

Centers for Medicare & Medicaid Services
National Nursing Home Stakeholder Call
Wednesday, August 25, 2021

Call Audio:

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>> Jean Moody-Williams:

Good afternoon, everyone. And thank you so much for joining the call today. I'm Jean Moody Williams, Deputy Director of the Center for Clinical Standards and Quality at CMS. I'm joined by my colleagues as well as the Center Director, Dr. Lee Fleisher. On behalf of all of all CMS, we continue to thank you for your work and your perseverance during the peaks and the valleys. But you continue to work to care for the residents under your care. And we truly do appreciate it.

So, as you know, we've been very busy with announcements impacting the long-term care community over the past couple of weeks. So I'm going to try and address them starting with the important approval of a vaccine that was definitely news worthy this week on August 23rd. The US Food and Drug Administration approved the first COVID-19 vaccine. And the vaccine we have known it as Pfizer BioNTech COVID-19 vaccine. I understand it will be marketed under the name Comirnaty.

It is for the prevention of COVID-19 disease in individuals 16 years of age and over. Now, the vaccine is also --it will also continue to be available for emergency use authorization for -- including those for children 12 through 15 years of age and for the administration of the third dose in certain immune compromised individuals.

As you know and as we've talked about many times on this call for over a year, nursing homes have been required to submit COVID-19 data to ensure we have a direct line of sight in how COVID is impacting nursing homes. Vaccine reporting has been required with IFC5. We've been monitoring the data you've provided.

We continue to thank you for that. We've seen that the average percent of staff vaccinated in nursing homes has been around 60%. And this data is all publicly available if you go to our website. It's been around 60% for several weeks. At the same time COVID cases continue to increase. So these data are concerning. Given the need to protect staff, residents, family, we continue to monitor that and have concern. As a result, the Administration announced last week and hopefully you heard that, our intent is to develop an emergency regulation requiring staff vaccination with Medicare and Medicaid participating long-term care facilities.

And we know that this announcement has generated a lot of questions, many of which we are not able to answer at this time given that we are in rule making. But what I can say and what was said was that

we intend to issue the regulation sometime in late September. At that time we will have another one of these calls so we can walk through the requirements, so that it can be implemented quickly.

We encourage you to put your questions or comments in the chat today about any of the topics that we're talking about and even about our plans for this emergency reg so that we can be considerate of that as we are moving forward in the rule making process.

One of the questions that I can answer that we've received was around enforcement of the regulations and issues of termination of facilities and workforce challenges. So those two questions have come up from the industry, from the press, from a number of people. So I do want to provide clarification for that. Now this new requirement will be enforced in the same manner that is expected of all Medicare and Medicaid certified facilities with regard to compliance, which typically means that we -- as we're continuing to evaluate our options, termination is not typically the first enforcement action that is taken, as you well know. We usually use a progressive pattern of enforcement and remedies in which there's notification. There can be civil monetary penalties, denial of payment, and ultimately removal from the Medicare, Medicaid program. Again, that is generally not where we go first. Lastly, as far as questions I can address immediately is we know that there have been concerns about staff leaving based on the vaccine requirement. We believe that this requirement would really level the playing field. All nursing homes are required to comply with this if they are Medicaid, Medicare certified because the absence of a national standard there could be inequities to nursing home care provided to residents. We feel this levels the playing field.

We've heard from providers that staff feel very safe in a nursing home or a facility that does require vaccination. We know that regulation sometimes takes a while. We're working as fast as we can to get it out. In the interim we strongly encourage nursing home staff get vaccinated right now. As noted in comment number 5, requirement still exists to educate, author, and to report. So that all resources can be brought to bear as we continue to work against the pandemic and the devastating impact that it has on everyone. So additionally, some discussions and announcements. We know that a third dose is now recommended for immunosuppressed residents, and potentially all residents in the future. We are encouraging all nursing homes to start planning now for a third dose. The CDC is with us today and they'll provide more information about the announcement and also how to enter this into NHCN.

