**Governor Proclamations**

- **20-06**: Symptom screening of all staff, symptom screening of visitors.
- **20.16**: No Visitors except in end-of-life situations or for resident representatives (For CCRSS this only applies to GH, GTH, and SOLA).
- **20.32**: Health care worker licensing renewal.

* 20.06 and 20.16 were extended via “4 corners letter” by the legislature on 4/9/2020

**Resources Developed**

- **FamHelp webpage** was developed for loved ones to have an easy place on the internet to find out current visitor status of adult family homes, nursing homes and assisted living facilities and contact information for these facilities.
- Partnership with Department of Health and Washington 2-1-1 to develop a new hotline number where public can call and find out general information on facilities and get resources related to COVID.
- Established long-term care incident command with goals including PPE distribution according to the Department of Health triaging priorities.

**Nursing Home Specific Activities**

**CMS 1135 Waiver:**

- Visitation rights.
- Survey frequency.
- MDS assessment and transmission timeframes.
- PASRR timeframes.
- NAR to CNA within 4 month requirement.
- Requirement for 3 day hospital stay prior to SNF admission to get SNF benefit.
- Submission of staffing data to PBJ.
- Waiver of certain physical plant requirements to allow for opening of temporary facilities.
- Resident group (council) requirement.
- Waive requirement for in-person visits by physician. Allows for telehealth visits.
- Waives rights related to room changes to allow for cohorting of positive COVID 19 residents.

**Other Nursing Facility Activities:**

- Conducted infection control surveys at nursing facilities with positive confirmed COVID.
- Purchased Paramount nursing home in King County to treat people who are negative for COVID to free up acute care hospital beds.
- $29/day Medicaid rate increase effective February 1 – June 30 2020.

*Using enhanced Medicaid matching rate authorized by federal H.R. 6201*
Nursing Home Specific Activities

**Continued**

**Governor Proclamations**

- **20.18**: Suspend survey activity/Suspend 24/7 RN requirements.
- **20-37**: NAR Waiver *(This was done to align with the federal waiver).*
- **20.38**: Construction Review Services and Certificate of Need for NH.
- **20.44**: Transfer and discharge notice – Resident right to remain in facility during appeal *(this was done to align with current federal waiver)*.
  
  *20.18 was extended via “4 corners letter” by the legislature on 4/9/2020.*

**Emergency Rules**

*(All emergency rules were done to align with current federal waivers)*

- PASRR.
- Resident assessment.
- Resident groups.
- Care Planning.
- Transfer and discharge.

AFH/ALF/ESF/CCRSS Only

**Governor Proclamations**

- **20.10**: LTC worker Training.
- **20.18**: Suspend Licensing activity/suspend Fingerprint checks.

  *20.10 and 20.18 were extended via “4 corners letter” by the legislature on 4/9/2020.*

**Emergency Rules:**

- TB requirements related to TB testing within 3 days of hire.

ALF Only

**Governor Proclamation**

- **20.38**: Construction Review Services.

ICF only

**CMS waiver (Not an 1135 waiver)**

- Suspend survey activity.
Appendix K (Approved effective 2/29/20 for COPES, RSW and New Freedom waivers)

- Allows Adult Day Health providers to deliver services in the client’s residence or through telephonic wellness checks as appropriate.
- Allows Adult Day Care to provide Adult Day Care activities and wellness checks through telephonic or other audio/video options, and may provide a face to face visit to the client’s home and provide a meal if needed.
- Expanded the definition of “Specialized Medical Equipment and Supplies” to allow for the purchase of Personal Protective Equipment and disinfectant supplies.
- Waives initial training and certification for IPs and agency providers. Waives CE and recertification requirements and federal background check requirements.
- Expand the Home Delivered Meals service from 1 meal per day to 2 meals per day. Allows shelf-stable meals when alternatives are unavailable and waives recommended dietary allowances to allow flexibility should there be disruption to the availability of food.
- Adds flexibility on who can provide initial assessments (i.e. AAAs).
- Modify timelines/processes for person centered service plans.
- Allows ability to adjust provider rates to ensure essential services continue. The add-on rate will be determined by the state, but may not exceed 25% of the provider’s current rate.
- Make retainer payments to IPs for up to 30 days (this only applies to IP’s providing services to New Freedom clients).
- Make retainer payments to Residential Providers for up to 30 days (this only applies to Residential Providers serving RSW clients).
- Restrict visitors to residential settings.

State Plan Amendment for 1915k CFC Services

- Allows more flexibility in who does assessments and reassessments.
- Clarified that training and certification requirements follow state law.

Flexibilities allowable under CFR that were exercised due to COVID-19

- Allow case managers to complete assessments and service planning telephonically.
- Allow components of personal care to be delivered telephonically when appropriate.

CMS 1115(a) Demonstration

- Specifically intended to combat the effects of COVID-19.
- Allows the state to receive federal reimbursement for providing LTSS to beneficiaries.
- Allows for self-attestation or alternative verification of individuals’ eligibility and level of care.
- Allows the state to pay higher rates to certain home and community-based service providers.
- Allows the state to make retainer payments to maintain capacity during the emergency.
Financial Eligibility Flexibilities

- CMS is allowing clients to self-attest to income, resources and other eligibility factors with the exception of citizenship/immigration status in order to expedite Medicaid applications.
- Waiving premiums for the Healthcare for Workers with Disabilities program.
- Extending timelines for requesting a hearing with continued benefits to the end of the month following termination of coverage.
- Continue to consider displaced Washington residents residing in other States as a Washington resident so they can maintain Medicaid coverage.
- Extend renewals out by 3 months.

Families First Coronavirus Response Act (FFCRA)

- Receipt of 6.2% enhanced FMAP (clarified it is applicable to CFC and MFP expenditures).
- Maintains ongoing Medicaid eligibility for all clients who were recipients as of March 18, 2020 and any new applications since that date through the end of the month in which the emergency ends.
- States must reinstate eligibility for any person that was terminated from coverage prior to March 18, 2020.

What are we still waiting on?

Responses to Washington’s COVID-19 1135 waiver request.

This waiver is needed to:

- Adjust requirements related to conflict of interest and person-centered plan development in order to enable sufficient provider capacity to serve affected beneficiaries.
- Adjust requirements related to home and community-based settings in order to ensure the health, safety and welfare of affected beneficiaries.
- Waive signature requirements on level of care assessments, plans of care and other required supporting documentation.