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Dear Member:

#### **NHSN Webinar Technological Difficulties**

MHCA was feeling the same frustration as most members who attempted to listen to the NHSN broadcast this afternoon regarding the COVID-19 modules and skilled nursing mandated reporting. Unfortunately, even after we were able to successfully log in to the broadcast, MHCA and Maine CDC partners were only able to catch roughly 35 minutes of the webinar. Fortunately, NHSN has agreed to repeat TODAY AND TOMORROW'S presentations next week, Monday, May 4th at 2:00 PM EST & Tuesday, May 5th at 3:00 PM EST. Communication regarding the log in for these repeat broadcasts will be forthcoming.

#### **Update on CMP funding for technology**

MHCA, in partnership with the Maine LTC Ombudsman Program has submitted a request for CMP funding that would provide the 93 nursing homes in Maine with communication devices in response to The Centers for Medicare & Medicaid Services (CMS) guidance that directs nursing homes to significantly restrict visitors and nonessential personnel to protect nursing home residents. Recognizing that visitor restrictions may be difficult for residents and families, CMS has developed an option to request the use of Civil Money Penalty (CMP) Reinvestment funds to provide facilities with adaptive communicative technologies. The use of these devices should directly address the need for virtual visits as a replacement for in-person visits, enable residents to have virtual social and enable or support telehealth visits.

The CMS guidance allows for up to \$3000 for each individual facility application, however, states have discretion in how they implement the program because they must retain 60% of their available CMP funds for emergencies. With these budget parameters in mind for Maine, we have negotiated a \$2,225 allotment per nursing home and a process that enables MHCA/LTCOP to make ONE CMP application for the entire state instead of the state having to consider and approve grants on an individual and rolling basis.

We have also been able to work with the Department to allow individual facilities to determine their preferred device platform in accordance with the list provided by CMS. Our hope is that this will reduce training and staff orientation burden on facilities. MHCA will need to gather specific information from each facility on the preferred device requested. We are finalizing a survey and hope to send it tomorrow. MHCA and LTCOP will follow up with individual facility contacts once this information is gathered to develop plans for

purchase and distribution.

### **Fit Testing Medical Clearance**

MHCA has received many questions regarding the medical clearance requirement for respirator fit testing. This is a necessary step of an OSHA approved respiratory protection plan. In response, we have worked with the folks from Maine Emergency Management for clarity as follows:

Within the OSHA 1910.134 RPP standard specific to medical clearance it is rather gray; however, in discussions with MEMA it was explained that an RN can in fact conduct the medical clearance, but they cannot be a floor nurse as they are not privy to personnel files. The facility would want to have someone like a consulting RN or administrative nurse to perform this duty. Keep in mind if there are any "yes" answers completed in the staff members questionnaire further evaluation and possibly an examination will be required through a physician. Direct regulatory language includes: *1910.134(e)(i) The employer shall ensure that a follow-up medical examination is provided for an employee who gives a positive response to any question among questions 1 through 8 in Section 2, Part A of Appendix C or whose initial medical examination demonstrates the need for a follow-up medical examination.*

Thank you for all you do to care for your residents and staff.

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