COVID-19 Updates

Colorado Department of Health Care Policy & Financing

July 24, 2020

Overview

COVID-19 Updates

Dr. Lisa Latts, Chief Medical Officer, HCPF

Public Health Emergency Update
Non-Emergent Medical Transportation (NEMT) Update
Infection Control Surveys for IRSS
Strike Force Update
New Guidance
Resources

Bonnie Silva, Office of Community Living Director, HCPF

COVID Updates

Dr. Lisa Latts, Chief Medical Officer

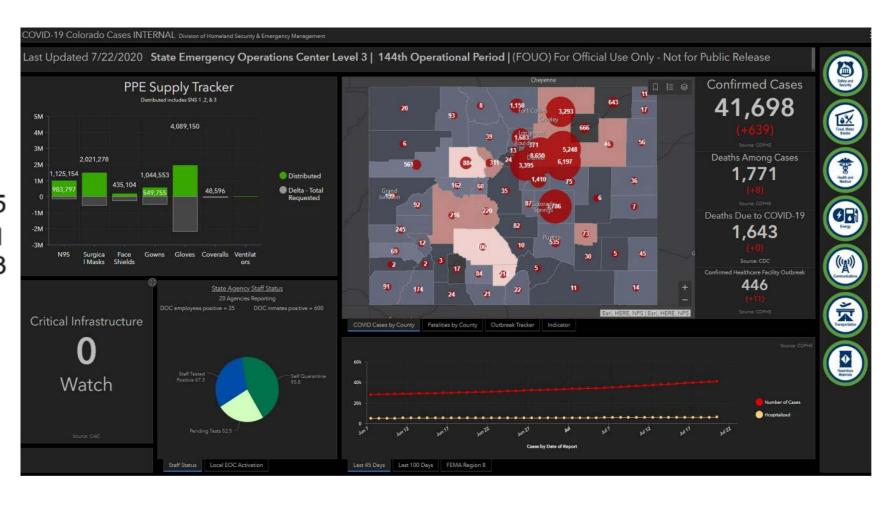
COVID-19 in Colorado

COVID-19 Cases in Colorado CDPHE updates:

https://covid19.colorado.gov/

Positive Cases 41.698
People tested 462,275
Deaths among cases 1,771
Deaths due to COVID-19 1,643

Updated July 22, 4:00 p.m.



COVID Cases are Rising



TOTAL CASES

4.0 million+

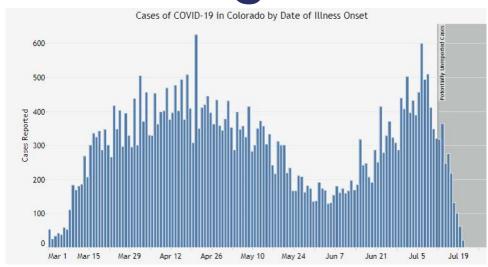
DEATHS

143,722

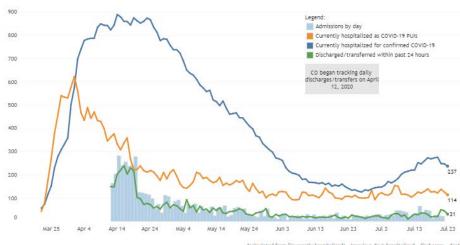
Includes confirmed and probable cases where available



