Michigan
 - *Deanna Mitchell* – Deanna@LeadingAgeMI.org
 - *Laura Funsch* – LFunsch@LeadingAgeMI.org

- Members can contact any staff for questions and issues or utilize our dedicated email – safeandcalm@LeadingAgeMI.org

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