

UPDATE CORONAVIRUS (COVID-19)



Stay informed. Take precautions. Stay safe.

Dear Members,

Earlier this week, Mass-ALA informed you of the EOEIA recommendation that ALRs follow the Long Term Care Surveillance Testing guidance issued by the Department of Public Health on [October 5, 2020](#). As a follow-up to that email, we would like to call your attention to a major policy change outlined in the guidance.

Prior to this guidance, surveillance testing was to be performed on 30 percent of staff every 2 weeks if the positivity rate in the region in which the ALR is located was below 40 cases per 100,000. Effective October 15th, new guidelines specify the following:

- If testing results indicate that there are no positive COVID-19 staff and the region has below 5% for a positivity rate, the ALR must conduct testing every 2 weeks on 50% of its staff.
- If the results indicate that there are no positive COVID-19 staff and the regional positivity rate is at or above 5%, the ALR must conduct testing every 2 weeks on all staff.
- If the surveillance testing indicates that there are positive COVID-19 staff member(s,) the ALR must conduct weekly testing of all staff until the testing results in no new positive COVID-19 staff for 14 days.
- Additionally, if the staff testing results indicate a positive COVID-19 staff members(s,) the ALR must conduct testing of all close contacts of the staff member(s) who tested positive, as well as all residents on any unit, floor, or care area where the staff member worked.
- If the testing of residents indicates a positive COVID-19 resident(s,) the ALR must conduct weekly testing of all staff until the testing results in no new positive COVID-19 cases among staff for 14 days.
- Once the 14-day goal has been met, the ALR must follow the surveillance testing program indicated for those ALRs that have no new positive COVID-19 cases (see the first two bullet points above) beginning the next full week. Please refer to the guidance (linked above) for additional details and information.

Click here for the Memorandum on Reimbursement Instructions for Assisted Living Residences: <https://www.mass-ala.org/wp->



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To: Skilled Nursing Facilities, Rest Homes, Assisted Living Residences
From: Kevin Cranston, MDiv, Director, BIDLS
Elizabeth Daake Kelley, MPH, MBA, BHCSQ
Date: October 5, 2020
RE: Updates to Long Term Care Surveillance Testing

A. Overview

This memorandum applies to all long term care settings including nursing homes, rest homes and assisted living residences (ALRs) and shall take effect on October 15, 2020. To align with the Centers for Medicare and Medicaid Services (CMS) surveillance testing recommendations, the Department of Public Health (DPH) is updating this surveillance testing memorandum to make conforming changes to the definition of staff and the threshold metric and region used to trigger more intensive testing. Compliance with the testing program is required in nursing homes and rest homes. Compliance with the testing program is recommended in ALRs.

To protect the health and safety of long term care residents and staff against the spread of COVID-19, all long term care settings must continue to implement the surveillance testing program that began with baseline staff testing completed no later than July 19, 2020, in accordance with this updated memorandum and, with respect to nursing homes participating in MassHealth, with accompanying MassHealth guidance. Any test conducted in accordance with this guidance must be able to detect SARS-CoV-2 virus, with a polymerase chain reaction (PCR) of greater than 95 percent sensitivity and greater than 90 percent specificity.

For the purposes of a provider's surveillance testing program, a "week" means from 7:00 AM Thursday morning through 6:59 AM the following Thursday morning.

This testing program may be updated as more is learned about the COVID-19 virus.

B. Surveillance Testing Program

1. No New Positive COVID-19 Cases from Staff Testing

If the testing results indicate there are no positive COVID-19 staff and the

county positivity rate in which the long term care provider (hereafter “provider”) is located is below five percent as a 14-day rolling average, the provider must conduct testing every two weeks on 50% of its staff. The staff to be included for testing must be a representative sample from all shifts and varying staff positions and must ensure that all facility staff are tested at least once a month. If the ongoing surveillance testing indicates there are positive COVID-19 staff member(s), the provider must follow the surveillance testing program outlined below for “New Positive COVID-19 Cases from Staff Testing” beginning Thursday of the next full week.