- Positive rate trending up ~5-6%
- Mortality rate declining

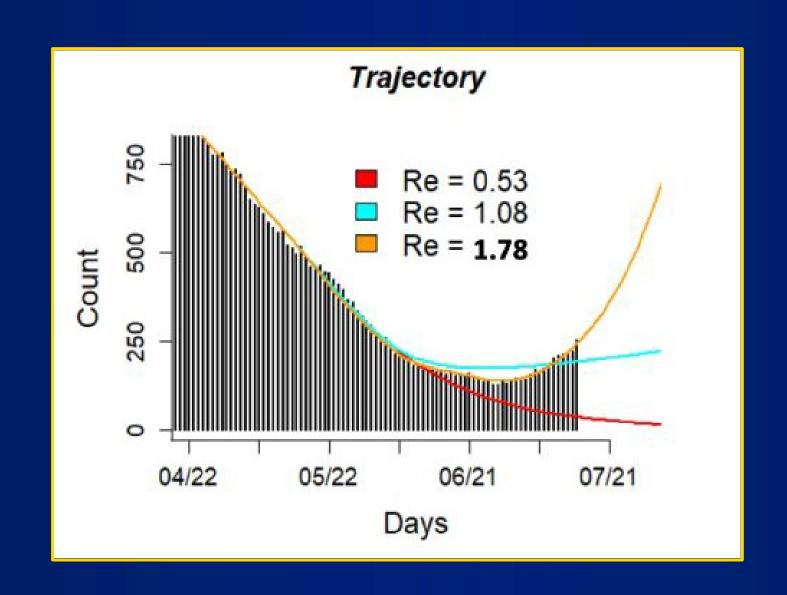


COVID-19 hospital patients



*calculated from [(currently hospitalized) - (previous day's hospitalized - discharges - death:

MODEL BASED ON OBSERVED HOSPITALIZATIONS



FACTORS DRIVING RAPID INCREASE

- Increased contact rates among people in Colorado due to changes in policies and/or behavior
- Increased out of household contact rates among younger populations that spread to older populations
- Importation of cases from outside of Colorado and contact between visitors and residents that lead to infections
- Random chance These projections are sensitive to what has happened in the last few weeks - but because the change is so large, random variation is unlikely to account for all of the change

Protect Our Neighbors





Level 1: Stay at Home

Everyone was required to stay at home except for grocery shopping, exercise and necessary activities. Only critical businesses were open.



Level 2: Safer at Home and in the Vast, Great Outdoors

While we are all still safer at home, we are also able to practice greater social distancing in our great outdoors than in confined indoor spaces.



Level 3: Protect Our Neighbors

Local public health agencies have the ability to contain surges in cases and outbreaks through testing, case investigation, contact tracing, isolation, quarantine, site-specific closures, and the enforcement of public health orders.

CDC Changes to Case Definition

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches

- 96% of symptomatic patients have one of these
- 45% have all three

- Headache
- New loss of taste or symptoms specific for CoV-2
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

half of patients report GI symptoms

Updated Recommendations for Discontinuation of Isolation and Precautions

Duration of isolation and precautions

- > For most persons, can be discontinued 10 days *after symptom onset** and resolution of fever for at least 24 hours with improving other symptoms
- > For a limited number of persons with severe illness, may want to consider extending up to 20 days; consult infection control experts

Role of PCR testing to discontinue isolation or precautions

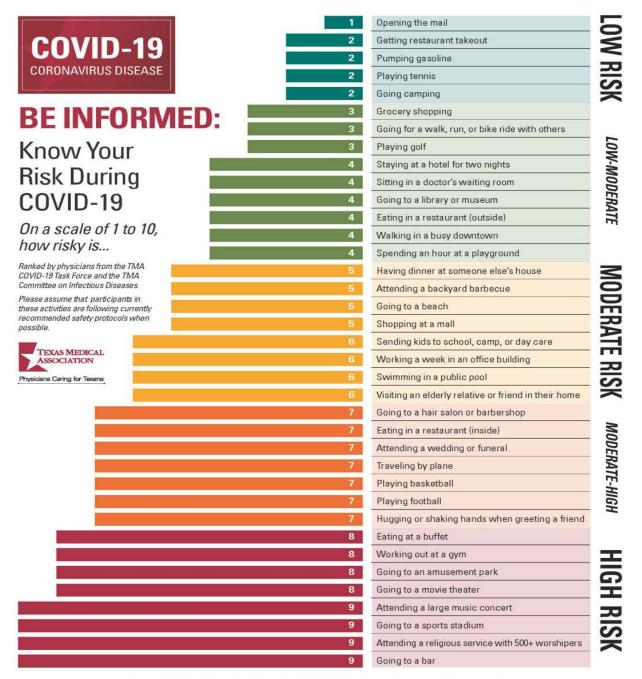
- > Consider for severely immunocompromised, consult infectious diseases expert
- > For all others, a no longer recommended (except to discontinue isolation or precautions earlier 10 days)

