Centers for Medicare & Medicaid Services
COVID-19 Call: Nursing Homes
Moderator: Alina Czekai
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Operator: This is Conference #4680237.

Alina Czekai: Good afternoon, thank you for joining our April 29 CMS COVID-19 Weekly Call with Nursing Homes. We appreciate you taking time out of your busy schedules to join us today. This is Alina Czekai leading stakeholder engagement on COVID-19 in the Office of CMS Administrator, Seema Verma. Today, we are joined by CMS and CDC leadership to share some important updates regarding nursing homes.

I'd first like to turn it over to Jean Moody-Williams. Jean is the Acting Director at the Center for Clinical Standards and Quality at CMS. Jean, over to you.

Jean Moody-Williams: Thanks so much, Alina, and thank you all again for joining. Each week, our numbers continue to be quite strong. People are tuning in and we're getting good information out and in. I've appreciated all the guest speakers that we've had and the questions that you've asked.

Today, we want to focus primarily on one topic, and that is related to – you may recall on April 19 we've announced a joint effort that was undertaken by CMS and CDC related to new data reporting that will soon be required for nursing homes. And so, that's what we want to primarily focus on today, giving some information, take some questions and move from there.

On the line, I have colleagues from both CMS and CDC to talk more in depth about the new reporting requirements, and the process for submitting data. As a participant on this call, you're going to be getting this information as we get it. You'll get some today and then we'll be getting more out to you shortly.

I believe many of you received a link to the website that CDC will talk about in just a moment. The new reporting for nursing homes allows us to monitor the current rate of transmission in facilities and helps identify ways to protect vulnerable residents and to meet the needs of nursing homes when we look at staffing and to know how to get information out related to PPE or other things.

Currently, nursing homes do not report this type of data to CMS or CDC, so we recognize that this is a critical gap. We get questions about this frequently, and in monitoring COVID-19 specific cases nationwide, we feel that this is really a need. And ideally, this change will help to create a more uniform system of nursing home surveillance.

Specifically, we're asking nursing homes to report new cases of infection directly to the CDC and, of course, fully cooperate agency surveillance efforts. So, as a part of this effort, CDC will provide a reporting tool, known as the National Healthcare Safety Network, NHSN, reporting module for nursing homes that will support this federal effort, and many of you are very familiar with NHSN, and what they've done is created a special module for this purpose.

We've worked very closely with them to streamline this reporting, to have it so that you're reporting to CDC and CMS can get the data from that site versus multiple sites for the federal effort. And we want to be cognizant of burden or the fact that you have to take time to do this. We feel it's just that important that we get the information, but we've also taken our responsibility quite seriously to try and make it as easy as possible.

I know you want to hear more about it, so I am going to turn to my colleagues now and we'll start with Jeneita Bell, and she can take it from there.

Jeneita Bell: Yes, thank you. Hello everyone. As mentioned, my name is Jeneita Bell, I'm a medical officer, a physician at CDC, and I'm a team lead with a long term care facility component of NHSN, or the National Healthcare Safety Network. I'm joined today by Dr. Angela Anttila, who's a subject matter expert in

infection prevention, who is on my team, and who also works in the long term care facility component of NHSN.

I want to make sure that everyone has an opportunity to review the web link that was provided to you. I'm going to make reference to that. If you haven't seen it already, you can look at it at a later date. I want to notify you that that's probably the best place to start in your journey in beginning to enroll and register with NHSN.

The website contains information about the component itself. It gives you information about its purpose and how the data will be used. It describes the module and the four pathways. The pathways are the resident impact and facility capacity, staff and personnel impact, supplies and personal protective equipment, and then last, ventilator capacity and supplies.

Toward the bottom of the webpage, there are tabs that provide additional information for you to enroll in NHSN, to review our training forms and instructions, and additional resources that may be of value to you as you get ready to get started. We realize that you're probably eager to learn more about this information, so that's the reason I have Dr. Anttila on the phone with us.

She's going to give you a brief overview of the module, the COVID-19 module, and she'll also describe some of the steps involved with enrollment, so that you're adequately prepared as you approach the system. I'll hand it over now to Angela. Thanks.

Angela Anttila: Hi, thank you, Dr. Bell. Hi everyone, I'm Angela Anttila, and as Dr. Bell mentioned, I am working with the long term care facility component within NHSN, the National Healthcare Safety Network, and have been working with this component and long term care facilities for nine years now.