I know they're doing additional training on that. I know they'll give us a few words on that. Additionally, all Americans will be able to receive a COVID-19 booster. We're, working with the CDC to provide information in the way individuals will be able to access vaccines in their community. But the goal is for people to start receiving booster shots sometime in the fall. I don't have a date for you exactly yet. But when eligible, starting eight months after they completed their initial vaccine series. But this, of course, requires authorization by the FDA and recommendation from ACIP, so nothing is official until that happens. What we are asking is you start thinking about all of these things and how you will put plans into action. And lastly, yesterday CMS announced an opportunity for Medicare beneficiaries to receive COVID-19 vaccinations in their homes ensuring that beneficiaries who have difficulty leaving their homes or otherwise hard to reach can receive the vaccination. So this includes second and third doses in smaller group homes, assisted living facilities, and other group living situations. So we're looking at payment and policy and all of these things combined.

We have a rich discussion here today. I don't want to take up any more time. I'm going to turn it over to Dr. Nimalie Stone from the CDC who many of you have heard are on these calls. She will give us a little more information on the vaccine. Nimalie.

>> Nimalie Stone:

Thank you, Jean. I appreciate so much the opportunity to join the call today. I want to take a few minutes to share with this audience some information about the planning under way to ensure that long-term care residents and staff have access to the COVID-19 vaccine. In anticipation of those recommendations coming from FDA and the CDC advisory committee on immunization practices for a booster dose. On this slide let's just start by talking through some of the considerations that we're taking as we are thinking about the strategies available. Really, I just want to emphasize how differently the circumstances are today compared with how things looked when the first rollout of vaccine into long-term care was implemented at the end of December. Today we have ample vaccine supply and many options for accessing doses. The implementation of booster doses in long-term care will be in the context of a much broader population of individuals eligible and interested in receiving vaccine. So we know that there may be concerns about having to negotiate for pharmacy support when there is that broader community interest and access happening to the vaccine. However, the really encouraging news is that all of you, as providers, have experienced working with both pharmacy and jurisdictional partners to obtain and administer vaccine. This program is really building on those available options to maximize flexibility.

On this slide you see kind of a high-level snapshot of how these pathways might unfold for providers to coordinate access for the residents and staff. We have significantly expanded the pharmacies that are participating in the federal retail pharmacy program, including both long-term care pharmacies and retail pharmacies. So many nursing homes will be able to work with their existing pharmacy partner to coordinate delivery and administration of vaccine. There are likely some assisted living and residential care communities that also have the opportunity to work with existing partners in the pharmacies similar to the approach they may be taking to bring influenza vaccine to residents. I think it's important to acknowledge that this coordination will be more critical in light of the timing of the booster doses potentially colliding with influenza vaccination. There's a strong infrastructure through retail providers and pharmacies. The intent of the program is to offer as much flexibility as possible so you can meet the needs of your residents and staff.

In addition, there are state and local health departments as well as federal supports to be a resource to ensure that these connections are being made between providers and vaccine providers. So that the -- there are more details that are coming in the future. We will be happy to take some questions. And these are just some existing resources that I hope you all are aware of. Let me close by just saying how much we appreciate the long-term care provider community and the efforts you're already taking to promote this vaccine. It's so critically important to protect staff and residents and everyone in your communities through these efforts.

I'm going to hand off to my colleague Kara Jacobs Slifka for some infection control updates. Thank you.

>> Kara Jacobs Slifka:

Hi, thank you so much. So as Jean shared at the beginning of the call, we have been seeing an increase in the transmission of SARS COV2 across the United States including the number of both nursing home staff and resident infections that are being reported. And with the knowledge that the highly infectious delta variant as the predominant strain, we are concerned about the amount of

transmission that is occurring. So it is more urgent than ever to follow infection control interventions including wearing a mask and getting vaccinated. Vaccination remains the best way to protect yourselves, to protect your residents, your family, and your community. And in addition to residents and staff, we encourage you to promote vaccination among family, friends, and even loved ones who are visiting your facilities. So sharing right now or being shared right now is a one-page fact sheet that we've put together with a goal to continue to emphasize some of those key infection prevention recommendations that can help prevent spread. We will make this available to you. We encourage you to please share this. So with the information here what we want to share is that CDC recommends wearing a mask, regardless of vaccination status. We recommend wearing a well vented mask or respirator for staff wearing a mask during visitation remains the safest way to prevent transmission and for residents able to tolerate wearing a mask when outside their rooms and during visitations they should do so well.