^{*} For persons who never develop symptoms, use date of their first positive RT-PCR test for SARS-CoV-2 RNA



Prevention

- Exposures Before Issuance of Stay-at-Home Orders Among Persons with Laboratory-Confirmed COVID-19. 73% did <u>not</u> have known contact with someone infected with COVID-19. Of those:
 - > 30% reported contact with a person they knew who had fever or respiratory symptoms
 - ➤ 44% had attended a gathering of >10 persons
 - > 29% had traveled domestically
 - > 28% worked in a health care setting
 - > 23% had visited visiting a health care setting not as a health care worker
 - > 22% had used public transportation
- More evidence supporting value of wearing masks when out in public
- Turn up your computer audio to hear the video:
 - https://youtu.be/zOub_oMD0cc









Public Health Emergency

Public Health Emergency (PHE) End Date Timeline

- Public Health Emergency officially renewed on July 23 (it was set to expire July 25, 2020)
- New PHE End Date is 10/23/2020; could be extended again
- Seeking greater "notice time" from CMS, along with many states across the US
 - We need to plan for October end date, but ready ourselves for another extension for continuous coverage
- SPAs,1135 Waivers, and Optional Uninsured Testing Group end on PHE end date
- Continuous Medicaid Coverage ends at the end of the month in which the PHE ends
 - Dept. and County Partners will need to notice members and time to properly disenroll members on top of their daily workload
- Maintenance of Effort (MOE Eligibility Levels & Benefits the remain the same) & increased
 Enhanced 6.2% FMAP end at the end of the quarter in which PHE ends
- Appendix K currently ends 1/26/2021, impacting HCBS

Example Scenarios

- Extending or Ending the Public Health Emergency is Federal Government's decision, they can extend for up to 90 days at a time
- States have asked CMS, HHS for at least 2-months notice prior to allowing the Public Health Emergency to end, but they may not comply

If Public Health Emergency Ends	Then SPAs,1135 Waivers, and Optional Uninsured Testing Group Ends	Then Continuous Coverage Requirement Ends	Then MOE Requirement keep Eligibility Levels & Benefits the Same and Enhanced 6.2% FMAP Ends
October 23, 2020	October 23, 2020	October 31, 2020	December 31, 2020
January 21, 2021	January 21, 2021	January 31, 2021	March 31, 2021

Non-Emergent Medical Transportation (NEMT)

Statewide Vendor Transition

Memo Link: OM 20-074

NEMT is a benefit the Department provides to Health First Colorado (Colorado's Medicaid program) members to get to their medical appointments

Members who qualify can get a ride to their medical appointments if they don't have other transportation. Most members qualify.

Health First Colorado works with transportation provider IntelliRide and county health and human services offices to connect members with rides.

Schedule a ride online or call two days before your appointment

- Members in counties shaded in green should call IntelliRide to schedule a trip
- Members in counties shaded in yellow should continue to contact their county



What members need to know:

- Visit <u>HealthFirstColorado.com/nemt</u> to determine who to call
- Find links to IntelliRide's online scheduling and contact information:

Book online at gointelliride.com/colorado
Or call IntelliRide at 1-855-489-4999 or 303-398-2155 (State Relay: 711)

What providers need to know:

- No matter where a member lives, all previously scheduled trips will be transferred to IntelliRide
 - If members want to confirm their trips are scheduled, they can call IntelliRide a week before the scheduled appointment
 - Please help us avoid long wait times for customers who have immediate trip needs by avoiding calling just to verify a trip that is more than a week out
- All mileage reimbursements for trips after July 1 should be submitted to IntelliRide regardless of when your county is transitioning
 - > Visit HealthFirstColorado.com/nemt for more information