I'm super excited about this new module that we are providing during COVID-19 response, and look forward to working with all of you in assisting you to get enrolled and reporting your data. So, as Dr. Bell mentioned, participation in this long term care facility COVID-19 module does require that facilities be actively enrolled in NHSN.

Active long term care facilities who already are enrolled in NHSN and have access to your data, you should already see the COVID-19 module on your home page, if you look in the left navigation menu. For those of you who are not already enrolled, or your facility is not already enrolled, you must complete an online facility enrollment process. And after you complete the online enrollment, you will be provided with a same-day access to the module using a username and password.

For those of you who have heard stories about that grid card and the SAMS enrollment process, we have simplified the process for you. You will not have to submit birth certificates and driver's licenses, and all those things that are typically required for the SAMS process.

We hope that this process makes it easier for you to enroll, and let me just go through some of the steps. I don't want to go into a lot of detail, just because I know that it's really hard to take all of this in when you're not seeing it on a piece of paper. But if you are in front of your computer, then what I'm about to go over with you, you will see on the LTCF COVID-19 web page, as Dr. Bell just mentioned.

By scrolling down to the enrollment section, and if you click on that little plus sign, it opens up enrollment, and then there's a separate link. Under there, where you would click that link, that takes you to a separate enrollment page. And it's really important that you follow the link from the LTCF COVID-19 webpage, because if you end up on a different webpage, it could take you through a completely different enrollment process.

Be sure to use the LTCF COVID-19 web page to begin your enrollment journey. There are four steps that you will go through essentially, and the first is you're going to get your computer ready to interact with NHSN. And that just means that – you're going to learn this in the enrollment training, as well as in the enrollment guidance document that we have available on our website.

There are some certain steps you have to take just to make sure that your computer is ready to receive emails from NHSN, and doesn't throw us in your

junk mailbox. During enrollment, you will be entering facility contact information. So, for example, the facility name, address, telephone number and very, very importantly, the CMS Certification Number, or CCN number.

Before you begin enrolling, I do recommend that you have that information in front of you. The other thing that you will need to do is select a person in your facility who will be what we consider the NHSN enrollment administrator, or facility administrator. That is going to be the person who will be basically enrolling the facility. Also, who will be receiving the emails and communications from NHSN, and likely the person who will be entering data into the module.

If possible, we do recommend that you have a second person as your back up. If you're not able to have a second person, totally fine, but we do recommend, if you're able to have two people as contacts. So, you'll have your NHSN facility administrator, and then you'll have an NHSN contact person. And that just ensures that if something happens, or if you need assistance, you already have someone else enrolled who can quickly give you a helping hand.

I mentioned the CCN number, it's very important that you enter that number during enrollment. We need that number to be able to associate your data with your facility. And you're going to have a correct email address. And that is also very important, because during the enrollment process you will receive emails with important links that you'll have to click to get to various places during the enrollment process.

Those are the main things that you're going to need to enroll. And the good news is that once you complete the four steps of enrolling, you ideally will receive access to reporting on that same day. We'll wait and see how many facilities enroll in one day. Hopefully, we're able to, that's our goal, access the same day.

Dr. Bell mentioned the four pathways of reporting and we do have some training coming up. As Dr. Bell mentioned, our website is a great place to go to, because it's a COVID-19 website for long term care facilities, because you

will see any upcoming training. We are offering a variety of training platforms and hope that we can meet everyone's needs.

For example, this week on the 30th – so that is actually tomorrow –Thursday, April 30, we will be kicking off training with an overview of the module itself, and data entry into the module, and that is starting at 1:30 Eastern Time. Don't worry if you're not able to attend, because we will be recording the training and we will be doing more. We will be having our live enrollment training for the COVID-19 module on Friday.

I believe that is at 1:30 pm Eastern Time. And, again, we will be repeating those trainings. So, take a look at the website, look at the training section so that you can see the options that are coming up. The first week in May, for example, you will see that we are repeating those trainings that are occurring this week.

We will also have what we're calling open office hours, in which users will be able to call in and ask questions live. This is something that our users have requested in the past, and we finally figured out a way to make it happen, and that is going to be through the open office hours and we will be using a Skype platform for that.

If you have availability to a computer, you can log in through Skype, and we'll also have a phone number available for you. The advantage of using Skype, is that if you need to see, like, steps to get someplace, we'll actually be able to share our screen with you. So the office hours is not something that you have to stay the whole time. They're going to be for one hour, and it's really for current and future users who have questions.

