

Updated April 10, 2020

## Nursing Homes

<u>What did LeadingAge ask for</u>	<b>Did we get it</b>	<u>What is in the rule</u>
Suspending payroll-based journal (PBJ) submission	Yes	<ul style="list-style-type: none"> <li>• Providing relief to long term care facilities on the requirements for submitting staffing data through the Payroll-Based Journal system</li> <li>• The submission is waived but we will still need to review the detail and ramifications of Nursing Home Compare</li> </ul>
Relaxing comprehensive care plan requirements and timelines	No	<ul style="list-style-type: none"> <li>• Care plans have not been waived.</li> </ul>
Relaxing requirements for physician assessment every 30 days in the first 90 days and every 60 days thereafter	Yes and No	<ul style="list-style-type: none"> <li>• Requirements for assessment every 30 days in the first 90, and every 60 days thereafter have not been waived, but who completes these assessments and how they are completed has been relaxed.</li> <li>• Waiving requirements for physicians and non-physician practitioners to perform in-person visits for nursing home residents and allow visits to be conducted, as appropriate, via telehealth options.</li> <li>• <i>04/09/2020</i>: Allowing for these visits to be delegated to NPs, PAs, or clinical nurse specialists in addition to previously-granted allowances for the use of telehealth.</li> </ul>
Allowing off-site pharmacy reviews	Yes but not as a waiver	<ul style="list-style-type: none"> <li>• CMS did not deny this request; they simply did not address it. Continue working with your pharmacy consultant to meet the requirement at 42 CFR 483.45(c)</li> </ul>

		for monthly drug regimen review in the way that makes the most sense for your nursing home.
Relaxing requirements to allow all sites to function as training sites for certified nurse assistant’s clinical hour requirements	No However...	<ul style="list-style-type: none"> <li>• The waiver is allowing a SNF or NF to employ anyone (CNAs) for longer than four months even if they have not met the training requirements under 42 CFR 483.35(d).</li> <li>• The individual must be competent to provide nursing and nursing related services.</li> <li>• CMS is not waiving the demonstration of the competency of the nurse aide to care for the resident.</li> </ul>
Waive Pre-Admission Screening and Annual Resident Review (PASRR)	Yes And No	<ul style="list-style-type: none"> <li>• Allowing states and nursing homes to suspend these assessments for new residents for 30 days. After 30 days, new patients admitted to nursing homes with mental illness (MI) or intellectual disability (ID) should receive the assessment as soon as resources become available.</li> </ul>
Evacuating facilities to provide services in alternative settings	Yes and No	<ul style="list-style-type: none"> <li>• CMS has outlined waivers for Physical Environment(see below)</li> </ul>
Relaxing provider participation requirements to provisionally, temporarily, enroll providers	Yes	<ul style="list-style-type: none"> <li>• Toll free hotlines established for providers and Part A beneficiaries.</li> <li>• Flexibilities provided: 1. Waive certain screening requirements, 2. Postpone all revalidation actions and 3. Expedite and pending or new applications from providers.</li> </ul>

In addition to the items included in LeadingAge’s 1135 waiver request, the following provisions are included in the nursing home waivers:

*Cost Reporting*

- CMS is delaying the filing deadline of certain cost report due dates due to the COVID-19 outbreak.

#### *Accelerated/Advanced Payments*

- CMS is authorized to provide accelerated or advance payments during the period of the public health emergency to any Medicare provider/supplier who submits a request to the appropriate Medicare Administrative Contractor (MAC) and meets the required qualifications.

#### *Resident Groups*

- CMS is waiving the requirement to allow residents to have the right to have in-person group meetings.

#### *Physical Environment*

- CMS is allowing a non – SNF building to be temporarily certified and used by the SNF in the event there are needs for isolation processes for COVID-19 positive residents.
- In addition, CMS will waive certain conditions of participation and certification requirements to open the NF.
- CMS is also allowing rooms to be used in a SNF that normally would not be a resident room, in the need for surge capacity. The types of rooms could be a dining room, activity room – as long as the resident is safe and comfortable. – Surge Capacity

#### *Resident Roommates and Groupings*

- For grouping and cohorting focused on residents who are symptomatic and/or asymptomatic, CMS is waiving the resident's right to share a room with a resident of their choice, to provide notice and rationale to change a resident's room and the resident's refusal to transfer to another room.

#### *Resident Transfer and Discharge*

- CMS is waiving the requirements for a SNF to transfer or discharge a resident for the sole purpose of cohorting. The transfer or discharged resident could be with or without respiratory symptoms, positive for COVID-19 or signs/symptoms to be observed for 14 days at the receiving facility. No matter what the transfer/discharge reason the facility must be dedicated to taking care of the resident and have the ability to prevent the spread.

CMS has provided a [fact sheet](#) for nursing homes as well as the [interim final rule](#) with comment period. LeadingAge is reviewing thoroughly and will share fuller analyses and topics for comment.