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Official CMS news from the Medicare Learning Network®

SPECIAL EDITION

Friday, May 8, 2020

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News

[New Guidance Available on Requirements for Notification of Confirmed and Suspected COVID-19 Cases Among Residents and Staff in Nursing Homes](#)

Nursing homes are now required to report the first week of COVID-19 data to the Centers for Disease Control and Prevention (CDC) beginning May 8 but no later than May 17. For the first time, all 15,000 nursing homes will be reporting this data directly to the CDC through its reporting tool. This reporting requirement is the first action of its kind in the agency's history. On April 19, [CMS announced](#) the agency would be requiring facilities to report COVID-19 information to the CDC and to families. Within three weeks of that announcement, on April 30, CMS issued an [Interim Final Rule with Comment Period](#) with the new regulatory requirements. As nursing homes report this data to the CDC, we will be taking swift action and publicly posting this information so all Americans have access to accurate and timely information on COVID-19 in nursing homes.

CMS has a longstanding requirement for nursing homes to report cases of communicable diseases, such as COVID-19, to the appropriate state or local health department. This new requirement not only helps health departments intervene when needed but serves to provide awareness to the public (e.g., families) and surveillance for public health agencies and the CDC. The importance of ongoing transparency and information sharing has proven to be one of the keys to the battle against this pandemic. Building upon the successes of the Trump Administration prior to COVID-19, CMS has strongly supported transparency, such as the work done over the past several years to improve public access and understanding of nursing home inspection reports and expand the information available to consumers on Nursing Home Compare. The agency remains committed to greater transparency and plans to publicly release new data by the end of May. CMS will never stop working to give patients, residents, and families the clearest and most accurate information possible.

[Guidance and Frequently Asked Questions](#)

[Telehealth Video: Medicare Coverage and Payment of Virtual Services](#)

This updated [video](#) provides answers to common questions about the expanded Medicare telehealth services benefit under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act.

Medicare Pharmacies and Other Suppliers May Temporarily Enroll as Independent Clinical Diagnostic Laboratories to Help Address COVID-19 Testing MLN Matters® Article

A new MLN Matters Special Edition Article SE20017 on [Medicare Pharmacies and Other Suppliers May Temporarily Enroll as Independent Clinical Diagnostic Laboratories to Help Address COVID-19 Testing](#) is available. Learn how to temporarily enroll to be an additional laboratory resource to meet the urgent need to increase COVID-19 testing capability.

COVID-19: IRF Flexibilities During the PHE

CMS is exercising regulatory flexibilities for Inpatient Rehabilitation Facilities (IRFs) during the COVID-19 Public Health Emergency (PHE) to waive the 60 percent rule.

We are also waiving IRF coverage and classification requirements if all of these criteria are satisfied:

- Patient is admitted to a freestanding IRF to alleviate acute care hospital bed capacity issues
- IRF is located in an area that is in Phase 1 or has not entered Phase 1; see [Guidelines for Opening Up America Again](#)

Add the following letters at the end of your unique hospital patient identification number (the number that identifies the patient's medical record in the IRF) to identify patients eligible for each waiver:

- D- 60 percent rule
- DS- Coverage and classification requirements
- DDS- Both 60 percent rule and coverage and classification requirements

For More Information:

- [COVID-19 Emergency Declaration Blanket Waivers for Health Care Providers](#): See page 10 for 60 percent rule
- [Interim Final Rule](#): Coverage and classification requirements

COVID-19: IRF Interdisciplinary Team Meetings During the Pandemic

CMS expects Inpatient Rehabilitation Facilities (IRFs) to hold in-person weekly interdisciplinary team meetings to discuss Medicare Part A fee-for-service patients. During the public health emergency, it may be safest to conduct meetings electronically. We will accept all appropriate forms of social distancing precautions.

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