Nursing Home Testing Updates

Congregate Care Unified Response Team

September 23, 2020

The Webinar Will Begin at 9:00am

Responsible RestartOhio

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Ohio | Department of Health

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Agenda

- Aligning Ohio's nursing home testing requirements with CMS requirements
- Optional state support for routine and outbreak testing
- Keys to successful testing with state support
- Q&A

Ohio's Nursing Home Testing Requirements to Date

- May 27, 2020: [Director's Order](#) for Testing Staff and Residents of Nursing Homes.

  - The Order requires nursing homes to have employees and residents to be tested in accordance with ODH Guidelines.

- May 29-July 31: Required baseline testing of all nursing home staff.

- August 3-Present: Required repeat testing of all nursing home staff on a biweekly basis.

State Support for Meeting Ohio's Testing Requirements

- **May 29-July 31: Baseline testing of all nursing home staff.**
  - CCURT provided support to 800 nursing homes to meet this requirement.
    - State provided supplies, access to lab capacity, and logistics support.
    - Ohio National Guard (ONG) performed swabbing / specimen collection and transported specimens to labs.
  - Support resulted in testing over 77,000 staff.

- **August 3-Present: Biweekly testing of all nursing home staff.**
  - CCURT providing support to 869 nursing homes to meet this requirement.
    - State is providing supplies, access to lab capacity, and logistics support.
    - Facilities collect specimens, ONG transports specimens to labs.
  - Support resulted in over 225,000 tests to date.

New CMS Requirements: QSO-20-38-NH

- The Centers for Medicare and Medicaid Services (CMS) announced regulatory changes in the Quality, Safety and Oversight Group memo, QSO-20-38-NH, on August 26, 2020. Requires testing according to the following summary:

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	Based on community spread	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.

Symptomatic Testing

- Staff with symptoms or signs of COVID-19 must be tested.
  - Restrict from the facility pending the results.
  - Follow CDC's Return to Work guidance.
  - [Ohio Contingency and Crisis Facility Staffing Guidance](#) – Based on CDC
- Test residents who have signs or symptoms, place on transmission-based precautions while pending results.
- Take appropriate action based on results.

Outbreak Testing

- **Outbreak** is defined as a new COVID-19 infection in any healthcare personnel (HCP) or any [nursing home-onset](link) COVID-19 infection in a resident.

- **Required Outbreak Testing**:
  - Upon identification of a single new case of COVID-19 infection in any staff or residents, all staff and residents should be tested.
  - 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.

Routine Testing of Staff

- **Based on the extent of the virus in the community**. Minimum CMS requirements:

CMS Category	Positivity Rate in past week	Minimum Testing Frequency
Low/Green	Less than 5%	Once a month
Medium/Yellow	5%-10%	Once a week*
High/Red	Greater than 10%	Twice a week*

- **Facilities should monitor their county positivity rate every other week** (e.g., first and third Monday of every month) and adjust the frequency of performing staff testing according to the table above.
  - Rate increases to higher level – begin testing at higher frequency
  - Rate decreases to lower level – continue higher frequency for at least two weeks
- **State and local officials may also direct facilities to monitor other factors that increase the risk for COVID-19 transmission.**

*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.

Ohio Alignment with CMS Requirements

Symptomatic Testing	Outbreak Testing	Routine Testing of Staff	Type of testing
• Follow CMS requirement	• Follow CMS requirement	• Follow CMS requirement, and • Facilities located in counties CMS low/Green and identified by Ohio's Public Health Advisory System at Risk Level 3 or higher, need to test once a week	• Follow CMS requirement (PCR or POC antigen)

Ohio Public Health Advisory System

- The Public Health Advisory System (PHAS) is a data driven framework to assess the degree of the spread of COVID-19, identify the severity of local spread, and engage Ohioans in their response and actions.

- The system includes a color-coded map, using current data informed by 7 indicators to identify the risk level for each county.

