

COVID-19 Q&A - September 4, 2020

For the most recent CARES Act funds (10k plus 1,450 per bed, one of the options for spending the money is "Hiring staff,.., to provide patient care or administrative support". That is very broad. Any interpretive guidance you can offer? Will any wages paid to new hires this year to provide patient care qualify?

HHS has not issued guidance on definitions for any of the provider relief grants to date except through conversations with LeadingAge, who is currently in the process of defining what costs are acceptable. We will inform members when we have updated information; at this point the guidance is not specific.

Just to clarify. The point of care testing kits we received are still to only be used for symptomatic residents

The CDC, CMS, and FDA have all recommended point of care antigen testing as an alternative to weekly staff/resident PCR testing when laboratory response times exceed 48 hours. MDHHS last week came out with similar guidance last week. So use of these tests for asymptomatic screening is acceptable.

There is another unanswered question: Where do the IL communities with HFA waivers fall. As it relates to the executive orders.

We have continued to seek clarification about independent living communities and the executive orders since they were first included. We will continue to research these issues.

Does the reporting of a contractor also apply to the definition of 'facility staff' and who to include in weekly testing. So do we need to have our lab, vending machine stock persons, etc do weekly testing.

Contractors and vendors who visit the facility routinely (weekly) must be tested along with other staff. If they are being tested by others rather than the facility, the facility must have documentation of the weekly test results. The results of their tests must also be reported as if they were staff according to MDHHS.

For the new AL antigen machines, will we need a CLIA waiver?

We are not sure, but have submitted that question to CMS