

Centers for Medicare & Medicaid Services
Skilled Nursing Facilities and Long Term Care Open Door Forum
Moderator: Jill Darling
December 17, 2020
2:00 pm ET

Coordinator: Welcome and thank you for standing by. All participants are in a listen-only mode until the question-and-answer session of today's call. At that time, you'll be able to press star 1 to ask a question. I'd like to inform all participants that today's call is being recorded. If you have any objection you can disconnect at this time. It's my pleasure to turn the call over to your host, Jill Darling. You may now begin, ma'am.

Jill Darling: Great. Thanks, (Michelle). Good morning and good afternoon everyone and happy holidays and welcome to today's Skilled Nursing Facilities and Long Term Care Open Door Forum. Before we get into our one agenda item today, I have one brief announcement. This Open Door Forum is open to everyone but if you are a member of the press you may listen in but please refrain from asking questions during the Q&A portion of the call. If you do have any inquiries please contact CMS at Press@CMS.HHS.gov. And I'd like to hand the call off to (John Kane).

(John Kane): Thank you, Jill and everyone, thank you very much for being on today's call. The one thing I just want to say first and foremost, is just a very, very large thank you to all of you that are working within this space. So this - the pandemic is obviously a very complicated and difficult issue for all of us to handle. But for those working within this space and working with nursing homes, it has been particularly significantly difficult.

And we just truly cannot thank you all enough, for all of the work that you guys are doing to help patients and help your residents get through this time.

And now that vaccines are starting to roll out, we're hoping that maybe the end is in sight as far as the pandemic is concerned.

One thing I would also note is that we are constantly updating the CMS Web site. You can get to the Coronavirus Disease 2019 Updates through the homepage of the CMS Web site where we have a plethora of different materials, FAQs, all sorts of other documents to help people navigate the various rules and waivers and everything else that is - that's been put into effect during this pandemic.

We recently just posted an infographic in relation to covering monoclonal antibody treatments in a variety of settings, but in particular, nursing homes. There's - so again, there's new information there that if you haven't been to the Web site in the last few days, I would suggest that you go back and check it out and see what new information is there.

So with that, I will pass it over to (Heidi) to speak to our one agenda item. Thank you.

(Heidi Magladry): Hi everybody. This is (Heidi) with the SNF QRP. I just wanted to take an opportunity to provide a reminder that as of December 1st, Nursing Home Compare has been retired, but you'll still be able to find the same information about nursing homes and other healthcare providers on Care Compare on Medicare.gov.

Additionally, the provider data catalog on CMS.gov also makes it very easy for you to search and download our publicly reported data. And those new Web site addresses are provided on the agenda. And that's all I have. Passing it back to you, Jill.

Jill Darling: Thanks, (Heidi) and thanks, (John). We'll open the lines for questions. We do have a few folks on the line. So hopefully we can help you out with your questions today. And as always, I'll throw out the SNF Long Term Care mailbox which is located on the agenda. It's always there for you to email any questions and comments you have. So (Michelle), can we please open the lines?

Coordinator: Yes, ma'am. If you'd like to ask a question you can press star 1 on your phone, unmute and record your name. Again, it is star 1. It'll be one moment for the questions to come through. As a reminder, it's star 1 to ask a question. Ms. Darling, I see no questions at this time. Or one question is coming. One moment. Our first question comes from (Cindy Bright). Your line is open.

(Cindy Bright): Hi. And thank you very much. I am with Cerner Corporation and I have a kind of general question about the upcoming rollout that will start very soon, for the vaccines for COVID-19. I wondered if CMS will be issuing any regulatory guidance around that vaccine administration since it will be done by a third party. Will there be any instructions to the providers?

(John Kane): Hi. This is (John Kane). So could you clarify a bit, are you, in terms - are you talking about regulatory guidance in terms of how to bill for the vaccines, in terms of...

(Cindy Bright): Tracking...

(John Kane): ...provision of - I'm sorry. Go ahead.

(Cindy Bright): I'm sorry. The tracking and monitoring. Since the - since in most cases, the vaccine will be administered by let's say CVS or Walgreens, they're going to, you know, provide information on who they've administered the vaccine to,

which dose it is with the client. And will need to track of this and what requirements do they have around informed consent? You know, just the - where we have specific guidance for flu and pneumonia now, will we have guidance around COVID-19?