Ohio COVID-19 Risk Level Guidelines for the Public

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
Public Emergency Active exposure and spread. Follow all current health orders.	**Public Emergency** Increased exposure and spread. Exercise high degree of caution. Follow all current health orders.	**Public Emergency** Very high exposure and spread. Limit activities as much as possible. Follow all current health orders.	**Public Emergency** Severe exposure and spread. Only leave home for supplies and services. Follow all current health orders.

Ohio Public Health Advisory System

LEVEL 1

Public Emergency

Active exposure and spread.

LEVEL 2

Public Emergency

Increased exposure and spread.

LEVEL 3

Public Emergency

Very high exposure and spread.

LEVEL 4

Public Emergency

Severe exposure and spread.

As of 9/17/2020

coronavirus.ohio.gov

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Compilation of CMS and Ohio Levels / Colors

CMS CATEGORY: LOW Less than 5% positivity rate	Ohio PHAS LEVEL	Routine Staff Requirements: Follow CMS and Ohio
Low / Green	Level 1 / Yellow	1 time a month
Low / Green	Level 2 / Orange	1 time a month
Low / Green	Level 3 / Red	1 time a week (act like CMS yellow)
Low / Green	Level 4 / Purple	1 time a week (act like CMS yellow)

CMS CATEGORY: MEDIUM Between 5% and 10% positivity	Ohio PHAS LEVEL	Routine Staff Requirements: Follow CMS
Medium / Yellow	Level 1 / Yellow	1 time a week
Medium / Yellow	Level 2 / Orange	1 time a week
Medium / Yellow	Level 3 / Red	1 time a week
Medium / Yellow	Level 4 / Purple	1 time a week

CMS CATEGORY: HIGH Greater than 10% positivity	Ohio PHAS LEVEL	Routine Staff Requirements: Follow CMS
High / Red	Level 1 / Yellow	2 times a week
High / Red	Level 2 / Orange	2 times a week
High / Red	Level 3 / Red	2 times a week
High / Red	Level 4 / Purple	2 times a week

Routine Testing Facility - Totals by Current Level

Category	Ohio Counties	Nursing Facilities
CMS Low / Green	61	623
CMS Medium/ Yellow	22	230
CMS Low / Ohio PHAS 3+	3	82
CMS High / Red	2	30
Total	88	965

Required Data Review

- CMS: determine testing plan based [data published by CMS](#) on the first and third Monday of the month.

- Ohio: review state [PHAS data](#) on the same days (first and third Monday of the month.)

An EIDC alert will be sent to all nursing homes on the first and third Monday of the month to provide a list of counties that are CMS Low /Green and Ohio PHAS Level 3+

Required State Testing Reporting

- **All facilities must verify their ongoing compliance** by submitting summary-level testing results for all staff and residents via an online survey.
  - Positives
  - Negatives
  - Inconclusive
  - Awaiting results
  - Not tested
- **NEW reporting survey will be released by Oct 5.**

Use of Point of Care Platforms

- All facilities with CLIA waiver have received or will receive COVID-19 antigen testing POC platforms from HHS:
  - BD Veritor Plus System or Quidel Sofia and Sofia 2
    - Distribution of machines and initial supplies to all facilities
  - Abbott BinaxNOW
    - Distribution of cards to targeted facilities
- POC platforms should be used to meet testing requirements, including in outbreak situations.

Reporting Antigen Testing

- Facilities need to register their facility as a lab
  - http://coronavirus.ohio.gov/registerlab
- Once registered you will then find your facility at
  - http://coronavirus.ohio.gov/labreport
- ODH provided a statewide webinar to LTCHs on COVID-19 reporting requirements
  - https://www.youtube.com/watch?reload=9&v=Cle-zQ7WrVM&feature=youtu.be
- Currently only accepts line level positives and aggregate negatives
  - Line level negatives will be available in the near future

Optional State Support for Routine and Outbreak Testing

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State Support Overview

- **State support is optional**
  - Facilities can use POC machines and other testing arrangements with outside labs to meet the CMS and state requirements,

- **State support is limited to facilities with greatest testing needs**
  - Counites >5% community positivity rates or Ohio PHAS 3+, and
  - Facilities with outbreaks.

