



**MEMBER BRIEFING:  
Aug 5 -Universal Eye Protection & PPE FAQ, Testing Consent, Test Reporting,  
Updated HUD FAQ  
August 5, 2020**

**OF SPECIAL NOTE**

**DHS/OHA Release FAQs on Universal Eye Protection**

Yesterday, DHS/APD Safety Oversight and Quality Unit (SOQ) issued [NF-20-110](#) with an attached [OHA Frequently Asked Question on Universal Eye Protection in LTC Facilities](#). Because the issue of **gowns** was not addressed in the FAQ, LeadingAge Oregon reached out to SOQ for further guidance. Late yesterday, we were informed that gowns should be worn for the care of residents with known or suspected COVID-19 and that if PPE supplies allow, gowns are recommended for the care of residents under observation after a new admission/readmission. SOQ has shared both the LeadingAge Oregon [member PPE questions](#) and [member testing questions](#) with a small team they are working with at OHA to get answers to outstanding questions out to providers as quickly as possible.

The FAQ on eye protection answers questions SOQ has received on OHA's recommendations released previously in [NF-20-101](#), including but not limited to:

- **Are providers required to follow this guidance?**  
Yes, the FAQ states that DHS requires all LTC providers to follow OHA's guidance and recommendations. Requests for information on how to implement universal eye protection may be requested by using the [OHA consultation request form](#).
- **Which staff are required to wear universal eye protection?**  
The FAQ states both goggles and face shields are acceptable but emphasizes that face shields are preferred for staff providing direct resident care. It also states that all staff, including staff performing housekeeping or environmental services, don eye protection (in addition to universal masking) upon entering the facility.
- **At what times/for what tasks must universal eye protection be utilized?**  
Face masks and eye protection are required during breaks if social distancing cannot be maintained and if it must be removed for comfort, eating and drinking, then staff should leave the resident care area and ensure they are at least 6 feet from others.
- **What options are there for kitchen staff where wearing eye protection is challenging and for staff that cannot wear it due to a medical condition?**  
The FAQ states that for kitchen staff goggles may be preferred and that if eye protection is not tolerated, safety glasses with extensions to cover the side of the eyes may be

considered as a last resort. If staff can ensure they can stay at least 6 feet from others they may temporarily remove their eye protection.

For staff that cannot tolerate wearing required eye protection due to a medical condition, the FAQ states providers should ensure that such staff wear other PPE components (i.e. masks) appropriately and carefully observe facility social distancing policies. Consideration should be given to altering work duties for these staff to prevent potential exposures to COVID-19, such as reassigning them to administrative duties or ensuring they do not provide care or services to residents at higher risk of infection (e.g. residents with suspect or known COVID-19, exposed residents, those under observation after new admission). In a separate communication, OHA stated staff should receive education regarding PPE options and how COVID-19 is spread so that they make informed decisions about their PPE use while in the facility. SOQ also let LeadingAge Oregon know that they do not want facilities to lose loyal staff at this time and if there are continued challenges, the facility should contact SOQ to help work through it.

### **APD Releases LTC Testing Reporting Requirements Reminder**

Yesterday APD released [NF-20-111](#) reminding providers they are required to report their current testing status by the last day of each month in July, August, and September even if they have not yet started their initial testing for all residents, facility staff and associated staff. If providers have not yet reported for July, they should use the [August survey](#) twice – once to report their July update and then again at the end of August to report any pertinent updates. All July data is to be reported by **Friday August 7, 2020 at 11:59PM**.

## **STATE NEWS**

### **SOQ Releases Readiness Assessment Tool for LTC Facilities**

Today, SOQ released [NF-20-112](#) including a link to a [Readiness Assessment Update Tool](#) developed primarily for facilities who have not had an employee or resident who has tested positive for COVID-19.

### **Informed Consent Form for Testing of Residents and Staff**

Oregon Administrative Rule [411-060-0040](#) requires providers and their testing contractors to obtain “informed consent” before residents and staff are tested for COVID-19. SOQ released [NF-20-107](#) with an attached [COVID-19 Testing Informed Consent Form](#) that is available as an option for facilities to obtain “informed consent”.

### **APD Issues Incentive Payment Invoice for Nursing Facilities**

This week, APD issued [NF-20-109](#) with an attached [Incentive Payment Invoice Form](#) for Medicaid participating nursing facilities to receive a 2.5% incentive payment if they meet the following criteria and other criteria contained in [OAR 411-070-0439](#) :

- Increased paid time off for workers who become sick.