NEMT Contact Info

For more information visit:

HealthFirstColorado.com/nemt

Email us with questions at:

NEMT@state.co.us

Remote Infectious Control Surveys for IRSS

- Overview of CDPHE's efforts in review and support of residential facilities
- Rationale for remote infectious control (IC) surveys for Individual Residential Support Services (IRSS)
- Sampling

What to Expect for IRSS IC Surveys

- The IC remote surveys will occur remotely
- A typical remote survey will have two surveyors assigned
- Survey components will include:
 - Entrance interview
 - Client roster
 - Questions for management
 - COVID survey questions
 - Small sample size for PRS record review
 - > Technical assistance and resource sharing

- Surveillance testing continues to be a top priority
 - ➤ To date the State has distributed nearly 135,000 tests to residential care settings
 - > Seeking opportunities to continue to expand capacity
- EM Resource
 - > # NFs using EM Resource: 108
 - > Proportion NFs using EM Resource: 46.7%
 - > #of ALRs Utilizing EM Resource: 79 (same)
 - Proportion ALRs using EM Resource:11%

Resident Well-Being

- Sixth workstream dedicated to identifying and implementing practices to improve overall health and wellbeing
- New group of leading experts and Gerontologists has been formed to identify ways to implement strategies to attend to resident's overall well-being
- In particular, will be examining ways to reduce social isolation while still keeping residents and staff safe

Visitation

- Outdoor visitation guidance released several weeks ago
 - ➤ Facilities have been developing their own policies and procedures for implementing the guidance
- An FAQ document further detailing allowable visitation is currently being drafted
 - ➤ This document will help clarify entry by the Ombudsman, APS workers, and visits for compassionate care purposes
- Continue to evaluate the feasibility of phased indoor visitation

ConnectToCareJobs Site

- Registered as of July 22: 707 job seekers, 67 employers (additional 49 pre-registered)
- New Colorado-specific <u>webpage</u> created
- Email went out to Residential Care Settings July 22 again inviting them again to register
 - Day Programs added
 - User acceptability testing underway for home care and home health

New CMS Nursing Home Resources

CMS announced on July 22 several new initiatives designed to protect nursing home residents from COVID-19

New Funding

➤ \$5 billion of the Provider Relief Fund (PRF) to Medicare-certified long term care facilities and state veterans' homes

Enhanced Testing

- ➤ CMS to begin requiring that all nursing homes in states with a 5% positivity rate or greater test all nursing home staff each week
- ➤ More than 15,000 testing devices will be deployed over the next few months to help support this mandate, with over 600 devices shipping this week

Additional Technical Assistance & Support

➤ Federal Task Force Strike Teams to provide onsite technical assistance to nursing homes experiencing outbreaks

- ➤ New online Nursing Home COVID-19 Training focused on infection control and best practices
- ➤ The training is a requirement for nursing homes to receive the additional funding from the PRF

Weekly Data on High Risk Nursing Homes

- ➤ In May, CMS and CDC began collecting weekly data on each nursing home including their number of COVID-19 cases
- ➤ White House and CMS will release a list of nursing homes with an increase in cases that will be sent to states each week as part of the weekly Governor's report to ensure states have the information needed to target their support to the highest risk nursing homes

New Guidance Issued

OM 20-072 OM 20-075 OM 20-076

All COVID-19 related Memos can be found here: www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response

OM 20-072

TITLE: OPERATIONAL INFORMATION FOR HCBS RESIDENTIAL SERVICES PERTAINING TO COVID19 AND THE PROTECT OUR NEIGHBORS ORDER [Supersedes OM 20-035]

Under Protect Our Neighbors, communities may permit activities at 50% of pre-pandemic capacity, with at least 6 feet between non-household members, and no more than 500 people in one setting at a time.

Different communities will be at different phases, based on local conditions and capabilities, and the state may change phases as well. All variances by county are updated on CDPHE's website here. Please pay close attention to which phase the state and your community is in and follow guidelines.

