

# Agenda, 6/11/2020



Topic	Presenter/Facilitator
Global / National / State Novel Coronavirus (COVID-19) Epidemiology Update	Jennifer MacFarquhar, MPH, BSN, RN, CIC  Director, SHARPPS Program
Infection Prevention Key Recommendations	Jennifer MacFarquhar, MPH, BSN, RN, CIC Director, SHARPPS Program
Easing of Restrictions in Congregate Care Facilities	Jennifer MacFarquhar, MPH, BSN, RN, CIC  Director, SHARPPS Program
Testing Guidance	Susan Kansagra, MD, MBA  NC Division of Public Health  Scott M. Shone, PhD, HCLD(ABB)  Director, NC State Laboratory of Public Health
PPE Distribution Updates	Kimberly Clement, MPH, Paramedic Program Manager, Healthcare Preparedness Program
Medicaid Update	Dave Richard Deputy Secretary NC Medicaid
Discussion / Q&A	Call Participants – Please type questions in chat feature





# Logistics for today's COVID-19 Forum

#### Question during the live webinar



#### Technical assistance

technicalassistanceCOVID19@gmail.com

#### **RCC (Relay Conference Captioning)**

Participants can access real-time captioning for this webinar here:
<a href="https://www.captionedtext.com/client/event.aspx?EventID=447">https://www.captionedtext.com/client/event.aspx?EventID=447</a>
3301&CustomerID=324

Saving Lives, Saving the Economy, Strengthening our People



#### **Epidemiology & Infection Prevention**



Epidemiology Update

Infection Prevention Recommendations & PPE

Guidance

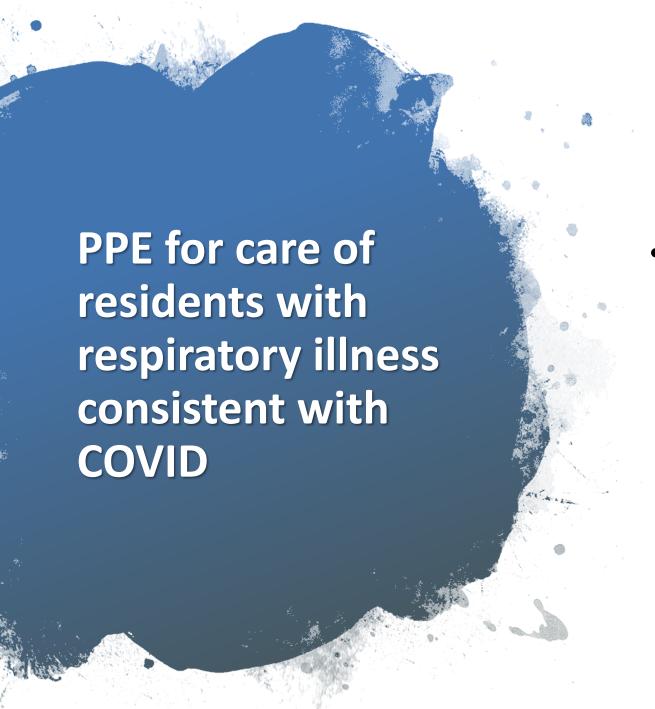
Easing of Restrictions in Congregate Care Facilities



# **Epidemiology & Infection Prevention Recommendations**

- Cloth face covering: residents
- Facemask: staff
- Cohorting/Grouping
- Maintain 6 ft social distancing
- Hand hygiene
- Screening





- In addition to face mask, wear
  - Gown
  - Gloves
  - Eye protection



• In areas with MODERATE to SUBSTANTIAL transmission, in addition to face mask, wear:

• Eye protection



### **Testing Guidance**



North Carolina is focused on rapidly <u>increasing testing</u> of people who may not currently have symptoms, but may have been exposed to COVID-19. This includes:

- Anyone with symptoms suggestive of COVID-19.
- Close contacts of known positive cases, regardless of symptoms.
- Groups of some of the populations with higher risk of exposure or a higher risk of severe disease if they become infected. People in these groups should get tested if they believe they may have been exposed to COVID-19, whether or not they have symptoms.
  - People who live in or have regular contact with high-risk settings (e.g., long-term care facility, homeless shelter, correctional facility, migrant farmworker camp).
  - People from historically marginalized populations who have been disproportionately impacted by COVID-19. This <u>fact sheet</u> provides best practices for community testing in historically marginalized populations.
  - Frontline and essential workers (grocery store clerks, gas station attendants, child care workers, construction sites, processing plants, etc.)
  - Health care workers or first responders.
  - People who are at <u>higher risk</u> of severe illness.
- People who have attended protests, rallies, or other mass gatherings could have been exposed to someone with COVID-19 or could have exposed others.



