



# Long-Term Care and the COVID-19 Pandemic

**Adam Mather, Inspector General**

**Keith Knapp, Senior Advisor**

**Health, Welfare, and Family Services Committee**

**August 26, 2020**

# CHFS Office of Inspector General

The Office of Inspector General is the regulatory and licensing agency for all:

- health care facilities;
- child care facilities;
- long-term care facilities; and
- child adoption/child-placing agencies

in the commonwealth.

# COVID-19 Pandemic in Kentucky

- Novel Coronavirus (COVID-19): respiratory disease that can cause serious illness or death, particularly among older adults with chronic health conditions
- Kentucky's 1st confirmed case: March 6, 2020
- Kentucky's response has consistently followed guidelines from:
  - White House COVID-19 Task Force
  - Centers for Disease Control and Prevention (CDC)
  - Centers for Medicare and Medicaid Services (CMS)

# COVID-19 Pandemic in Kentucky LTC

As of 8/24

3,238

CASES AMONG LTC RESIDENTS IN KY

1,883

CASES AMONG LTC STAFF IN KY

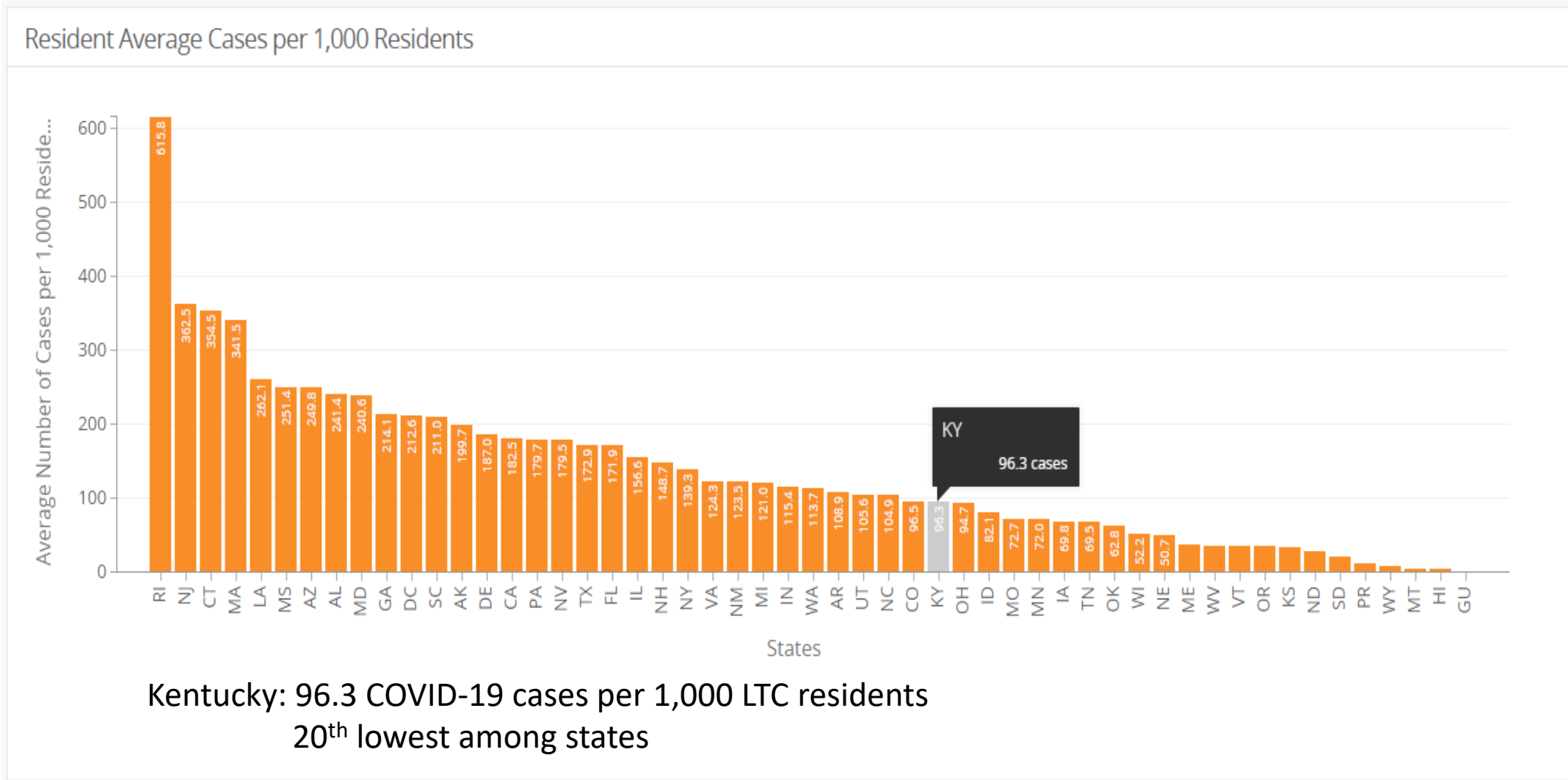
520