(John Kane): So defer to my other colleagues if they want to add anything to this. But I think that certainly from a billing perspective, in many ways we have tried to treat this as we would treat any vaccine, such a as flu vaccine. And so in terms of its administration, in terms of documentation around what's required to - in terms of what's required to be maintained within the records around the provision of the vaccine to your patients, I think that those would follow the same regulatory guidance as you would see for other types of vaccines.

(Cindy Bright): Great. Thank you.

Coordinator: Our next question comes from (Phyllis Shafter). Your line is open.

(Phyllis Shafter): Hi. My question regards a lot of questions we've been getting from relatives and staff wanting to know about the safety - if it's okay to drop off takeout food for their loved ones during the holidays, or drop off plates of cookies and snacks. With that, I will yield for your answer. Thank you.

(John Kane): Hi, this is (John). I'm not sure if any of my (unintelligible) colleagues who've worked on the - any of the guidance or the visitations or anything like that, if you guys have anything you want to add or anything you'd want to suggest for her.

So hearing none, my suggestion would be to submit that question to the SNF LTC ODF mailbox. We can certainly get it over to the right people. And then there may be something that we can do in terms of either updating FAQs or

some way of getting this information out. I think it's a great question. So we can certainly get information out about it.

(Phyllis Shafter): Thank you.

Coordinator: Our next question comes from (Grant Edelson). Your line is open.

(Grant Edelson): Thank you for having these calls. It's also a vaccine question and I'm not sure if it's one that CMS can answer or if it's more of an HHS. But we're hearing that it may not make sense to vaccinate our residents and staff at the same time if we're monitoring for side effects with the residents and yet the staff themselves, may have a reaction or need to be out - home sick for several days with side effects, or reactions to the vaccine.

Is there any way to influence, you know, CVS or Walgreens to say come more time so we can stagger this? You know, I know it's being - and graciously done by the government to have them come out. But we're so used to doing flu on a staggered schedule and it seems like, you know, we're two or three visits and done and we're not seeing how that's going to work to really vaccinate staff at the same time as residents. So any help on that could be appreciated.

(John Kane): Yes. I think that question is definitely beyond the pay grade of anyone that is on this call and more likely a question that is for HHS proper as opposed to CMS. So we can certainly - if you want - again, if you want to submit the question to the SNF LTC ODF mailbox, we can try and get it over to our colleagues in some of the other departments in HHS and see if they would be able to - if there is any information that they'd be able to share on that.

But I'm afraid we don't really know the answer to that type of question.

(Grant Edelson): Thank you.

(John Kane): Thank you.

Coordinator: Our next question comes from (Matthew Hoskins). Your line is open.

(Matthew Hoskins): Hello. And thank you for having these calls. I'm not sure if you're going to be able to answer this but I have a post-vaccination question. We are getting a lot of questions about the testing guidance post-vaccination, if we'll have to be tested and how often we will have to be tested. I'll wait for your answer. Thank you.

(Christine Teague): Hi. This is (Christine Teague) from the Division of Nursing Homes. And at this time there are no changes to the guidance as far as testing. There's currently not enough information to be able to determine what we're going to do as far as the frequency of testing. So until you receive any further guidance, please continue to test along the same testing schedules that you are already following.

Coordinator: Our next question comes from (Abby). (Abby), your line is open.

(Abby): Hello. Actually I don't know if I'm in the right section to ask this question. So if not, we can put it to later. But I am from the Home Health Agency in Ohio and of course, we are - our state right now is going through a surge in cases of COVID, especially our county. So my question relates to the changes in the home health payment schedule of obviously we've known that there'll be a no pay (rep) coming.

But they've also implemented the major penalties for not getting the (rep) in, in the five days. Has there been any discussion or talk about any type of waiver to, you know, give us a little bit of grace for this, because of what we're dealing with? And we're seeing a census increase of 100 patients from what we were pre-COVID. I guess I just wanted to know - I feel like I understand that the no pay (rep) has come; we've been expecting it.

But the penalties of having the five days and the weekends actually count, is pretty great right now.

(John Kane): Yes. So there's definitely no one on the call that I think would be able to answer questions in relation to home health payment policy. And so I - actually and, but Jill I believe - I just want to note that there was a home health ODF coming up at some point. Did that already pass or...

((Crosstalk))

Jill Darling: Yes. It was yesterday.

(Abby): Oh, okay. I must have got on the wrong call. So I did not realize that. Thank you.