### **Testing Site Locator**



Home About COVID-19 V Dashboard V Latest Info V Information For V Guidance V How To Help

COVID-19 Test Site Finder: Get Information on Coronavirus Testing Near You

Powered by community. Brought to you by Castlight



Anyone with symptoms of COVID-19, such as fever, cough or shortness of breath, or anyone who has been exposed to someone with COVID-19 should self-isolate and talk to a health care professional.

- If you are experiencing symptoms of COVID-19 contact your health care provider or telehealth program to discuss whether you should be evaluated for testing.
- Call the test site before you go to learn about testing criteria, availability, hours and location. Not all health care providers provide testing on-site. Some require an appointment and/or referral from a health care provider. Locations are subject to change.
- Each COVID-19 test provider will determine if testing is appropriate based on your symptoms, risk factors and test availability.

CINIC	/ V -	TECT	TINI.	$\boldsymbol{c}$	CI.	ГС
FINE	JΑ	IEDI	III	G.	)I	

Address

Submit



#### **CDC Testing Guidance on Nursing Homes**



- Test all residents and staff in the nursing home if there is a new confirmed case of COVID-19
- Expect to identify multiple asymptomatic residents and staff with SARS-CoV-2 infection and be prepared to cohort residents and mitigate potential staffing shortages
  - If testing capacity is limited, CDC suggests directing testing to residents and staff on the same unit or floor of a new confirmed case.
  - If testing all residents on the same unit or floor is also not possible, CDC suggests directing testing to symptomatic residents and staff and residents who have known exposure to a case (e.g., roommates of cases or those cared for by a known positive staff).



#### **Long-Term CARE PPE Distribution - COMPLETE**

N	CPH
North (	Carolina ilealth

٧	AAA Region		PPE Dis	tributed		
Date		Face Shields	Gloves	Procedural Masks	Shoe Covers	<b>Details</b>
15	<ul><li>Region K (Henderson)</li><li>112 Facilities</li><li>Franklin, Granville, Person, Vance, Warren</li></ul>	13,132	131,320	26,264	13,132	<ul> <li>Utilized Louisburg UMC parking lot and Agricultural Center in Williamston.</li> <li>Incorporated timed distribution plan.</li> </ul>
MAY	<ul><li>Region Q (Washington)</li><li>146 Facilities</li><li>Beaufort, Bertie, Hertford, Martin, Pitt</li></ul>	17,800	119,000	38,250	12,650	(Coordinated across HHS/Ombudsman/NCEM)
19-20 MAY	<ul> <li>Region G (Kernersville)</li> <li>760 Facilities</li> <li>Alamance, Caswell, Davidson, Davie, Forsyth, Guildford, Montgomery, Randolph, Rockingham, Stokes, Surry, Yadkin</li> </ul>	148,280	1,107,000	273,400	76,900	<ul> <li>Utilized Greensboro coliseum area and Charlotte Fire Department warehouse.</li> <li>Incorporated timed distribution plan.</li> </ul>
21-22 MAY	<ul> <li>Region F (Charlotte)</li> <li>663 Facilities</li> <li>Anson, Cabarrus, Gaston, Iredell, Lincoln, Mecklenburg, Rowan, Stanley, Union</li> </ul>	134,281	1,453,500	278,600	67,200	(Coordinated across HHS/Ombudsman/NCEM)
26 MAY	<ul><li>Region A (Sylva)</li><li>83 Facilities</li><li>Cherokee, Clay, Graham, Jackson, Macon, Haywood, Swain</li></ul>	16,898	168,980	33,796	16,898	<ul><li>Civil Air Patrol conducted distribution.</li><li>Furthest Western Point.</li></ul>
27 MAY	<ul><li>Region B (Asheville)</li><li>249 Facilities</li><li>Buncombe, Henderson, Madison, Transylvania</li></ul>	41,779	413,730	88,254	40,851	Utilized Western NC Ag Center in Fletcher, NC
27 MAY	<ul> <li>Region R (Hertford)</li> <li>52 Facilities</li> <li>Camden, Chowan, Currituck, Dare, Gates, Hyde, Pasquotank, Perquimans, Tyrrell, Washington</li> </ul>	14,220	137,700	27,200	15,400	• Furthest Eastern Point.
28-29 MAY	<ul><li>Region J (Durham)</li><li>619 Facilities</li><li>Durham, Chatham, Johnston, Lee, Moore, Orange, Wake</li></ul>	97,874	1,005,400	205,250	97,874	<ul><li> Utilized Raleigh Convention Center.</li><li> Third largest distribution conducted.</li></ul>
1 JUN	<ul><li>Region D (Boone)</li><li>67 Facilities</li><li>Alleghany, Ashe, Avery, Mitchell, Watauga, Wilkes, Yancey</li></ul>	13,230	114,500	31,600	17,100	<ul> <li>Utilized Caldwell Community College.</li> <li>Worked with Civil Air Patrol to distribute PPE.</li> </ul>
Totals:	3,526 Facilities Across 92 Counties	640,462	6,239,830	1,491,994	508,525	



