Long-Term Care and the COVID-19 Pandemic

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Health, Welfare, and Family Services Committee
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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
Kentucky: 96.3 COVID-19 cases per 1,000 LTC residents
20th lowest among states
Kentucky: 22.5 COVID-19 deaths per 1,000 LTC residents
20th lowest among states

Source: CMS as of 8/2/2020
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

April  
Admission / discharge / transfer protocols  
Provider call center (KDPH/HAI & Norton)

May  
*Update*: 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

June  
Phased reduction of restrictions  
Adult day health, adult training  
LTCF: activities, dining, off-site appointments and visits

July  
*Surveillance*: 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