A few months back when numbers were lower, we had started the process of trying to create some exceptions for vaccinated individuals, but what I want to emphasize is that our key message, our key guidance for nursing home staff, for visitors and residents has not changed

If you're sick please get tested if you have symptoms of COVID-19 or any known exposures. So with that message, I want to thank you for your time and I want to thank you all for the work you're doing. And I want to introduce Monica Schroeder who I think who is up next from our NHSN team

>> Monica Schroeder:

Hi, yes. Thank you. Good afternoon. My name is Monica Schroeder. I'm with the CDC division of healthcare quality promotion. Thank you for providing timely updates related to the National Healthcare Safety Network or NHSN COVID-19 vaccination modules. Next slide. NHSN released weekly COVID-19 vaccination data reporting modules in December 2020 to allow facilities to report weekly COVID-19 vaccination data for residents and healthcare personnel.

Next slide. Based on the evolution of the pandemic and recommendations for additional vaccine doses and booster shots new questions have been added to the data collection forms effective this week. The main changes including new question 4 on the data collection form for facilities to report the cumulative number of individuals eligible to receive an additional dose of COVID-19 vaccine. And a new question 5 on the data collection form for facilities to report the cumulative number of individuals who received an additional dose of COVID-19 vaccine by manufacturer type. For the purpose of NHSN data reporting, facilities should refer to the updated CDC interim clinical considerations for use of COVID-19 vaccines for guidance to determine individual whose are considered eligible to receive additional doses or boosters after completing -- after receiving a complete vaccination series for the purpose of NHSN weekly COVID-19 vaccination data reporting.

Next slide. Updated training materials and supporting documents to assist facilities with completing these new questions on the NHSN data collection form have been posted to the NHSN long-term care component COVID-19 vaccination web page. This includes data collection forms and tables of instruction documents, training slides, CSV file upload materials and updated frequently asked questions. Updated tracking worksheets are under development and will be posted as soon as these updates are complete. A training webinar reviewing these changes was hosted by NHSN this afternoon. The slides for this training have been posted. A recording of this training will be available soon on the weekly COVID-19 vaccination web page for anyone who was unable to attend. We would like to thank everyone for your time and efforts in reporting COVID-19 vaccination information

Next slide. And as always, any questions can be directed to our user support team at NHSN@CDC.gov with the subject line weekly COVID-19 vaccination. That concludes my updates

>> Thank you so much. We have Evan Shulman who is the director of the division of nursing homes. He's going to give some remarks to the group. Evan?

>> Evan Shulman:

Thanks, Holly. Thank you, everyone. Thank you to all of you and your staff out there working hard every day working to protect our nursing home residents. I want to address one thing early on because we see all the questions on our end that you are submitting. We really would like to be able to answer questions about the rule that Jean Moody Williams mentioned that was announced last week. Unfortunately, there is something called the Administrative Procedures Act which prohibits us from talking about a pending regulation while we're in rule making.

So I know that a lot of you have a lot of questions about this rule. And we look forward to engaging with you as we move forward, but we are prohibited from discussing it right now. So then the question is, why did you have the call? Look, we thought because it was a big announcement, it's really important that we at least get on the phone with you all and start to engage with you and start to set the stage for further engagements in the subsequent weeks. So we look forward to talking with you about that. Unfortunately we cannot answer any questions about the rule right now.

>> Jean Moody-Williams:

Evan, with that, the questions are informative. I'll leave it at that.