#### **Long-Term CARE PPE Distribution - COMPLETE**

LTH AND							
`			PPE Dis	tributed		e n	lealth
Date	AAA Region	Face Shields	Gloves	Procedural Masks	Shoe Covers	Details	
2 JUN	Region C (Morganton) • 162 Facilities • Cleveland, McDowell, Polk, Rutherford	21,783	227,250	121,842	27,388	Utilized WPCC Fire Training Facility	
2 JUN	Region E (Morganton) • 121 Facilities • Alexander, Bruke, Caldwell, Catawba	26,427	294,750	168,558	34,332	Combined Region C and E Operations	
3 JUN	Region L (Wilson) • 147 Facilities • Edgecombe, Halifax, Nash, Northampton, Wilson	24,365	245,000	52,300	24,365	<ul><li> Utilized Red Oak Fire Department</li><li> Civil Air Patrol Assisted</li></ul>	
3 JUN	Region O (Boliva) • 107 Facilities • Brunswick, Columbus, New Hanover, Pender	30,200	428,600	60,080	31,800	<ul><li>Utilized Brunswick County Emergency Services Building</li><li>Conducted by Civil Air Patrol</li></ul>	
3 JUN	<ul> <li>Region P (Kinston)</li> <li>238 Facilities</li> <li>Carteret, Craven, Duplin, Greene, Jones, Lenoir, Onslow, Pamlico, Wayne</li> </ul>	40,193	393,100	86,600	55,440	<ul><li>Utilized Lenoir Community College</li><li>Civil Air Patrol Assisted</li></ul>	
Totals:	3,526 Facilities Across 92 Counties	640,462	6,239,830	1,491,994	508,525		

**North Carolina** 











#### LTC Outbreak Response dashboard





129

**Outbreak Coordination Touchpoints** 

County & Regional Partners

**TERMS Volunteers** 

1604 Vetted

**187 Pending** 

117 Deployed



347

Active Missions: 1 (As of 09 June)

Active Staffing: 19 of 24 Shifts

**Medical Shifts Covered** 

**ECU Workforce Efforts** 

**33 Facilities** 

**1571 Personnel** 

3837 Referrals



Shifts Filled / Requested

Facilities Requesting Volunteers:

Requested Shifts:

1054

22

Percent Covered:

33.5%

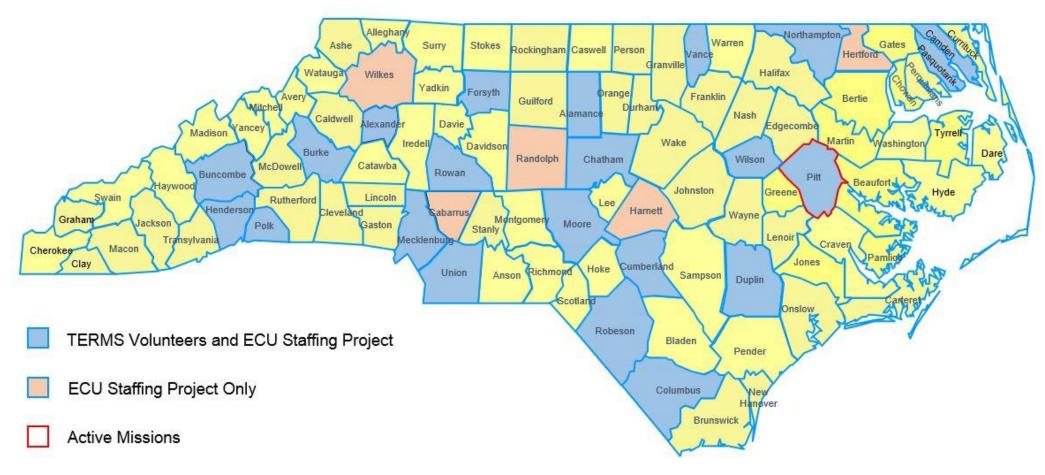
Response Team Lead (ESF-8 Desk)

- PPE (ESF-8 Desk)
- Testing (ESF-8 Desk)
- Staffing (ESF-8 Desk)
- Infection Prevention (TATP)
- Regulatory (DHSR)
- Coordination Touchpoint (Healthcare Coalitions)
- Adult Protective Services