- **State support alone will not meet requirements**
  - Federal expectation that facilities identify resources needed to meet the requirements.
  - State support can help, but will not be sufficient to meet requirements.

Levels of Support for Routine & Outbreak Testing

Percent Positivity/CMS Requirement	State Support Level	Remaining Facility Requirement
CMS Green/Low (< 5% positivity) Test once a month	No state support	Test Staff 1 time a month
CMS Green/Low & Outbreak Test all negative staff and residents every 3-7 days until no new cases for at least 14 days	No state support for the first week Biweekly testing for negative staff and residents	Test negative staff and residents to meet remainder of requirement
CMS Yellow/Medium (5-10% positivity) **CMS Green/Low & Ohio PHAS 3+** Test once a week	Biweekly testing for staff	Biweekly testing for staff to meet remainder of requirement
CMS Yellow/Medium & Outbreak **CMS Green/Low & PHAS 3+ % Outbreak** Test all negative staff and residents every 3-7 days until no new cases for at least 14 days	No state support for the first week Biweekly testing for negative staff and residents	Test negative staff and residents to meet remainder of requirement
CMS Red/High (<10% positivity) Test twice a week	Weekly testing for staff	Weekly testing for staff to meet remainder of requirement
CMS Red/High & Outbreak Test all negative staff and residents every 3-7 days until no new cases for at least 14 days	Weekly testing for negative staff and residents	Test negative staff and residents to meet remainder of requirement

Meeting Remaining Requirements

- Use POC platforms.

- Leverage local resources:
  - Outreach to local / partner hospital
  - Outreach to local health department

