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Dear Member:

Mills Administration Announces Maine to Enter Stage 4 of Reopening

The Mills Administration announced today that Maine will move into Stage 4 of the [Plan to Restart Maine's Economy](#) beginning Tuesday, October 13, 2020. With cold weather months approaching, Stage 4 increases limits on indoor seating to 50 percent capacity of permitted occupancy, or 100 people – whichever is less – and maintains the critical public health measures outlined in COVID-19 Prevention Checklists, such as enhanced cleaning practices and physical distancing. Today's Executive Order also further strengthens the State's face covering mandate by requiring that a broader set of entities, such as private schools and municipal buildings, ensure that employees and people in their buildings adhere to this critical health measure. The Order also expands the scope of the enforcement statewide, rather than in just Maine's coastal counties and more populous cities.

The progression into Stage 4 comes as Maine, adjusted for population, continues to lead the nation on key metrics for COVID-19 response, including having the lowest hospitalizations, second lowest new cases, and fourth lowest deaths.

[A copy of the Governor's Executive Order is attached \(PDF\).](#)

AHCA to Host FFCRA Webinar Tomorrow for Members Only

The American Health Care Association/National Center for Assisted Living (AHCA/NCAL) will host a follow-up "office hour" webinar on the Families First Coronavirus Response Act (FFCRA) and How it Impacts Long Term Care on Oct. 7 at 12:00 p.m. (ET) for member facilities.

AHCA/NCAL Department of Labor consultants from Jackson Lewis, Craig S. Roberts, principal, and Henry Shapiro, associate, will answer questions from a previous AHCA/NCAL webinar and on the FFCRA impacting long term care. Access the [recording](#) of the first webinar.

AHCA/NCAL said providers on the call should note that information gathered from the webinar is not meant to take the place of guidance from legal counsel.

[CLICK HERE](#) for the meeting link. The meeting number is **172 281 2053**, and the password is **QExXPBc5b36**. Join via audio by dialing 415-655-0003.

Notes from Today's DHHS/CDC Medical Director/Clinician Call

Nursing Home Visitation: Bill Montejo of DLC stated that the most recent CMS memo [QSO 20-39-NH](#) is the current standard that federally funded facilities (i.e. nursing homes and intermediate care facilities) should be using as a visitation guidance document. The state team IS preparing another guidance document but for now the federal QSO should be referenced and used. Pay close attention to the area of the QSO that identifies core principles for COVID prevention and on page 3 where federal CMS has identified that the percent positivity by County will be used to determine visitation.

Maine DHHS/CDC guidance is expected to use a slightly different metric. They would be looking for facilities to reference the number of new cases per 10,000 people by county. The anticipated Maine DHHS guidance this week will identify this strategy instead of overall county positivity. In order to facilitate in house visits, facilities should pay close attention to that measure which will be published on the Maine CDC website on a 28-day rate 'look back'. Soon to come, there will be a new link to this data set at the bottom of the Maine CDC page. Current information on the CDC website today (10/6/20) is cumulative and is not representative of the new measure that will be used for visitation.

For Assisted Housing providers: (all other providers other than Nursing Homes and federally regulated ICF/DD homes), Paul Saucier of OADS indicated that DHHS will use the same metric for positivity rates and testing in these provider homes. In terms of staff testing frequency, most of our MHCA membership will

be asked to conduct surveillance testing of staff at a rate determined by level of risk to the population served. Since we serve residents that are older and often living with co-morbidities, MHCA anticipates that the Assisted Housing guidance from DHHS later this week will place our member homes in the high-risk category and require staff testing. This guidance will also include recommendations around visitation and reopening.

For vendor surveillance: According to [QSO-20-38-NH](#), if vendors frequent the home and have increased contact and pose increased risk to the facility's staff and residents, the home's policy and procedure should identify how these individuals will be tested as a part of the facility's overall testing plan. Keep in mind, CMS has identified prioritizing testing to those vendors that have more direct and consistent contact with individuals within the facility. As an example, if you have a vendor that comes into the facility, has limited contact with one or two staff people and your internal risk assessment shows that this vendor DOES NOT pose a risk to resident health and safety they would not be included.

Nursing Home testing plans: DHHS is not "approving" testing plans; however, they are reaching out to facilities when there are concerns identified within the plans (ie: missing items, missing details etc.). These plans are kept in the facilities files and should be updated by the facilities as changes are made. Please send these plan updates to DLC at dlrs.info@maine.gov. Multilevel homes (assisted living side) should have been included in the nursing home testing plan and the assisted living 'side of the house' would not be required to submit a separate plan at this time.

POC Testing Machines: Maine CDC is aware that many of our nursing homes have been issued these testing devices. Maine CDC is not aware of who or how these devices are being used and they are also unaware of how facilities would get additional testing supplies once the federal supply is used. There are also some varying reports on the POC sensitivity. We do anticipate that the technology will improve as time goes on. Facilities should continue to review federal and state guidance when determining how to incorporate the POC machines into their testing plans. The federal CDC updated its POC considerations recently at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-antigen-testing.html>.