During all phases, residential settings can continue to be vigilant in reducing the risk of exposure to members by:

- Following the Stay-at-Home recommendations for members that are considered part of the "Vulnerable Population", which means only leaving home for medical care and essential activities
- Avoiding communal dining.
- Performing active health screens for all residents.
- Avoiding any congregating within the setting.
- Limiting visitation to only necessary or essential visits as outlined in <u>CDPHE's latest Public Health Order</u>
- Completing required health screenings of all employees, contractors, and essential individuals prior to entering the premises



OM 20-075

TITLE: UPDATED CASE MANAGEMENT OPERATIONAL CHANGES IN RESPONSE TO COVID-19 [Supersedes OM 20-034]

- Effective March 11, 2020, CMAs were instructed to perform initial, continued stay review, Supports Intensity Scale (SIS), Inventory for Client and Agency Planning (ICAP) assessments, and routine monitoring contacts by telephone or another electronic modality.
- This memo has been updated to remove the requirement for the case manager to see the member face to face at the next six-month contact following a virtual assessment.
- As a reminder:
 - > Case managers should utilize electronic video (such as Apple FaceTime or Zoom) to complete any contact or assessment unless the member only has the option to use a telephone.
 - ➤ For nonroutine contacts that may require face to face contact, such as performing an investigation into a member's health and welfare, the CMA must follow COVID-19 precautions

Link: OM 20-075

OM 20-076

TITLE: CASE MANAGEMENT AGENCY MEMBER IN-PERSON REQUIREMENTS AND RURAL TRAVEL ADD-ON

- In-Person requirements for SEPs and CCBs that went into effect July 1, 2020 are
 to be conducted via by telephone or another electronic modality due to
 COVID-19 as outlined in Operational Memo 20-075 for eligible members enrolled
 in one of the 10 HCBS waivers, the State SLS program, and the OBRA-SS program
- During the temporary COVID-19 period, the case manager will enter the contacts as outlined in the <u>Single Entry Point Rate Technical Guide and the</u> <u>Community Centered Board Technical Guide</u>.
 - 1. Enter the contact in the log note section of the Benefit Utilization System.
 - 2. Answer "yes" to the question, "Did this contact take place Face to Face?". This will allow the Department to pay services that are temporarily provided virtually.
 - 3. Indicate in the log note text section that the In-Person Monitoring was performed through alternative methods to ensure health and safety during the COVID-19 pandemic. The case manager will indicate how the contact was performed in the documentation narrative.

Due to these temporary changes requiring In-Person work to be conducted virtually, the Department will not reimburse SEPs and CCBs for the Rural Travel Add-On for assessments and monitoring performed by telephone or another electronic modality

Link: OM 20-076

Provider Relief Funds

- On June 9, 2020, the U.S. Department of Health and Human Services (HHS) announced additional funding (approximately \$15 billion) available through the Provider Relief Fund to eligible Medicaid and Children's Health Insurance Program (CHIP) providers
- More information about eligibility and the application process is available at https://html.ncbi.nlm.nih.gov/coronavirus/cares-act-provider-relief-fund/index.html
- To be eligible for this funding, health care providers must not have received payments from the \$50 billion Provider Relief Fund General Distribution and either have directly billed their state Medicaid/CHIP programs or Medicaid managed care plans for healthcare-related services between January 1, 2018 to May 31, 2020

Examples of providers serving Medicaid and/or CHIP beneficiaries who may be eligible for this funding include:

- > Pediatricians
- > Obstetrician-Gynecologists
- > Dentists
- Opioid Treatment and Behavioral Health Providers
- > Assisted Living Facilities
- ➤ Other Home and Community-Based Services Providers

Link: IM 20-024



Provider Relief Funds

Providers must submit their data by August 3, 2020

HRSA fact sheet with information about the funds and application process: www.hhs.gov/sites/default/files/provider-relief-fund-medicaid-chip-factsheet.pdf

HHS Webinar: Getting started with the Provider Relief Fund for Medicaid, CHIP, and dental providers

Date: July 27th, 2020, 1-2 p.m. (3-4 p.m. ET)

Registration Link*:

https://webex.webcasts.com/starthere.jsp?ei=1348276
&tp_key=fa54a9fb41

* Please pre-register to reserve a spot. This event will be delivered via webcast, no dial-in required. Presentation materials will not be distributed.