You can drop in at any time for that hour, ask any question, and you can drop out. We're offering that all of May. So, just look at our training calendar to put those dates on your calendar – what works for you. I think that my 10 minutes is probably up. But again, I just want to say that we look forward to working with you all, and we will try to make things as painless as possible. And I don't know if I'm out of time, guys, but if you wanted, I could talk a little bit about the reporting frequency if I have time, or could I stop.

Jean Moody-Williams: Yes, why don't you go ahead for a couple of minutes and then we still have time left for questions.

Angela Anttila: OK. So very briefly, I know that there's probably some anxiety about – "Oh gosh, how many times do I have to report inside this module?" So, I want to let you know that you have some flexibility. We do, of course, encourage more frequent reporting. If you are able to do daily reporting, that would give us, and you for your facility, the most up-to-date data for national surveillance, as well as for your individual facility, because you will be able to access reports for your facility, your data, and share them with your administrator.

An advantage of daily reporting is that you'll have better reports and more up-to-date data, but we do understand that daily is not feasible for many long term care facilities, especially if you're a smaller facility or you have limited resources, which we know that many long term care facilities do.

So, there's daily reporting, and then there's non-daily reporting, or weekly reporting. At a minimum, we do ask that users report at least once a week into the module. And again, that is so that we can make sure that we are getting that essential data that we need for national surveillance and to provide you with the public health efforts needed in your facility and for your residents. So, if you attend my training tomorrow, I will talk more in detail about the reporting options and how it can be done. I think that covers my section.

Jean Moody-Williams: Great, thank you. Yes, I'm sure there would have been questions, so I'm glad you're able to cover that. Jeneita, anything else, or should we open up?

Jeneita Bell: No, let's go ahead and open up. Thank you.

Jean Moody-Williams: OK, thank you. Operator, could you please cue up the first question?

Operator: Sure, ma'am. At this time, if anyone would like to ask a question, please press star, then the number one on your telephone keypad. That is star one on your telephone keypad. We'll pause for just a moment to compile the Q&A roster.

And we have our first question, participant who has 7700 on the last four digits of their phone number. Your line is now open.

Alina Czekai: Hi there, what is your question please? Looks like a 443 area code. Operator, can we go to the next question?

Operator: Sure ma'am. Our next question comes from the line of Melody Malone. Your line is now open.

Melody Malone: Thank you very much for taking my question. Will nursing home corporations be able to submit data for their entire corporation in one data submission methodology?

Angela Anttila: So, that is a great question. So are you referring to a bulk upload, like a CSV file, something like that?

Melody Malone: Yes, ma'am.

Angela Anttila: Yes. So, we did build that into the module. We thought that that could be a popular option, so yes. So, facilities will have the ability to submit data manually, as well as through a CSV file submitted by the individual facility, or through bulk CSV file upload from multiple facilities. And that's going to be easy, right on the first page of the module. And then we do have guidance documents on our webpage that give detailed instructions on how to do that, as well as downloadable CSV templates if they're needed.

Jeneita Bell: Hey Angela, I failed to mention earlier that our colleague, Lauren Wattenmaker, is also on the phone. So, I just want to see if Lauren had anything she wanted to add before we move to the next question.

Angela Anttila: Yes, please keep me honest.

Lauren Wattenmaker: No, you said it all right, exactly correct. I would just add that in order for an organization to do that, they need to have a group set up in NHSN, and the long term care facilities, or nursing homes, that they wish to upload data for need to be members of that group. And we have detailed guidance on the web page for those instructions.

Melody Malone: And let me clarify, if my line is still open, that means that even if they've not been submitting into NHSN before, they can set up a group under just the COVID reporting?

Lauren Wattenmaker: Yes, that's right. We just need to have those facilities that were not enrolled in NHSN before, currently enrolled in order to submit data on their behalf.

Melody Malone: OK, great. Thank you very much.

Lauren Wattenmaker: You're welcome.

Operator: Your next question comes from the participant who has 1623 on the last four digits of their phone number. Your line is now open.

Lisa Han: Hi, this is Lisa Han. Just a question about enrollment. If we're already enrolled and we want to have an additional person, are the instructions loaded for that quicker process, that they wouldn't need to go through the whole SAMS grid card or how do we need to do that? Thank you.

Angela Anttila: That's actually a great question. I'm trying to think of the best way to answer the question. So, you're already enrolled and you are reporting resident level data into NHSN, right?

