

You are making
A DIFFERENCE
EVERY DAY



[Visit our COVID-19 Page Here](#)

Dear Member:

Governor Mills Continues State of Civil Emergency as Maine Fights COVID-19

On September 30, 2020, Governor Mills extended the State of Civil Emergency (PDF) for thirty days through October 29, 2020. “As Maine enters the colder months and more activities move indoors, it is more important than ever to maintain the critical public health measures that have kept us all safe,” said Governor Mills. “We know how to mitigate the spread of the virus. In order to protect our health, keep schools safely open for as many students as possible, and ensure our economy can continue on the road to recovery, we must wear our face coverings, maintain physical distancing, and wash our hands often.” A State of Civil Emergency allows Maine to draw down critical Federal resources and to deploy all available tools to respond to and contain COVID-19. This is Governor Mills’ seventh extension of the State of Civil Emergency. Under Maine law, Proclamations of Civil Emergencies may be issued in thirty day increments.

Maine DHHS Invests \$1 million in Coronavirus Relief Funds to Support Infection Prevention in Congregate Settings

The Maine Department of Health and Human Services (DHHS) announced today that it will invest nearly \$1 million from the federal Coronavirus Relief Fund to support infection prevention and control practices in congregate care settings in response to the COVID-19 pandemic. The funding will support free expert consultation for congregate care settings, including but not limited to group homes, assisted living facilities, adult family care homes, memory care homes, and private nonmedical institutions. It does not include nursing facilities, which are subject to separate state and federal infection prevention and control requirements and have received additional payments through MaineCare to support their pandemic preparedness and response efforts. DHHS is contracting with home health organizations that will dispatch a cadre of nurses and other health care professionals to congregate care settings across the state to help them tailor infection prevention and control plans for COVID-19 and other communicable diseases that meet the specific needs of their setting. Governor Mills and Commissioner Lambrew also announced on March 30 that the Administration would accelerate pay increases for personal care workers.

CMS Updates Nursing Home Staff Testing Requirements

In response to concerns from governors of rural states, the Centers for Medicare & Medicaid Services (CMS) changed some definitions of its color-coded county ranking system, which in turn determines how often nursing home operators must test their employees. According to the new guidance, “Counties with 20 or fewer tests over 14 days will now move to ‘green’ in the color-coded system of assessing COVID-19 community prevalence,” CMS announced. “Counties with both fewer than 500 tests and fewer than 2,000 tests per 100,000 residents, and greater than 10 percent positivity over 14 days — which would have been ‘red’ under the previous methodology — will move to ‘yellow.’”

The difference between a “red” county and a “yellow” county is substantial: Under new rules announced at the end of August, providers in “red” counties must test their staffers twice weekly, as compared to weekly for “yellow” areas and once per month in the lowest-level “green” counties.

The stoplight system relies on the overall COVID-19 positivity rate in a given county — specifically, the proportion of positives relative to the total number of COVID-19 tests performed. A percentage under 5% earns a county green status; between 5% and 10% is considered yellow, while 10% and above is red.

This calculation proved to be a potential problem for operators in rural areas, as a relatively small number of positives could skew the overall percentage high enough to bump it into the next-highest category, for instance. Nursing homes face fines exceeding \$400 per day or \$8,000 per instance for failing to comply with the testing mandate. Routine COVID-19 screening is now also a part of the baseline Medicare and Medicaid requirements of participation for operators.

AHCA Provider Relief Fund 'Office Hours' TOMORROW October 2

On Friday, October 2 at 3:00 pm Eastern, AHCA/NCAL will host an “office hour” to provide up-to-date answers to your questions about provider relief fund reporting requirements based upon available information and interpretation. To date, HHS only has released six pages of guidance and we await a reporting template, HHS case examples, and webinar trainings. HHS continues to update these requirements, resulting in confusion about what is expected of providers. Mike Cheek, SVP of Reimbursement Policy, will provide an updated overview of the requirements and answer your questions. Please note, further updates and revisions to the requirements are expected to continue to be made.

No pre-registration is required but you will need to login using your computer or WebEx application as all questions will be accepted using the chat function. All lines will be muted.

Provider Relief Fund Reporting Requirements Office Hours
Friday, Oct 2, 2020 3:00 pm | 1 hour | Eastern Time
Meeting number: 172 413 7902
Password: 4TifsHQTy77
Join by [video here](#)

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

Danielle Watford
Director of Quality and Regulatory Affairs
dwatford@mehca.org