- Work with outside labs:
  - Must develop relationship / contract – cannot use the state's relationship / contract
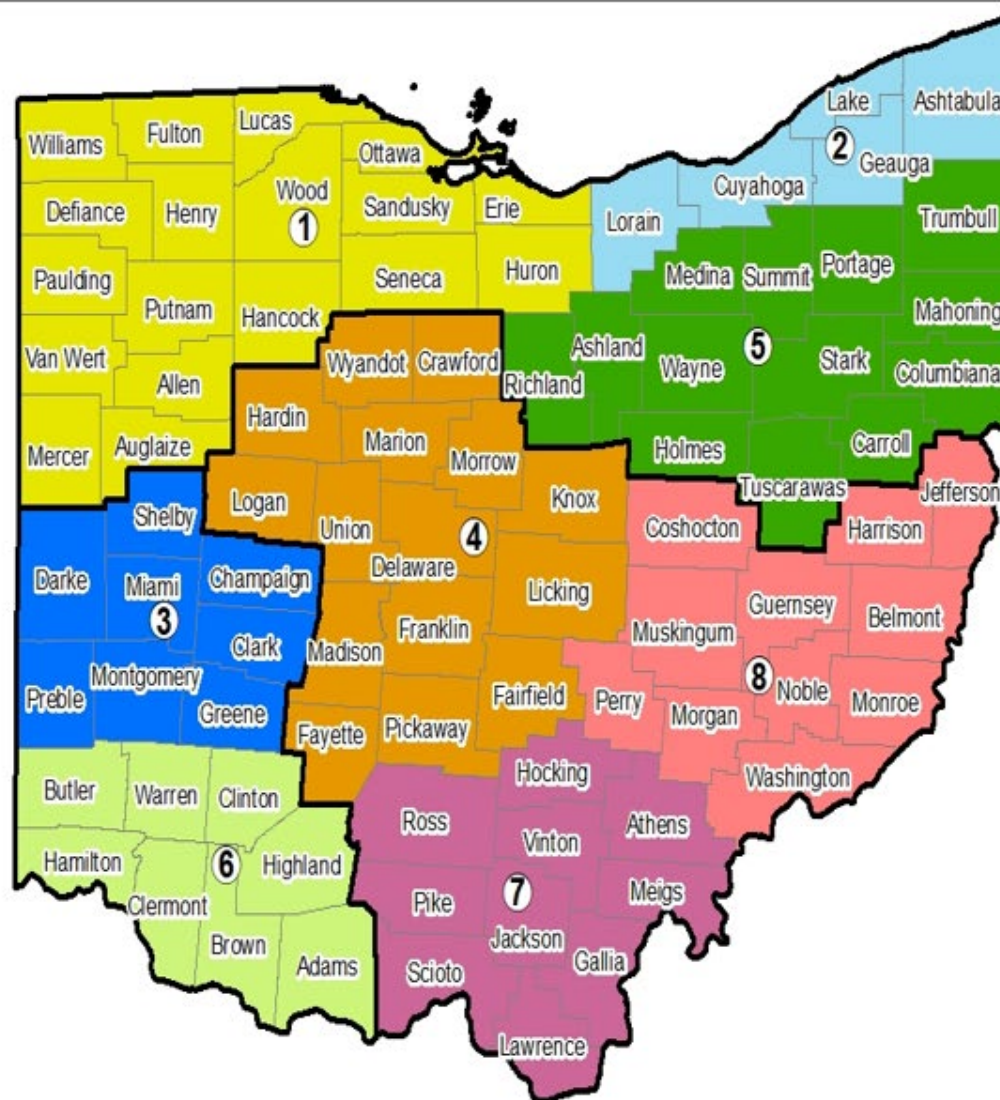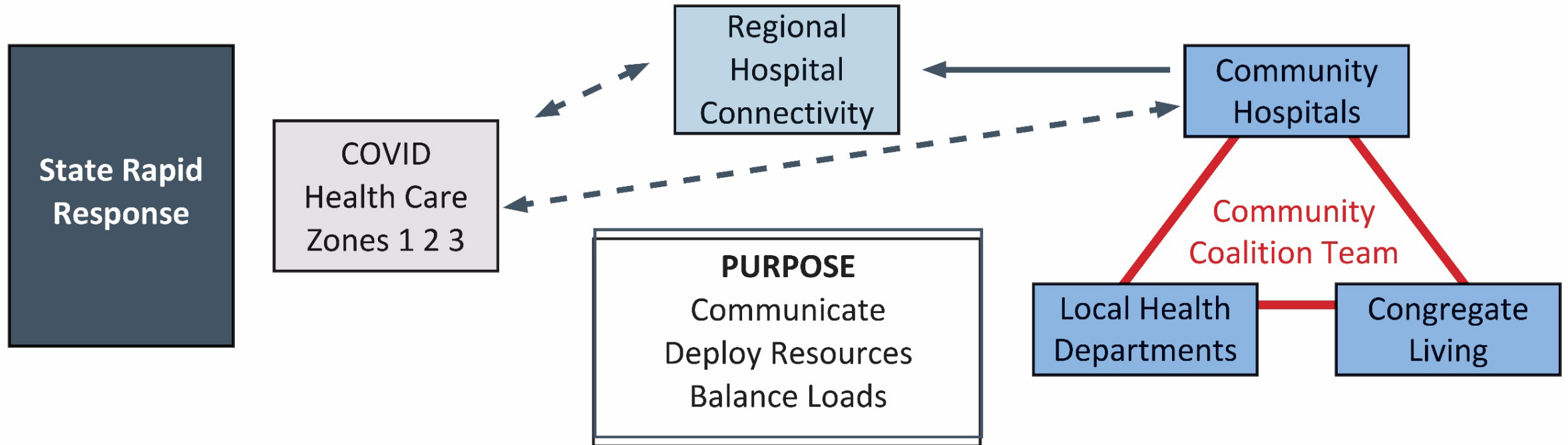
Zone 1 = Regions 1, 2, 5
Zone 2 = Regions 4, 7, 8
Zone 3 = Regions 3, 6