DEATHS AMONG LTC RESIDENTS IN KY

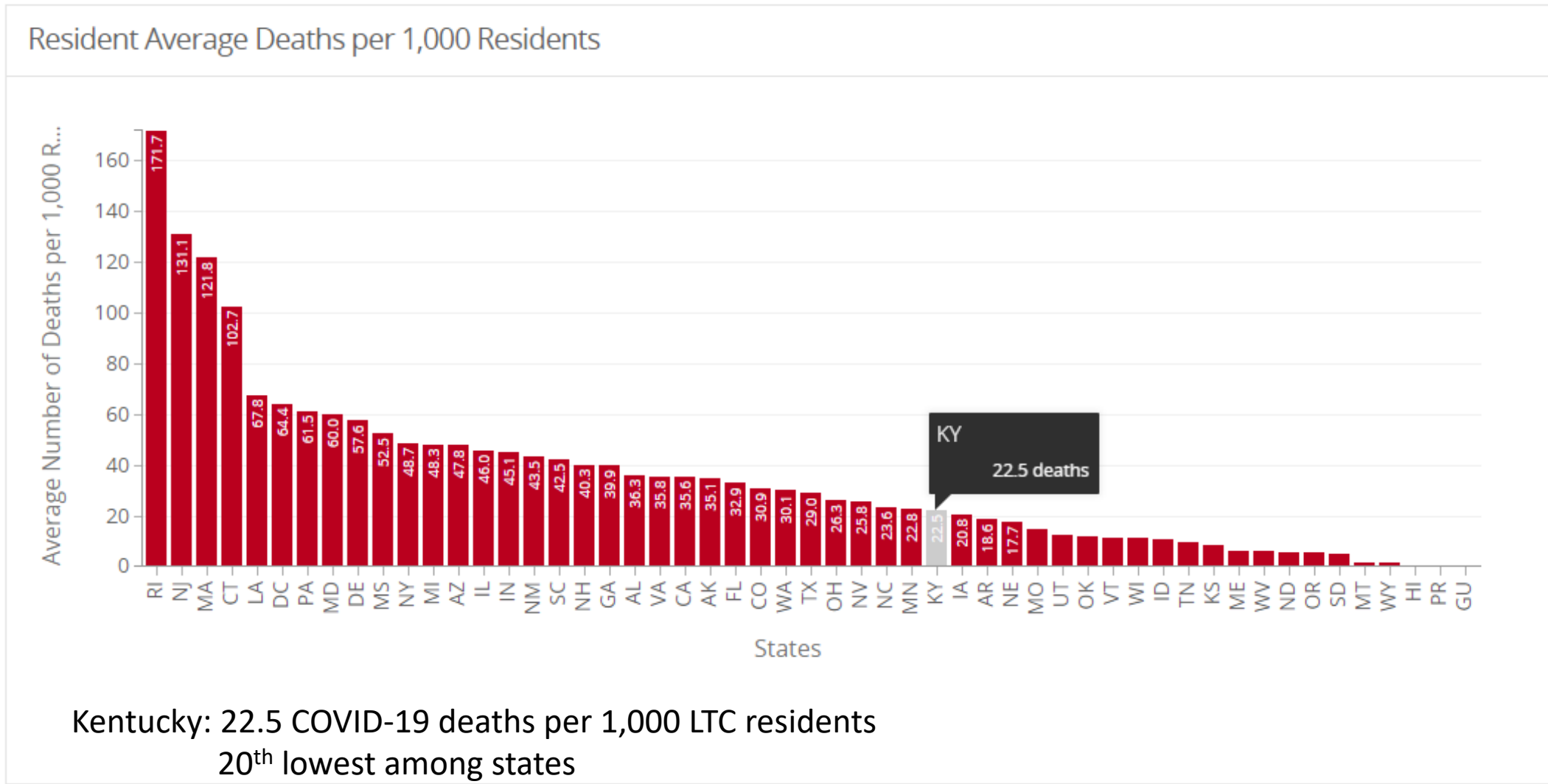
5

DEATHS AMONG LTC STAFF IN KY

# LTC Resident Cases of COVID-19



# LTC Resident Deaths Due to COVID-19



# Long-Term Care Facilities & COVID-19

- Congregate settings for frail adults in KY > 34,000 *plus* staff
  - 285 LTC Facilities > 22,000 residents
  - 231 Personal Care Homes and Assisted Living Communities ≈ 12,000 residents
  - 16 ICF-Individuals with Intellectual Disabilities > 450 residents
- Once COVID-19 has been introduced, it can spread rapidly among residents, staff members, and visitors
- Underlying health conditions and/or advanced age
  - ⇒ greater risk: severe illness and death

# Long-Term Care Facilities & COVID-19

- Rapid and sustained public health interventions
- Focus: surveillance and infection control / prevention
- Mitigation efforts = resource-intensive
  - Critical to curtailing COVID-19 transmission and decreasing impact on vulnerable populations (*such as LTCF residents*) ~ CDC
  - Long-Term Care Advisory Task Force
  - Global and surveillance testing in LTCFs



