

CHFS Surveillance COVID-19 Testing for Long-Term Care Facilities
Frequently Asked Questions
August 17, 2020

WHO

Who should the Provider arrange to have tested?

- 1) Each staff member (including agency staff, contracted health professionals and others who regularly enter the facility) at least bi-weekly;
 - a. Recommendation: test a cohort of one-half of the staff roster per week.
 - b. Recommendation: accept evidence of a negative test result performed by an eligible clinical laboratory at another site within the preceding seven (7) days.
- 2) Each resident who becomes COVID-19 symptomatic; and
- 3) ALL COVID-19-EXPOSED STAFF AND RESIDENTS when a new COVID-19-positive test result is reported for either a staff member or a resident, at least weekly until 14 days have passed from identification of the most recent positive result in a staff member or resident.
- 4) Work closely with both the local health department and Kentucky Department for Public Health's Healthcare-Associated Infections (HAI) staff to plan, execute and coordinate the response.
 - a. Local Health Departments, directory available at:
<https://chfs.ky.gov/agencies/dph/dafm/LHDInfo/AlphaLHDListing.pdf> or
 - b. Kentucky Department for Public Health's *Healthcare Associated Infections (HAI) Team* at (502) 564-3261.

If a staff member doesn't work during the 2-week testing period, is he or she exempt from surveillance testing?

The CHFS Long-Term Care Advisory Task Force recommends that any employee who does not work during the Provider's 2-week testing period ***be tested and have a negative COVID-19 test result prior to returning*** to work responsibilities. The integrity and usefulness of the testing program relies considerably on maintaining at least a bi-weekly pattern (through a facility's program or by documentation of a negative test result from another testing source recognized by the employer).

How does the recently released CDC recommendation to not retest a known COVID+ team member for 3 months past his or her positive test affect this program?

In general, any individual diagnosed with COVID-19 with a positive PCR test should not be re-tested within 3 months of the date of symptom onset or (if asymptomatic) the date of the positive test. If the team member subsequently develops symptoms and his or her health provider thinks that a COVID-19 recurrence is a reasonable explanation, then testing may need to be performed at that time.

With the biweekly testing, any physicians coming into the facilities must follow the same testing as staff?

ALL direct care health professionals are advised to follow the same routine as staff (many of whom visit multiple facilities, so allow for alternate documentation of testing frequency & results.)

WHAT

What testing procedure is included in the CHFS program?

Ongoing Polymerase Chain Reaction (PCR) testing to detect the presence of COVID-19 infections. CDC approved testing guidance is available at: <https://www.cdc.gov/coronavirus/2019-ncov/lab/testing.html>

WHEN

When will the program take effect?

Tests performed beginning the week of August 3, 2020 can be eligible for reimbursement.

How long is the program expected to remain available?

Financial support for COVID-19 Surveillance PCR testing will continue to be available until further notice.

WHERE

Which Long-Term Care Providers are eligible to participate?

Congregate residential settings serving predominantly older or disabled adults, whether a Nursing Facility (NF), Nursing Home (NH), Intermediate Care Facility (ICF), Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID), Personal Care Home (PCH) or Assisted Living Community (ALC).

WHY

Why is surveillance testing for COVID-19 recommended for Long-Term Care settings?

This program has the following critical aims:

1. Early detection of new COVID-19 cases among residents of long-term care communities, who are the most at-risk for severe outcomes, including death, if they contract the disease;
2. Early detection of new COVID-19 cases among those who provide care for (or come into contact with) long-term care residents;
3. Prevention of COVID-19 community spread – intra-facility and in its surrounding community;
4. Reduction of the COVID-19-related mortality rate among persons living or working in long-term care communities; and
5. Universal access by the targeted populations to testing (without individual cost presenting a potential barrier to testing).

Mounting evidence suggests that a significant percentage of people who receive a positive COVID-19 test result are asymptomatic, adding support for the potential benefits of following the baseline tests with a maintenance testing program. (See contemporary study by researchers at the Broad Institute of MIT and Harvard, retrievable at: <https://www.broadinstitute.org/blog/surveillance-testing-nursing-homes-shows-most-who-test-positive-sars-cov-2-had-no-reported> .)

HOW

Are individuals responsible for any testing program expenses?

NO – the Cabinet for Health and Family Services will reimburse participating clinical laboratories directly for the specified tests performed.

Is a physician's order necessary for either a staff member or resident to have a test performed?

NO - The Kentucky Department for Public Health issued an order on July 9, 2020 indicating that a licensed clinician's order is not required for a clinical laboratory to perform or bill for a COVID-19 FDA-authorized diagnostic test (available at: <https://chfs.ky.gov/agencies/dph/covid19/Blanket%20Test%20Order%207-9-20%20FINAL.pdf>). The clinical laboratory performing the test is responsible for notifying the resident of test results, as well as reporting the results to the Kentucky Department for Public Health.

What Clinical Laboratories can participate in this program?

A Provider can select a Clinical Laboratory listed on the Office of Inspector General's "Listing of Contracted Surveillance Testing Labs" (available at: <https://chfs.ky.gov/cv19/COVIDTestingLabsContractComplete.xlsx>) that is qualified to perform an FDA-approved COVID-19 PCR test; and the Provider should expect the lab to commit to reporting at least 90% of its COVID-19 PCR test results within 48 hours.

(*) – Any CLIA-Certified clinical laboratory can learn how to apply for inclusion by contacting the Office of Inspector General at (502) 564-7963.

How does a CLIA-certified Clinical Laboratory (for performing the assay or sample collection) or a LTC Provider (for sample collection) enter into a contract with CHFS?

Information about the contract and the associated application is available at:

<https://chfs.ky.gov/agencies/dph/covid19/C19testingservices%20contact.pdf>

NOTE: This site will also include billing procedures and a standardized invoice by August 31, 2020.

	<u>Service</u>	<u>Billing Code</u>	<u>Amount</u>
a. Contract Clinical Lab	Sample	G-2024	\$21.64
	PCR Test	U-0003	85.00
b. Contract LTC Provider	Sample	G-2024	21.64

Is the surveillance COVID-19 testing program mandatory?

NO – The Provider Guidance contains recommended courses of action (emergency regulations or directives).

However, with over 99% of providers having participated in the baseline testing initiative and the state underwriting the cost of the PCR tests, CHFS is optimistic that providers will take full advantage of the program in order to enhance their ability to protect the welfare of their residents, staff, families of both, and surrounding communities.

When a Provider receives the Antigen Point of Care tests expected from the Federal Government, will the need to continue use of the PCR test remain?

As more information becomes available about the announcement on July 14, 2020 by the Centers for Medicare and Medicaid Services of its intent to distribute COVID-19 rapid testing equipment directly to all Medicare/Medicaid-certified long-term care facilities, synchronization of that with this program will be developed and announced. Any Provider that receives the federally-provided equipment and supplies prior to that announcement should immediately contact the Office of Inspector General at **(502) 564-3261**.

Have a Question or Suggestion?

For additional support regarding Assisted Living Communities, please contact Carrie Anglin at Carrie.Anglin@ky.gov or call 502-385-1712.

For additional support regarding other Long-Term Care settings, please contact Jackie Aitkin at jackie.aitkin@ky.gov or call (502) 564-3261.