



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Ageing and Long-Term Support Administration
PO Box 45600, Olympia, Washington 98504-5600

April 16, 2020

AL TSA: NH #2020-022
**CMS/CDC INFECTION CONTROL GUIDANCE, ADDITIONAL BLANKET WAIVER
AUTHORIZED BY CMS, QSO-20-25-NH COVID-19 TRANSFER/DISCHARGE SCENARIOS,
AND GOVERNOR PROCLAMATION 20-44**

Dear Nursing Facility/Home Administrator:

The purpose of this letter is to provide information regarding:

- The Centers for Medicare and Medicaid Services (CMS) and the Centers for Disease Control and Prevention (CDC) infection control guidance issued April 2, 2020;
- An updated CMS 1135 waiver;
- A QSO memo released by CMS on April 13, 2020; and
- A new proclamation from the office of the Governor related to the COVID-19 outbreak.

CMS and CDC Guidance

On April 2, 2020, CMS and CDC released "[COVID-19 Long-Term Care Facility Guidance](#)," which notified facilities of actions they should take to prevent transmission of COVID-19. These actions include:

- Immediately ensuring compliance with all CMS and CDC guidance related to infection control.
- Immediately implementing symptom screening for every individual (residents, staff, visitors, outside healthcare workers, vendors, etc.), including a temperature check.
 - **Exception:** Emergency Medical Service (EMS) workers responding to an urgent medical need.
- Ensuring all staff are using appropriate Personal Protective Equipment (PPE) when they are interacting with residents to the extent PPE is available and per CDC guidance on conservation of PPE.
 - For the duration of the state of emergency in their State, all long-term care facility personnel should wear a facemask while they are in the facility.
 - Full PPE should be worn for the care of any resident with known or suspected COVID-19.
 - If COVID-19 transmission occurs in the facility, healthcare personnel should wear full PPE for the care of all residents irrespective of COVID-19 diagnosis or symptoms.
- Using separate staffing teams for COVID-19-positive residents as much as possible, and working with State and local leaders to designate separate facilities or units within a facility to separate COVID-19 negative residents from COVID-19 positive residents and individuals with unknown COVID-19 status.

Blanket Waiver

CMS has authorized waivers to some regulations under section 1135 of the Social Security Act in order to offer facilities increased flexibility in providing care to residents during the COVID-19 pandemic. On April 10, 2020, the waiver expanded to include waiving a portion of the physician services regulations. The [blanket waivers](#) are in effect retroactively to March 1, 2020 and will remain in place for the duration of the national emergency.

- Physician Services. CMS waived the requirement in 42 CFR § 483.30(e)(4) that prevents a physician from delegating a task when the regulations specify that the physician must perform it personally. This waiver gives physicians the ability to delegate

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any tasks to a physician assistant (PA) or nurse practitioner (NP) who meets requirements. CMS also waived the requirement in 42 CFR § 483.30(c)(3) that all required physician visits (not already exempted in 42 CFR § 483.30(c)(4) and (f)) must be made by the physician personally. CMS modified this provision to permit physicians to delegate any required physician visit to a PA or NP.

Transfer/Discharge Information: QSO-20-25-NH and Governor Proclamation

To facilitate cohorting residents based on COVID-19 status as described in the April 2 guidance from CMS and CDC, CMS waived certain discharge and transfer regulations under the 1135 blanket waiver. In response to questions related to cohorting and transferring residents, CMS issued supplemental information about transfers and described several transfer scenarios in [QSO-20-25-NH](#). Scenarios described include transfers between two or more certified facilities, transfers from a certified to a non-certified facility, and transfer of COVID-19 residents to a federal or state run facility by order of a governmental authority (e.g., Federal Emergency Management Agency). The scenarios describe the approvals needed, and how reimbursement for the resident's care is applied in each situation.

Additionally, Governor Inslee issued proclamation [20-44](#) on April 10, 2020. The proclamation is effective through May 10, 2020. The proclamation waives RCW 74.42.450(6), WAC 388-97-0140(1)(c)(ii), and WAC 388-97-0140(2), and waives the requirement to suspend a transfer or discharge if a resident appeals the transfer or discharge. This proclamation will align state rules with federal regulations, and will assist facilities in transferring or discharging residents when necessary for infection control purposes.

Thank you for your continued commitment to resident health and safety. If you have any questions, please contact Lisa Herke, Nursing Home Policy Program Manager, at (509) 209-3088 or lisa.herke@dshs.wa.gov.

Sincerely,



Candace Goehring, Director
Residential Care Services

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