Opportunity to Join ECHO National Nursing Home COVID-19 Action Network

The University of New Hampshire is inviting Maine nursing home facilities to join a learning collaborative that is focused on supporting nursing homes during COVID-19. This evidence-based method of learning uses the Project ECHO® (Extension for Community Healthcare Outcomes) Model, an online learning platform that connects groups of community providers with specialists and experienced peers in regular, real-time, collaborative sessions that include case-based discussions and peer mentoring. This learning model has been used across the world and has measurably improved outcomes across a wide range of health-related topics. Financial compensation will be available to qualified nursing homes.

Dartmouth-Hitchcock, JSI Research & Training Institute, Inc., and the NH Citizens Health Initiative at the UNH Institute for Health Policy and Practice, in collaboration with the ECHO Institute at University of New Mexico and the Institute for Healthcare Improvement (IHI), are regionally sponsoring the Nursing Home COVID-19 Action Network. This initiative provides no-cost training, mentorship, and support from regional and national experts to nursing home personnel.

Nursing home facilities in New Hampshire, Maine, and Vermont are invited to participate in weekly 90-minute virtual learning sessions focused on implementing and adopting infection prevention and control practices. Unlike typical webinars, ECHO sessions provide time for you to discuss real cases, to ask experts for advice, and to learn from colleagues about how to make improvements in the real world. ECHO sessions are open to any nursing home teams, including, but not limited to, medical directors, nurses, administrators, direct care workers, and patient and family representatives. Nursing homes will receive several incentives for participating, including a stipend based on participation in weekly sessions, support with implementation and adoption of quality improvement practices and measures, and value-based incentives for meeting CMS metrics.

More information will be available soon about dates and participation requirements for New England participants. To learn more about participation, please fill out this interest [form](#).

For general information about the ECHO National Nursing Home COVID-19 Action Network, you may [register](#) to attend **one** of the following webinars: (same content, different dates)

- **Wed., October 7, 2020:** 12:30 – 1 PM ET
- **Thurs., October 8, 2020:** 7:30 – 8 AM ET
- **Tues., October 13, 2020:** 3 – 3:30 PM ET
- **Wed., October 14, 2020:** 2:30 – 3 PM ET
- **Thurs., October 15, 2020:** 12 – 12:30 PM ET

These 30-minute sessions are designed to provide nursing home staff with a 15-minute update on infection control best practices, 10-minute introduction to the National Nursing Home COVID-19 Action Network led by the ECHO-IHI team, and 5 minutes (or more as availability allows) for participant questions. Nursing homes eligible to receive funding from the Provider Relief Fund (PRF) can receive \$6,000 in compensation for participating.

OADS Offers Infection Prevention and Control Resources to Assisted Housing

The Maine DHHS Office of Aging and Disability Services (OADS) reached out to Assisted Housing Providers this week to share information about an initiative for a Statewide Infection Prevention and Control (IP&C) consultation opportunity administered by OADS in partnership with Maine CDC, the Office of MaineCare Services and the Division of Licensing and Certification. As previously reported, the purpose of

this offering is to improve IP&C in congregate residential settings (other than nursing homes) throughout Maine and **to assist you in meeting new IP&C rules planned to take effect in 2021**. These settings may include Private Non-Medical Institutions (PNMIs), Assisted Living Facilities, Residential Care Facilities, and licensed and unlicensed Group Homes.

If you would like to schedule a consultation, please contact Gretchen Zeh-Higgins, Long-Term Care Facility Supervisor for the Office of Aging and Disability Services at (207) 287-8823 or at gretchen.zeh-higgins@maine.gov. Please title the subject line of the email "IP&C Consultation."

Extension Offered for Quality Award Winners in Year 3

The AHCA/NCAL National Quality Award Program is pleased to announce the approval of an automatic one-year extension for recipients in their third year of [renewal](#). The Program is making this extension in order to be supportive of members during these challenging times and offering them the opportunity to maintain their active status even if they are not able to apply in 2021.

This means that recipients in their third year of renewal in 2021 will have one more year (2022) to remain active and apply at the next award level. There is no action needed on the part of the recipient to receive the extension. We have communicated this extension to all members impacted; however, we do not plan to publicize it widely as we do not want to dissuade anyone who was considering applying in 2021 from doing so. Members in their third year of renewal are still able to apply during the 2021 award cycle. The intent to apply deadline for 2021 is November 12, 2020 at 8 PM EST.

As a reminder, the Renewal Policy, previously known as the Recertification Policy, has been updated to allow recipients additional options to stay active. To learn more about the Renewal Policy, visit the National Quality Award [website](#).

Federal Government Extends Public Health Emergency

The federal public health emergency (PHE) is issued by the Department of Health and Human Services (HHS) Secretary in 90-day increments. Effective October 23, Secretary Azar extended the PHE for another 90 days through January 23, 2021.

The PHE extension means:

- Section 1135 National, Blanket Waiver Remains in Place. This waiver includes the telehealth and staffing waivers;
- Section 1812(f) Waiver also remains in place. This covers the waiver of the 3-Day Stay requirement and the waiver of the Spell of Illness; and
- Because of the CARES Act statutory link to the PHE, the Medicaid increased FMAP continues until the end of the quarter in which the PHE ends. Therefore, the increased FMAP will flow to the states until March 2021.

The PHE issued on October 2 is available to view [here](#). Members may recall that Governor Mills extended Maine's public health emergency by executive order last week.

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

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