Downloadable Map

Local-Regional-Zone-State Connectivity

State Rapid Response

COVID Health Care Zones 1 2 3

Regional Hospital Connectivity

Community Hospitals

Community Coalition Team

Local Health Departments

Congregate Living

PURPOSE
Communicate
Deploy Resources
Balance Loads

State Supported Process

- State creates schedule for specimen collection/swabbing, assigns a lab to each facility.
  - ***THIS LAB ASSIGNMENT IS ONLY FOR STATE SUPPORTED TESTING***
- Arranging transportation / shipping of specimens to lab.
- Communicating with facilities, the labs, local health departments (LHDs); hospital zone and local hospital partners, and regional health care coordinators.
- Providing training materials for specimen collection/swabbing.
- Providing technical assistance, support, and connection to resources for facilities as they obtain results from resident testing.

Next Steps for State Support

- **New state-supported process begins October 5**
  - Schedule for routine testing will remain "biweekly" for week of Sept 28

- **Routine testing – starting Oct 5:**
  - All facilities in green/low counties will be removed from the schedule, unless we are aware that they have an outbreak (see below)
  - We will assume all facilities in remaining counties that are currently "opted in" to the state supported process will remain opted in for routine testing support according to their level

- **Outbreak testing – starting Oct 5:**
  - We will assume all facilities currently "opted in" to the state process that have reported a positive case within the last 14 days will participate
  - Fill out the NEW survey to report the need for outbreak testing

Action Required

- **Facilities need to fill out a new survey to:**
  - **NEW survey completion is required by 9/28 at 9 AM**
  - After 8/28, use the same survey to opt in/out of state-support for routine and outbreak testing:
    - Can opt out/in at any time,
    - Opt-in by Monday at 5 PM to be put on schedule for the following week.
  - Same survey will be used to update supply requests:
    - Provide number of staff to be tested for routine testing,
    - Provide number of residents to be tested for outbreak testing.
  - Provide accurate / up-to-date contact information.
- **Tentative DRAFT schedule for week of Oct 5 released by the end of this week:**
  - Please carefully review the schedule once it is released and fill out the NEW survey to provide updates (old survey will be closed later today),
  - Do not assume the draft dates = final dates,
  - Final schedule for week of Oct 5 will be released on Sept 30.

Keys to Successful Testing with State Support

We Need Your Help!

- Lab turnaround time is impacted by the quality of:
  - Specimens,
  - Packaging, and
  - Data – lab forms and the information they contain.

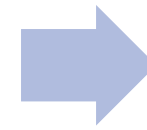   *TIME SPENT ON POOR QUALITY SPECIMENS AND DATA = TIME TAKEN AWAY FROM RUNNING TESTS*

- Lab turnaround time is also highly dependent on labs receiving specimens according to the schedule.

    SPECIMENS RECEIVED OUTSIDE OF THE SCHEDULE WILL NOT BE TESTED

Scheduling & Supplies

- **Look at and follow the schedule.**
  - LABS AND DATES are subject to change with each new schedule, and
  - **TESTS DROPPED OFF / SENT TO LABS OUTSIDE OF THE STATE SCHEDULE WILL BE NOT BE TESTED.**
- **Test kits will automatically be sent to your facility.**
  - **TEST KITS SENT TO YOU BY ODH OR YOUR STATE-ASSIGNED LAB CAN ONLY BE USED FOR THE STATE-SUPPORTED PROCESS.**
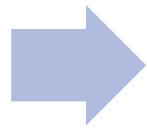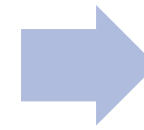
Communications

- **Before /when contacting** CCURT@odh.ohio.gov**, please:**
  - Read all FAQs and guidance before asking questions, and
  - **Include your license number and name of your facility in your communication.**
- **Outreach to labs:**
  - If you've waited more than 5-7 days from pick-up for results.