Jill Darling: No, that's okay. That's okay. I was - I just brought up - if you want to email the home health hospice and DME ODF email I can give that to you.

(Abby): Oh, I would - that would be great.

Jill Darling: Sure. It's HomeHealth_Hospice_DMEODF-L@CMS.HHS.gov.

(Abby): All right. Thank you.

Jill Darling: Sure thing.

Coordinator: Thank you. As a reminder, if you're - if you'd like to ask a question it's star 1. If your question has been answered, please press star 2. Again, that's star 1 to ask a question; star 2 to withdraw the question. Our next question comes from (Melissa). (Melissa), your line is open.

(Melissa): Great. Thank you so much for taking my question. My question is related to the waiver and then also the submission fee final rule where it mentioned that until the public health emergency expires and the last day of the year, that they're allowing practitioners in private practice which generally required direct supervision, so onsite, they're allowing it to be general so long as the supervisor is available for audio and video.

So my question there is what type of documentation are you expecting, or are you expecting when we have to use that waiver to reduce exposure to the patient's work, the employees? And then the second question to that is on previous calls, when people have had question about the hospital waiver or extending the 100 day Medicare benefit period, it's been recommended that the provider reach out to their MAC just to let them know what's going on.

Is this something that you expect as well that providers should be doing, should they find themselves needing to use the general (versus) direct, supervision? Thank you.

(John Kane): Is anyone on the call familiar with that particular waiver? Unfortunately I think it's outside of our (field) of expertise. I'm sorry. I hate to keep doing this, but unfortunately I don't think we have anyone on the call that can speak

to that particular waiver. So if you could submit the question then we can figure out who to best direct it to.

(Melissa): I will do that. That's the CMS dot HHS email?

(John Cain): Yes.

(Melissa): Or COVID-19? Okay.

(John Cain): I mean you can certainly submit it to the COVID-19 mailbox, but you can also submit it to the SNF LTC ODF mailbox and we can figure out who to best get it to.

(Melissa): Okay, great. Thank you.

Coordinator: Our next question comes from (Diane Henry). Your line is open.

(Diane Henry): Thank you for taking my call. My question is on the quality measure, we previously were using the composite scorecard to address how nursing homes were improving in their quality measures. Is it your recommendation and guidance that we now use the nursing, you know, the Care Compare and five star rating system?

(Ellen): Hi, this is (Ellen). When you say scorecard what are you referencing?

(Diane Henry): Previously CMS put out a composite scorecard. We use that looking at the quality measures. I believe it was last year that we were looking at that. And now that we're using the composite scorecard, just wanting to make sure that we should switch over to just using Care Compare or is there some other guidance that you would provide?

(Christine Teague): This is (Christine). So I believe that the composite scorecards came from the QIN QIOs. Is that where you're getting those from?

(Diane Henry): Yes. Yes. They did. That's (unintelligible).

(Christine Teague): Okay. So then I would contact your QIN QIO for that question. Because they're the ones that are calculating those scorecards for you.

(Diane Henry): Yes. And they said that they are not using the composite scores anymore because CMS is not.

(Christine Teague): Okay. So then we would not - if they're no longer doing that; if that's what the QIN QIO has told you, then we do not have an availability. That was a special project through the statement of work for the QIN QIOs. So CMS would not have composite scores for the facilities at this time.

(Diane Henry): Okay. Thank you.

Coordinator: Our next question in queue comes from (Barbara Beardsley). Your line is open.

(Barbara Beardsley): Thank you for taking my question. In Wisconsin I understand that we are going to be receiving the Moderna vaccine for our residents and staff and I'm just wondering how long after the EUA is - the EUA comes out for that vaccine, will we be receiving vaccine information sheets similar to what has come out for the Pfizer vaccine, so that we can start to educate our staff and the residents?

(Christine Teague): This is (Christine) from Division of Nursing Homes again. So you're wondering how long the vaccine information sheets will be available after the vaccine comes out?

(Barbara Beardsley): When will they be available from you, after the authorization is completed?

(Christine Teague): Oh, okay. So I don't have that information at this time. But you will see public announcements. I would check the CDC Web site once they have received an EUA to use that vaccination. The CDC would then have information regarding the Moderna vaccines and you should be able to find all that information there.

(Barbara Beardsley): Okay. Thank you.

(Christine Teague): And there are also contracts with Walgreens and CVS, to assist and do clinics in the facilities. So know that CVS for their Pfizer vaccination, has already posted a lot of the documentation. So you may want to also check the CVS and Walgreens Web site as well as the CDC, for vaccine information sheets.