New Questions?

Previous Guidance

Case Management Agencies

Operational Changes

- OM 20-049
- OM 20-027
- OM 20-034
- OM 20-037
- OM 20-045

PASRR Changes

• OM 20-043

Critical Incident Reporting for COVID-19

• OM 20-044

Level of Care Changes

• OM 20-053

Transition Coordination

• OM 20-056

Facilities and PACE

Infection Control And Prevention of COVID-19 in Nursing Homes (CMS)

• CMS QSO-20-14-NH

Telemedicine in Nursing Facilities

• OM 20-032

Training & Certification

• OM 20-038

Rate Increase

• OM 20-050

Options Counseling

• OM 20-054

Stimulus Payments

• OM 20-059

Civil Money Penalty (CMP)

• <u>IM 20-021</u>

HCBS Providers

HCBS Therapy Services

• OM 20-020

Guidance for Class B Providers

• OM 20-023

Changes to Benefits & Services (Table)

• OM 20-046

Telemedicine

Temporary Policy

Residential Guidance

• OM 20-035

Host Home Inspections

• OM 20-036

CDASS Sick Time

• OM 20-047

Changes to Benefits & Services Rates (Table)

• OM 20-048

Flexibility in Hiring

• IM 20-019

CC & SCC Clarifications

• OM 20-060

Additional Provider Relief Funds

• IM 20-024

Non-Medical Transportation

• OM 20-063

Retainer Payments Ending

• OM 20-069

Guidance for Reopening or Expanding Day Programs

• OM 20-070

All COVID-19 and LTSS related memos and FAQs can be found here:

www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response

Stay Engaged

Memos, Webinar Info, and FAQs - Updated Regularly

www.colorado.gov/hcpf/long-term-services-and-supports-covid-19-response

Email us

HCPF_HCBS_Questions@state.co.us

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Reminder: Personal Protective Equipment

If you or your organization are experiencing a shortage or outage of personal protective equipment (masks, gloves, gowns, etc.) to conduct essential or life saving functions during this crisis, please reach out to your local emergency manager or local public health department.

Find Your Local Community Emergency Manager Find Your Local Public Health Department

To report issues in obtaining PPE please notify:

Sadie Martinez
Access and Functional Needs
Coordinator
Office of Emergency Management
720.610.1691

sadie.martinez@state.co.us

More Information



www.cdc.gov/coronavirus/2019-ncov/



www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page



covid19.colorado.gov



Local Public Health Agencies www.colorado.gov/cdphe/find-your-local-public-health-agency



www.colorado.gov/hcpf/COVID

- Institute for Community Inclusion (ICI) released a <u>series of publications</u> on providing day and employment services during the COVID-19 pandemic
- Multicultural Council (MCC) released <u>COVID-19 Culturally and Linguistically</u> Diverse Resources
- <u>Video: Supporting Grayson's Family</u>, includes key themes that are relevant to home visiting during the COVID-19 pandemic
- Video: Una visita en el hogar con la familia de Liam (A Home Visit with Liam's Family), Ohio occupational therapist Marta Gonzalez delivers an early intervention home visit during the COVID-19 pandemic, illustrating how home visits using video conferencing can continue to support children and their families (in Spanish with English sub-titles)

CDC Guidance for People with IDD

The Centers for Disease Control (CDC) has released COVID-19 guidance, with a primary focus on family members and caregivers who support people with developmental disabilities.