# **Staffing missions**









# NC Medicaid's Goals Related to Congregate Care/LTSS COVID-19 Response

To support COVID-related response and needs among facility-based and community LTSS providers, by leveraging Medicaid resources to:

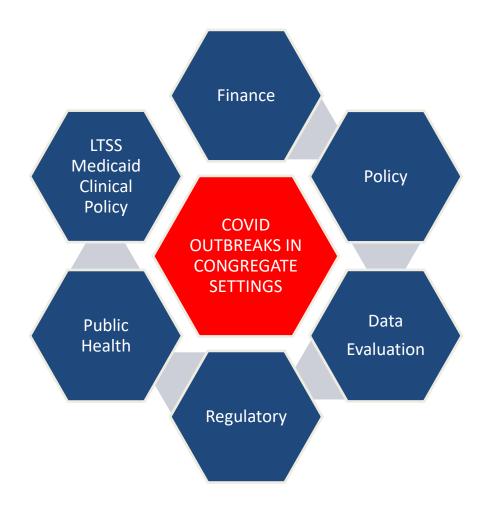
- Effectively support the care of COVID+ residents.
- -Accommodate needs related to hospital discharge surge.
- Reduce transmission through effective infection management and prevention.
- Increase service flexibility for provider networks impacted by crisis.







# Like All Things Related to Long-Term Care... The Response has been Interdisciplinary





#### What Medicaid-funded COVID rate adjustments apply to group homes?



"Group home" is a broad term representing a wide range of congregate living arrangements, each defined under specific licensure rules. Group homes in NC may provide different Medicaid -funded services depending on the licensure designation and service populations.

If a group home is serving Medicaid-funded beneficiaries, it may be eligible for servicespecific rate adjustments, as reflected below:

- Under Medicaid State Plan Personal Care Services: See Special Bulletins COVID-19 #32 and #82.
- Under Innovations/TBI waiver: Contact your contracted <u>LME/MCO</u>.
- An Intermediate Care Facility for Individuals with Intellectual/Developmental Disabilities (ICF/IID): Contact your contracted LME/MCO.
- If a group home serves residents who are eligible for Special Assistance, please contact DAAS dedicated email for additional guidance on related to COVID-specific Special Assistance payment adjustments at <a href="mailto:tempfacpay@dhhs.nc.gov">tempfacpay@dhhs.nc.gov</a>.

In addition to the rate adjustments reflected here, additional service flexibilities have been established to support providers and are published in NC Medicaid's Special Bulletin Series and through Division of Health Services Regulation (DHSR).





#### How long will COVID-specific rate adjustments be in effect?

- COVID-related rate adjustments reflected in Medicaid Special Bulletins are in effect until June 30, 2020 but may be extended, subject to funding availability and the duration of federal and North Carolina's States of Emergency.
- For rates managed through the LME/MCOs, please contact your contracted LME/MCO for information about COVID-specific rate duration.

# Does a provider have to experience an Outbreak before drawing down Medicaid rate adjustments?

While Special Bulletins COVID 19 #82 and #93 are specific adjustments made for supporting COVID+ Medicaid beneficiaries, NC Medicaid has also provided service-specific rate adjustments to support provider's prevention activity and overall response to the COVID emergency. Please see <a href="Special Bulletin COVID-19 #88">Special Bulletin COVID-19 #88</a> for additional information.



#### **Goal: To Effectively Support the Care of COVID+ Residents/Clients**



#### **Special Bulletin 93 Released**

- Rate realignment and increased hour availability to support in-home personal assistance under State Plan PCS and CAP/DA, CAP/C serving COVID + clients.
- Reporting requirements will align with those for Outbreak Facilities.
- Reporting period <u>extended for April and May reporting until Friday</u>, June 19<sup>th</sup>, 2020.
- NC DHB is hosting the 2<sup>nd</sup> of 2 training sessions this Friday, June 12, 11:30-12:30.
- Please register at: <u>https://attendee.gotowebinar.com/register/4918419383599195917</u>
- For more information, please email:
   Medicaid.ProviderReimbursement@dhhs.nc.gov







About Hardship Advancements	Medicaid.Hardships@dhhs.nc.gov
About COVID-related Rate Increases	Medicaid.ProviderReimbursement@dhhs.nc.gov
About Reports Required of Outbreak and Response Facilities and Home- Care Providers	Medicaid.ProviderReimbursement@dhhs.nc.gov
About COVID-related flexibilities in Medicaid Policy	Medicaid.covid19@dhhs.nc.gov





## **Questions and Answers**