(Barbara Beardsley): Okay. Thank you.

Coordinator: Our next question comes from (Katie). (Katie), your line is now open.

Woman: ...answer.

(Katie): Hi. Thank you for taking my call. I'm calling in from a SNF organization in Ohio and I have a PBJ question. I am wondering - so I sent an email to the PBJ inbox about any waivers or anything related to the pandemic and they did

reply that providers that submitted incomplete information for PBJ, their star rating would be suppressed.

And I'm just wondering how they determine incomplete. So if files were submitted, you know, but we did not have the time to review them and make sure that all of the hours were included and send updated files, how do they determine that they're incomplete and suppress the rating versus dropping the rating?

(John Kane): Is anyone on that can speak about PBJ?

Woman: Yes. Would you mind sending your question to the (staffing) mailbox and we can get a response back to you?

(Katie): Sure. Thank you.

Coordinator: Our next question comes from (Jennifer Swain). Your line is open.

(Jennifer Swain): Thank you so much and good afternoon. My question has to do with the quality measures. With the quality measures beginning to be unfrozen as of January 27th, can you confirm the data that is being used will be data ending June of 2020 for all of the measures, or will it just be for the claim space measures?

(Dan Turner): Hi. This is (Dan Turner). I work for Division of Nursing Homes. If you can send your question to the Better Care email address, we had a similar question come in today and we're - I'm currently answering that. So if you could just send that question in and I can get back to you. It's no problem.

(Jennifer Swain): Thank you.

(Dan Turner): No problem.

Coordinator: Our next question comes from (Donna Ellston). Your line is open.

(Donna Ellston): Thank you for taking my call. I just have some questions around the monoclonal antibodies there. Could you give some logistics? If our pharmacy or contracted pharmacy, does not have the medications but our hospital that we receive - we are partners with has the medications, can we receive the medications from the hospital as opposed to our contracted pharmacy? Can they mix them or does our pharmacy need to mix them? And then what kind of contracts do we need for that?

(Christine Teague): Hi. This is (Christine) from Division of Nursing Homes again. Are you in the SNF setting?

(Donna Ellston): Yes.

(Christine Teague): Okay. So I'm going to ask you to send that question to us at - to our DNH triage mailbox. And that is DNH for Division of Nursing Homes, underscore triage team all one word at CMS dot HHS dot gov.

(Donna Ellston): Okay. Thank you.

(Christine Teague): Thank you.

Coordinator: As a reminder, it's star 1 to ask a question, unmute your phone and clearly record your name. Thank you. Our next question comes from (Leslie Valmer). Your line is open.

(Leslie Valmer): Good afternoon. I wanted to ask a question about testing. We're in accounting now that requires testing twice a week. Is there a timeframe in between the tests? I've been unable to get clarification on that.

(Christine Teague): Hi. This is (Christine Teague), Division of Nursing Homes. So you - are you in an outbreak status?

(Leslie Valmer): No, ma'am. We're above 10% for our county. So we...

(Christine Teague): Okay.

(Leslie Valmer): ...test our...

(Christine Teague): So...

(Leslie Valmer): ...employees. Yes.

(Christine Teague): So you're in a twice a week testing status. Ideally you would have your testing twice a week as spaced out as evenly as possible. Like you don't want to test somebody two days in a row. You want to space them out maybe three, four days. If you do not have your test results back before the next test is due, there are some places that are having trouble getting test results quick enough, then the CDC is recommending that you do not test the person again, until you have the first set of test results.

So if you do a test on someone for example, on day one, and you go to test them on day five but you still didn't get the first set of test results back, they're recommending that you hold onto testing the first and the second time that week, until you get the first result back.

(Leslie Valmer): Okay. Thank you very much.

(Christine Teague): You're welcome.

Coordinator: Ms. Darling, I see no other questions in queue at this time.

Jill Darling: Okay. Great. Well we can end today's call. We appreciate you all dialing in and having your questions for us. If you think of a question later after the call, please feel free to email us at the [SNF LTCODF-L@CMS.HHS.gov](mailto:SNF_LTCODF-L@CMS.HHS.gov). That email is always on the agenda. So please feel free to use it. And we thank you for your time and happy holidays everyone.

Coordinator: That concludes today's call. All participants may disconnect at this time. Speakers, please standby.

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