



Visit our COVID-19 Page Here

Dear Member,

The Maine CDC updates COVID-19 testing data once each day, Monday through Friday by 12 PM EDT. You may access the information here: <https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus> As of today, March 23, 2020 at 12:00 PM:

Total Confirmed Cases	107
Persons With Negative Tests	2791

Current cases are from the last 2-14 days for exposure, with Cumberland County seeing the largest number of positive tests.

Highlights from today's Maine CDC all-provider call

There has been a slight change in the incubation period per ME CDC. They are now looking at a window of 2-16 days for incubation. This has not been nationally recognized, but the Maine CDC is using this as a guideline.

Maine CDC Director, Dr. Shah, offered the following as a point of reference:

- On March 1, 2020 in the US, we had 89 positive COVID tests
- As of March 23, 2020, 1:00pm, we have 35,000 positive tests in the US

PPE Distribution

Maine CDC is working with the Department of Transportation to deliver 22,000 PPE supplies across the state. The ME CDC continues to make federal requests for additional supplies. In addition, the state 'cache' will be replenished by the federal distribution today/tomorrow.

IMPORTANT:

To request PPE for healthcare facilities, please use the PPE request form and contact your District Liaison from MEMA. (Both the document to request and the list of liaisons are located on the MHCA website as of today). This change occurred when the need for processing the PPE requests exceeded the regional coalitions' capacity.

Recommendations for the conservation of PPE state that we should reserve the use of PPE for those procedures absolutely necessary and that group those procedures so we are 'making the most' of our PPE.

Reuse of PPE

Recommendation for reuse have been made by NIOSH. Currently CDC has said that PPE can be used up to 5x or for 1 shift. Do not try to sanitize your masks. There is a lot of information out there about UV light and sanitizing the masks. It is not recommended and will destroy the protective material.

Homemade Masks

The Maine CDC has concerns about using homemade masks because many fabrics do not protect you from contracting this disease. The mask may provide the illusion that you are protected. PPE recommendations, which can be found on our website, should be followed. Please note the present guidance around homemade masks:

In settings where facemasks are not available, HCP might use homemade masks (e.g., bandana, scarf) for care of patients with COVID-19 **as a last resort**. However, homemade masks are not considered PPE, since their capability to protect HCP is unknown. Caution should be exercised when considering this option. Homemade masks should ideally be used in combination with a face shield that covers the entire front (that extends to the chin or below) and sides of the face.

Testing

As the number of cases increase, the turnaround time for the CDC HETL lab will slow down. Testing at commercial labs has expanded greatly in the last week and there is now capacity for up to 20,000 tests per day statewide. However, there is a nationwide shortage of testing kits which has led to new priority guidelines for testing. These include: Tier 1 Priority: Healthcare Workers, EMS, Hospitalized Patients and individuals at highest risk, including long term care residents.

Longevity of Surface Exposure for COVID-19

The research continues to develop, but currently the ME CDC notes the following longevity times:

- o Soft surfaces: 8-12 hrs
- o Hard Surfaces: 1-2 days, some say up to 72 hrs.

Lastly, there will be a **Telehealth Town Hall for all Maine Healthcare Providers**

Date: Thursday, March 26

Time: 11:30AM to 12:30PM

Registration link: https://zoom.us/webinar/register/WN_alw6i0OmTIW-PBGLPr9eGA

Description: Join Maine DHHS leadership and Northeast Telehealth Resource Center (NETRC) staff for an overview of the recent significant expansions to telehealth policy at the state and federal level that will allow Maine providers and patients to better leverage technology and promote continuity of care for their patients during the COVID-19 pandemic.

CMS grants exceptions and extensions on certain QM and data reporting

The Centers for Medicare & Medicaid Services (CMS) is implementing additional extreme and uncontrollable circumstances policy exceptions and extensions for upcoming quality measure reporting and data submission deadlines affecting all Quality Reporting Programs including those **Post-Acute Care (PAC) Programs**. CMS is granting exceptions and extensions to assist health care providers and suppliers while they direct their resources toward caring for their patients and ensuring the health and safety of patients and staff. For those programs with data submission deadlines in April and May 2020, submission of those data will be optional based on the facility's choice to report. In addition, no data reflecting services provided January 1, 2020-June 30, 2020 will be used in CMS' calculations for the Medicare quality reporting and value-based purchasing programs in order to reduce providers' data collection and reporting burden as they are responding to the COVID-19 pandemic.

Resident Laundry Guidance including when families want to do residents' laundry

With the restriction around non-essential visitors to skilled nursing centers and assisted living communities to minimize the risk of spread of COVID-19, there have been many questions on handling residents' personal laundry, including for those who may have previously had their laundry done by a family member. AHCA/NCAL has developed some additional [guidance](#) on this. You can also follow [CDC guidelines for environmental infection control in healthcare facilities](#). CDC states that "Infection has not been linked to laundry procedures in residential-care facilities, even when consumer versions of detergents and laundry additives are used."

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

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