>> Evan Shulman:

Yes. There's been other great information shared on this call such as the information that was just shared about NHSN. We look forward to engaging with you. I do want to talk maybe just a little bit about where we are with what we're seeing care going in nursing homes and some of the things we're seeing on surveys, and also some of the things we're seeing on cases. Yes, we are concerned about the trajectory of cases. They are increasing. However, I want to add a point that speaks to the protective nature of the vaccine. I think many of you know that nursing home cases generally follow the way that

community cases follow. So as community cases go up, the nursing home cases generally go up. We see this in many, many studies, that it is the communities around the nursing homes that are associated with higher levels of nursing home cases. That's why our testing guidance is based on the level of community transmission.

Throughout the pandemic that's been the case. It's still the case now. However, there is a difference. With community cases are where they are today, nursing homes are seeing, based on what's posted on our website, there were roughly around 3,000 resident cases and roughly 5,000 staff cases in the last week.

Before the vaccine was introduced and the United States with the same level of community cases, there were roughly 18 to 20,000 resident cases in a week, and roughly 17 to 20,000 staff cases in a week. So that's roughly five to six times more cases than now. So this really speaks to the protective nature of the vaccine and how important it is for everyone to get vaccinated. One other note about resident and staff cases is that, before the vaccine was introduced, resident cases per week were slightly higher than staff cases. Since the vaccine has been introduced, that has flip flopped, and there are more staff cases per week than resident cases. I think that speaks to how resident vaccination rates are much higher than staff vaccination rates, as Jean mentioned earlier in the call. It means the vaccination works great, which is great news. That said, we need to keep at our infection control practices and don't let up on those. One of the things we're concerned about is we're still seeing some breaches in infection control and prevention. Don't let the term, "I'm vaccinated" be an excuse to let your guard down. There are other people that need to be protected. Make sure you're doing all of the recommended practices for infection control and prevention to prevent the spread of the COVID-19 in nursing homes. Additionally, we're concerned about non COVID-related care areas such as weight loss or mobility, a resident's ability or need for assistance with activities of daily living. Those are other issues we're seeing on surveys and also in the data. We urge you to please do what you can to get back to those areas that they are not so much related to infection control but have obviously been impacted by the pandemic. We'll give you more information on that as we progress. But those are some of the things we're seeing in the data and on surveys.

Lastly, I'll speak a little bit to a lot of the questions we're getting related to staffing. Again, we can't talk about the specifics of the pending rule, but I will just mention a few things for thought from a different perspective. One of the things that Jean mentioned is there's a little bit of inequity. Right now we have some nursing homes that have implemented mandates and some have not. You have some staff that maybe want to go to a nursing home without a mandate. Conversely, though, we have staff that want to go to nursing homes with a mandate. Let's remember, even though we need to get staff vaccinations up, there are still a higher percentage of vaccinated staff than unvaccinated staff, since roughly 60% of staff are vaccinated. If vaccinated staff shift to facilities with a mandate, and unvaccinated staff shift to facilities without a mandate, we'll see inequity. With the patchwork of mandates in different states and facilities, the inequity will get bigger. Therefore, a national mandate levels the playing field for all nursing homes, and for staff to get vaccinated. I know there are other questions related to other providers or other non-healthcare employers. I will offer one other thing. That is not a day goes by when I see yet another major employer either in healthcare or outside of healthcare that is implementing a vaccine mandate. In other words, the options for people to go to other employers

without a mandate is becoming smaller and smaller, as all employers are really looking at this because the vaccine really is the most effective way to prevent transmission. So with that, I think-- I think we'll turn it back to you.

>> Jean Moody-Williams: Yeah. I'll just thank everybody. We'll continue as we work with the Administration to get information out to you as soon as soon as possible. Thanks to everybody that contributed. I really do appreciate all the questions. As you said, we can't answer them now, but believe me, they do let us know what -- the kinds of things we need to address as we are developing policy. So very much appreciated. And we will be back soon for another session to continue the dialogue. Thank you very much.

Holly, any closing comments or directions?

>> Holly Norelli: I just wanted to share with everyone that the recordings and transcripts for our calls can be found on the CMS web page under podcasts and transcripts. I did post the link in the Q&A. So if you would like to access that, you will be able to go back to any of our presentations and access that information. With that, this concludes our call. And we look forward to speaking with you all in the future. And thank you for all of the questions. Sincerely. Have a wonderful day.