Lab	Contact Info
OSU	CovidLabAdmin@osumc.edu
ODH	odhlabportal@odh.ohio.gov
UC Health	Narayan.Torke@UCHealth.com; Lance.Cruey@UCHealth.com
Dayton Children's	NicholsJ@childrensdayton.org
Battelle	CLIADiagnostics@battelle.org, 614-424-5227, select prompt #5
Mako	JTucker@makomedical.com; rnibert@makomedical.com
Quest	866-MyQuest
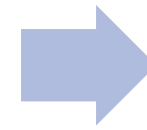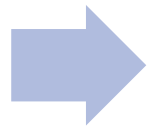
# ODH Lab Requisition Completion Requirements

- **Order forms must be completed electronically – ALL fields must be completed, including insurance.**
    - **Handwritten forms will no longer be accepted – specimens will be rejected.**
    - Form must match information on vials – vial must have NAME AND DOB.
- **Create new form for each round of tests, each person, to generate new barcode.**
    - Double-check the form before submitting – if you fill it out again for a mistake, it will create a duplicate rather than overwriting.
    - ODH lab portal batch-upload process coming soon.
- **Fill out forms ahead of reviewing the schedule at your own risk!**
    - Labs and testing date are subject to change.
   - Incorrect forms based on assumptions (vs. schedule) may be rejected.
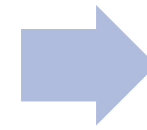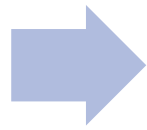
Packing & Storing Specimens

- **Close vials tightly and make sure they don't leak.**
  - If they leak, discard and collect a new specimen.
- **Place only the specimen/vial inside the biohazard bag.**
  - Do not put paper, ice, water, etc. inside bag.
- **Send original print-out of lab form with specimen.**
  - Copies of the print-out may contain unreadable QR codes and barcodes.
- **Place paper lab requisition in OUTSIDE pocket of biohazard bag.**
  - If bag does not have pocket, please double-bag and place form between bags.
- **When placing requisition in pocket, only fold ONCE.**
- **Place form in pocket / bag so the QR code (ODH lab form) or barcode (Quest form) faces out and is scannable.**
- **Store vials upright.**
- **All specimens *can* be refrigerated after collection, but only some *need* to be refrigerated.**
  - Kits supplied by / sent by ODH ***need*** to be refrigerated.
- **Package all specimens for facility together in large zip bag(s). On outside of bag, include:**
  - Facility identification information,
  - Number of total specimens in the bag, and
  - Collection date.

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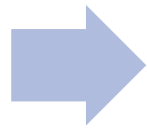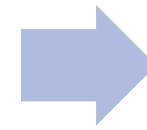
Specimen Pick-Up

- **Pick-up is automatically scheduled.**
    - **Do not** reach out to schedule pick-up.
    - **Please do** reach out of the ONG does not arrive by 5 PM.
- **ONG will arrive between 8 AM and 5 PM on scheduled pick-up date.**
    - We cannot provide a narrower window.
    - ONG will call prior to pick-up.
- **Be prepared to:**
    - Deliver specimens directly to ONG vehicle.
    - Ensure specimens are placed upright in cooler with ice packs.
    - Tell the ONG how may specimens you are giving them.
- **DO NOT DROP OFF SPECIMENS TO LABS OUTSIDE OF THE SCHEDULE.**
    - If you'd like to self-drop your specimens **PER THE SCHEDULE** please contact CCURT so we can cancel your ONG pick-up.

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Q&A

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Resources

- [Ohio's Testing in Nursing Homes Website](#)
- [www.coronavirus.ohio.gov](#)