If the results indicate there are no positive COVID-19 staff and the county positivity rate in which the provider is located is at or above five percent as a 14-day rolling average, the provider must conduct testing every two weeks on all of its staff. If the ongoing surveillance testing indicates there are positive COVID-19 staff member(s), the provider must follow the surveillance testing program outlined below for “New Positive COVID-19 Cases from Staff Testing” beginning the next full week.

Positivity rates by county are included in the weekly report that may be found here: <https://www.mass.gov/info-details/covid-19-response-reporting# covid-19-weekly-public-health-report->

1. New Positive COVID-19 Cases from Staff Testing

If the staff testing results indicate there are positive COVID-19 staff member(s), the provider must conduct weekly testing of all staff until the testing results in no new positive COVID-19 staff for 14 days. Once testing results in no new positive COVID-19 staff for 14 days, the provider must follow the surveillance testing program outlined above for “No New Positive COVID-19 Cases from Staff Testing” beginning the next full week.

Additionally, if the staff testing results indicate a positive COVID-19 staff member(s), then the provider must conduct testing of all close contacts of the positive COVID-19 staff member and all residents on any unit, floor or care area where the staff member worked as identified during the provider’s outbreak investigation and to ensure there are no resident cases and to assist in proper cohorting of residents. Testing must take place as soon as possible and within 48 hours. If the resident testing results indicate there are positive COVID-19 resident(s), the provider must conduct weekly testing of all staff until the testing results in no new positive COVID-19 staff for 14 days. If there are no COVID-19 cases after 14 days then the provider must follow the surveillance testing program outlined above for “No New Positive COVID-19 Cases from Staff Testing” beginning the next full week.

For purposes of this memorandum, close contact is defined as being within 6 feet of someone who has COVID-19, for 10 or more minutes, while they were symptomatic or within the 48 hours before symptom onset or, if asymptomatic, the 48 hours before the test was completed to the 10 days after the test was completed. Symptoms of COVID-19 include fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.

C. Previously Positive Individuals Cleared from Isolation:

Individuals previously diagnosed with COVID-19 infection confirmed by

molecular diagnostic testing may continue to have PCR detection of viral RNA for several weeks. This does not correlate with the presence or transmissibility of live virus.

Accordingly, for the purposes of the surveillance testing program, recovered or previously COVID-19 positive residents and staff do not need to be re-tested and will not be included as part of total staff when determining if the facility met the required staff surveillance testing thresholds. However, it is clinically recommended for individuals previously diagnosed with COVID-19 to be retested under the following circumstances:

i. Individuals who were previously diagnosed with COVID-19, and who develop clinically compatible symptoms, should be retested if they are more than 3 months past their release from isolation and an alternate etiology cannot be identified by a provider. If viral RNA is detected by PCR testing, the patient should be isolated and considered to be re-infected.

i. Individuals who were previously diagnosed with COVID-19 and who are identified as a close contact of a confirmed case should be retested and subject to quarantine if they are more than 3 months from their release from isolation. These individuals may quarantine in place.

E. Staff Definition:

For purposes of conducting testing and implementing a surveillance testing program and, in accordance with CMS and CDC guidance, long-term care staff includes: employees, consultants, contractors, volunteers, caregivers who provide care and services to residents on behalf of the facility, and students in the facility's nurse aide training programs or from affiliated academic institutions reporting to the facility during the relevant testing period. For the purposes of a long-term care provider's surveillance testing program, staff does not include: persons who work entirely remotely or off-site, employees on leave, such as paid family medical leave, or staffing provided at the Commonwealth's expense (such as those provided by EOHHS through a clinical rapid response team or the Massachusetts National Guard). Any testing completed by the provider must capture required Department of Public Health information about each staff person including but not limited to gender, age, race, ethnicity, primary city/town of residence, disability, primary language and occupation.

Long term care providers in Massachusetts are encouraged to monitor the CMS and CDC website for up-to-date information and resources:

- CMS website: <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>
- CDC website: <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>

Additionally, please visit DPH's website that provides up-to-date information on COVID-19 in Massachusetts: <https://www.mass.gov/2019coronavirus>.

**The information provided in this COVID 19 update is solely for general informational purposes to assist in understanding the evolving guidance regarding the current COVID 19 public health threat. It is not intended to be a primary public health or medical resource, but is provided as a clearinghouse for or compilation of various guidance issued by official and related sources.*