Lisa Han: Correct. Correct.

Angela Anttila: OK. So, in that case, if you add a new user, that user would have to go through the full SAMS credentialing process. Because the new user will have access to resident level data, the two options are a little bit different. Our facilities who are already enrolled to the long term care facility component, they actually went through the full SAMS process with the credentialing where you had to submit your personal information. And the reason for that is because those users have access to personal identifiable – am I saying this right, Lauren – information, or resident level data.

Lauren Wattenmaker: Yes.

Angela Anttila: So anyone who you add in your facility, if your facility is reporting resident level data through other modules within the component, any new users would have to go through the full SAMS credentialing. So, it's only facilities who are enrolling specifically into that long term care facility COVID-19 module where there is not resident level data. Those facilities could add additional users who would not have to go through that full credentialing process.

Lisa Han: Would that also impact the ability to upload, like, CSV, if we have some facilities in our system that are enrolled than others that are currently not enrolled? So, I'm guessing that's going to impact the ability to do that upload as well?

Angela Anttila: Yes, I think …

Lisa Han: OK.

Angela Anttila: Well, Lauren, you can answer that. Lauren, I'll let you answer that.

Lauren Wattenmaker: Could you repeat that last part of the question?

Lisa Han: Sure. I just heard them talking about the CSV file would be able to, you know, upload for a whole system, and we're part of a system organization, and wondering if that would change then our ability to do that, since a lot of our facilities are already registered and doing resident level information.

Lauren Wattenmaker: I don't think that should change it at all, the fact that you have facilities already enrolled.

Lisa Han: OK, thank you.

Lauren Wattenmaker: Sure.

Operator: Your next question comes from the participant who has 7700 on the last four digits of their phone number. Your line is now open.

Female: Hi there, thank you for taking my question. This question is related to skilled nursing facilities and the 1135 waiver. The question is, does CMS have any plans to add more ICD 10 codes related to COVID-19, or is CDC going to be

adding any more ICD 10 codes relating to COVID-19 that will map to the MDS.

Right now, the only code that maps to either is 7.1 COVID-19, and there are a lot of residents that either are being skilled for exposure and symptoms which are not mapping, or residents are being skilled for exposure and symptoms and then come back with a negative test, so couldn't map in the end.

Jean Moody-Williams: OK. So, this is Jean, and I heard your question related to the ICD 10 coding. I am not sure that we have the right people on the line to answer that, but let me just check for a minute. Do we have any of our CM colleagues? OK. I don't think that we do, but if you could send that question in, we will get a response.

And also, for some of the more technical billing and coding questions, we are having office hours and we have all the SMEs, the subject matter experts, from CMS on those calls, and they can generally answer those more technical questions. So, thank you for that. I think we have …

Female: Can I ask a follow up to that?

Jean Moody-Williams: Sure, go ahead.

Female: My follow up question, as I've been participating in the office hours, is what's the turnaround time for an answer to an email to the COVID-19 CMS email address?

Jean Moody-Williams: Alina, do you have a response to the turnaround time?

Alina Czekai: Sure, yes. As you can imagine, we're getting a very high volume of inquiries to that inbox, but we're working to address them very quickly, within a couple of days, and that email address is covid-19@cms.hhs.gov. As Jean mentioned, we do have office hours tomorrow at 5 o'clock Eastern.

Jean Moody-Williams: OK, thanks.

Female: Do you recommend resending emails if they haven't been answered in two or
                    three weeks, or do you recommend waiting in the queue? I just don't want to
                    overburden the mailbox.

Alina Czekai: Sure. Perhaps resend your question and I can personally connect with our
                    team so we can look into your question. Thank you.

Female: Thank you, have a wonderful day.

Jean Moody-Williams: OK, thank you for that. And I see we are out of time. So, again,
                    thank you for joining. We will next week continue, you'll have time to look at
                    the link that was sent out, so there'll be additional questions. So, please join
                    us again next week and we will close out.

                    I'll turn it back to Alina to close us out.

Alina Czekai: Thanks Jean. Thanks everyone for joining our call today. Again, hope you
                    will consider joining our office hours tomorrow at 5 o'clock Eastern for any of
                    your additional technical questions with our subject matter experts. Please
                    continue to direct your questions to covid-19@cms.hhs.gov.

                    And again, we appreciate all that you are doing for nursing home residents
                    and their families around the country as we address COVID-19 as a nation.
                    This concludes today's call. Thank you.

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