# Long-Term Care Task Force

- **Purpose**

Serves CHFS Secretary as a professional resource on COVID-19 in LTC and recommends evidence-based policies, procedures, and protocol

- **Membership** (10 volunteers + 6 staff)

LTC practitioners (clinical & leadership), regulators, and consumer advocates

- **Meeting Frequency:** at least weekly

- **Process**

Queries (LTC providers + regulators + public)

⇒ Research and apply most recent evidence

⇒ Recommend action

⇒ Provider guidance

⇒ Monitor outcomes and re-evaluate, as indicated

# Guidance: Long-Term Care Advisory Task Force

<b>April</b>	Admission / discharge / transfer protocols Provider call center (KDPH/HAI & Norton)
<b>May</b>	<i>Update:</i> admission / discharge / transfer protocols Palliative care and emergency medications on-site Universal baseline C-19 PCR testing: staff and residents Oral health and phased resumption: on-site salons
<b>June</b>	Phased reduction of restrictions Adult day health, adult training LTCF: activities, dining, off-site appointments and visits
<b>July</b>	<i>Surveillance:</i> C-19 PCR testing: staff and residents

# Guidance: Phased Reduction of Restrictions

## Adult Day Health Centers & Adult Day Training

- Temperature check & screening
- Transportation & essential visitors
- PPE, transmission precautions, & distancing
- Disinfect between uses

## LTCFs

Group activities

Communal dining

Off-site appointments

Visits

## Per CMS Phase II-III Guidelines

- ≤ 10 and no high-touch items
- Social distancing-driven
- Provider-operated vs. private vehicle
- 28-day (NH)/ 14-day (AL/PC) w/o new cases
- Designated area & staff-supervised
- Exception: compassionate care

# Long-Term Care – Global Testing

- Comprehensive, baseline testing of ALL residents & employees of nursing facilities
  - Completed July 15
- Norton Healthcare partnership
  - Planning, testing, and wrap-around support
  - Provider 24/7 helpline with KDPH/HAI Team
- CMS designated Kentucky’s program a “State Best Practice”

# Long-Term Care – Ongoing Testing

- Consistent with CMS guidance, CHFS is offering LTCFs CARES Act funding to provide ongoing surveillance testing.
- Providers should test:
  - Each staff member at least bi-weekly
  - Each resident who develops symptoms of COVID-19
  - All staff and residents exposed to another resident or staff member who tests positive
- Bill to CHFS directly: labs performing tests & LTCF sampling

# Long-Term Care Strike Teams

- Help address staffing issues at LTCFs due to symptomatic staff
  - Can deploy anywhere in KY  
(determined by Emergency Management and KDPH)
- Team: 2 licensed nurses + 4 certified nursing assistants

# Other LTCF Support

- Federal
  - \$129M provider relief funds
  - \$5B pledged nationally (state allocation to be determined)
- Kentucky - Medicaid
  - COVID-specific Medicaid rate: \$270/day
  - Expanded bed-hold days from 15 to 30
  - Expedited eligibility
  - Increased Medicaid payments to LTCFs by 8.5%
    - January-June of 2019 = \$496,992,997
    - January-June of 2020 = \$539,429,413
- Kentucky – Provide and distribute personal protective equipment (PPE)

# Long-Term Care Ombudsman

- Identify, investigate, and resolve residents' problems and concerns
  - March 13 - July 31:
    - 7,753 contacts (telephone and virtual) made statewide
      - 4,225 with LTCF residents and families
      - 3,528 with LTCF staff
- CARES Act funding
  - PPE for ombudsman visits in LTCFs
  - COVID-19 educational materials to LTCF residents and families



# Other COVID-Related Initiatives

- Infection control surveys
  - OIG completed initial round before 39 other states (*per CMS*)
  - Weekly: OIG completes focused IC surveys per CMS Report
- CMP emergency grants for tablets & other devices to conduct tele-visits with family
  - OIG publicized opportunity & processed applications
  - 224 facilities received grants

# Coronavirus Aid, Relief, & Economic Security (CARES) Act – LTC

- Comprehensive Baseline COVID-19 Testing \$5.56M
  - LTCF residents and staff (n = 61,000)
  - Childcare (n = 1,500)
- Contract with Norton (through July) \$418,220
  - Provider call center + test-sampling + supplies + travel
- Strike Teams (to date) \$151,170
- Other
  - PPE
  - Educational resources
  - Surveillance testing program (initiated 8/3)

# Going Forward: Key Anticipated Issues

- Resident safety ⇔ emotional toll of extended isolation
- Sufficient staffing
- PCR testing
  - Supply chain / availability: reagents
  - Turn-around time for results
- Personal protective equipment (PPE)
  - Gowns
  - Fit-testing for N-95 masks
- Influenza season



## Questions