- Workers cannot be fired for calling out sick or because they must stay home due to COVID-19.
- Enhanced compensation for frontline caregivers who are at risk of exposure due to COVID-19.

## NATIONAL NEWS

### Friday Night Provider Relief Changes

Just before 7 PM on Friday night, CMS/HHS released [several changes to Provider Relief Fund dates](#) that aging services providers will likely appreciate.

- Medicaid providers now have until August 28 to apply for funds. (The date was originally July 20, then it was extended to August 3; now it's extended again.)
- Medicare providers who missed the opportunity to apply for additional funding from the Phase 1 Medicare General Distribution now have a second chance, starting August 10 and going until August 28. These funds aim to offer providers financial relief up to 2 percent of their annual revenues. Some providers with low Medicare revenues did not complete this application.
- Payments for providers who had a change of ownership. There is a window for them to apply from August 10 to August 28.

### CMS Posts Final Rule on Updated SNF Medicare Rates

October 1 begins the second year of the Patient-Driven Payment Model (PDPM) and The Centers for Medicare & Medicaid Services (CMS) released the final version of the annual [Skilled Nursing Facility \(SNF\) Payment Rule](#) that updates rates on October 1. An inflation update of 2.2% is included and is based on existing law. In addition to the annual inflation update, the rates will be adjusted by updated wage indices, so the actual rate changes will continue to vary by region. The Value-Based Purchasing Program (VBP), will also continue to impact each facility's rates based on their individual score.

### CMS Proposes to Permanently Extend Telehealth Benefits

On Monday President Trump signed an Executive Order on Improving Rural Health and Telehealth Access, directing CMS to propose regulations that would extend the telehealth service flexibilities offered to Medicare beneficiaries during the public health emergency. The Executive Order and proposed rule continues efforts to improve access and convenience of care for Medicare beneficiaries, particularly those living in rural areas. During the public health emergency (PHE), CMS added 135 services such as emergency department visits, initial inpatient and nursing facility visits, and discharge day management services, that could be paid when delivered by telehealth. CMS is seeking public input on other services to permanently add to the telehealth list beyond the. CMS is also proposing to temporarily extend payment for other telehealth services such as emergency department visits, through the calendar year in which the PHE ends. See the full article [here](#).

LeadingAge national is developing summaries of the proposed rule and will submit comments to CMS by October 5.

### Multifamily Q&A Updates from HUD

On July 31, HUD issued its first update since May 21 of its Q&A for Multifamily Housing programs. HUD's

Q&A document relays HUD's guidance on operational and procedural questions related to the safe administration of HUD-assisted programs during COVID-19. Included in the updates:

- **Cannot Require Tests or Results**

Owners and agents can encourage, but not require, tenants to get testing and disclose the results. However, tenant testing cannot be classified as a project expense.

- **Face Masks**

This latest Q&A states that failure to comply with face covering requirements may be treated as a lease violation only if house rules are reasonable and consistent with state and local law and directives, and if the house rules are identified in the lease as an attachment to the lease agreement.

- **Management and Occupancy Reviews**

In May, HUD lifted the suspension of Management and Occupancy Reviews by PBCAs in locations where there are no restrictions by state or local law or ordinance to prevent them from performing these reviews. In instances where these interviews are prohibited from occurring on-site, they should be conducted by telephone or email and documented as such in the MOR Report.

- **Guidance for Positive Residents**

In the event of a confirmed COVID-19 case at a HUD-assisted property, HUD is now encouraging owners and management agents to provide residents with information on how to care for themselves and when to seek medical attention. Owners should encourage such residents to self-isolate and limit their use of shared spaces on the property.

- **How to Treat Unemployment Insurance Benefits**

- The CARES Act's Pandemic Unemployment Assistance, an unemployment benefit for individuals who are self-employed, seeking part-time employment, or whom otherwise would not qualify for regular unemployment insurance (UI), must be included as annual income.
- The CARES Act's Federal Pandemic Unemployment Compensation (FPUC) program, providing the additional \$600 in federal benefits per week for weeks of unemployment ending on or before July 31, 2020, must NOT be included in annual income.
- CARES Act's Pandemic Emergency Unemployment Compensation, which provides an extension to regular unemployment insurance benefits for eligible individuals, allowing them to receive up to 13 weeks of additional benefits (this extends UI from 26 weeks to 39 weeks in total), must be included in annual income.

[See this article](#) for more information on the HUD Q&A topics.