- Guidance for Direct Service Providers
- Guidance for Group Homes for Individuals with Disabilities
- <u>Guidance for Direct Service Providers, Caregivers, Parents, and People with</u>
 Developmental and Behavioral Disorders
- People with Developmental and Behavioral Disorders

Here is a link to the CDC website:

www.cdc.gov/coronavirus/2019-ncov/hcp/developmental-behavioral-disorders.html

Emergency Response Desktop Suite (ERDS) Tool makes information more accessible and computers easier to use for people with IDD

- Provides accessible information about the coronavirus and how to stay well
- > Empowers people with new ways to stay in touch with others
- Encourages people to connect with the community

ERDS offered at no cost to 500 Colorado adults with IDD in certain situations

- ➤ Visit <u>www.colemaninstitute.org/covid-19/</u> and complete the engagement form
- ➤ If you have questions please contact Joelle Brouner at <u>joelle.brouner@state.co.us</u> or Shea Tanis at Shea.Tanis@cu.edu

Recorded Webinar: Addressing Social Isolation Through Technology Solutions

Administration for Community Living (ACL) presented a webinar highlighting how technology can be leveraged to increase social engagement, including specific hardware and software options. Presenters identify resources for acquiring and distributing technology, as well as mechanisms for training older adults and adults with disabilities to use technology solutions designed to mitigate social isolation.

- Recorded Webinar: Addressing Social Isolation Through Technology Solutions
- Webinar Transcript
- Webinar Slides

Training for new CMS nursing home reporting requirements

- The Centers for Medicare & Medicaid Services (CMS) released an <u>interim final</u> <u>rule</u> containing new nursing home requirements for reporting COVID-19 data, expected to begin May 8. Requirements include reporting information to the Centers for Disease Control & Prevention (CDC) through the National Healthcare Safety Network (NHSN) system and notification to residents, resident representatives, and families.
- Webinar training for the new LTCF COVID-19 Module for CDC's National Healthcare Safety Network is posted under the Training tab on their web page www.cdc.gov/nhsn/ltc/covid19/index.html

HUD Webinar on cleaning and disinfecting

- CDC and HUD hosted a webinar on cleaning and disinfecting to protect individuals residing in HUD-assisted multifamily properties. A representative from HUD's Multifamily Housing in conjunction with representatives from the CDC and Washington State Dept. of Health presented on their interim guidance on facility cleaning when a person with coronavirus infection is present or suspected. <u>View the Presentation</u>.
 - ➤ TARGET AUDIENCE: Managers and maintenance staff of HUD-assisted multifamily housing properties

Alzheimer's Association Colorado Chapter Resources for nursing homes and memory care

- The Alzheimer's Association knows that the COVID-19 pandemic is placing tremendous pressures on facilities and caregivers, and they have prepared a <u>guidance document</u> to assist staff in caring for persons with dementia in emergencies in long-term and community-based care settings. It also provides guidance on the importance of person-centered care the essential starting point for optimal care.
- More support is also available at alz.org/professionals-covid or at 800-272-3900

New CDC LTC Frontline Staff Training Webinars

- These short webinars are all published on the <u>Key Strategies to Prepare for COVID-19 in Long-term Care Facilities</u> (LTCFs) web page at the bottom under a "Webinar Series" section. CDC reports that "These new webinars are intended to be a training tool/resource for frontline long-term care staff members."
- Here are the direct links to each webinar:
 - Sparkling Surfaces https://youtu.be/t70H80Rr5lg
 - Clean Hands https://youtu.be/xmYMUly7qiE
 - Closely Monitor Residents https://youtu.be/1ZbT1Njv6xA
 - > Keep COVID-19 Out! https://youtu.be/7srwrF9MGdw
 - > PPE Lessons https://youtu.be/YYTATw9yav4

Other Links

- LeadingAge Colorado COVID-19 Updates & Resources
- <u>LeadingAge</u>
- Argentum
- Colorado Department of Public Health & Environment COVID-19 Long-term Care Facility Page
- Health Care Policy & Financing COVID-19
- Centers for Disease Control and Prevention
- Centers for Medicare and Medicaid Services

Next Steps

Thank You!

