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HCS & ICF/IID COVID-19 Webinar with HHSC LTCR

January 19, 2022

For more information:
Email: LTCRPolicy@hhs.texas.gov
Phone: 512-438-3161

ICF & HCS COVID-19 Q&A

Agenda

- HHSC Provider Portals
- Resources for Providers
- Reporting COVID-19 to HHSC
- CDC Updated Return to Work Guidance
- Emergency Staffing Requests to HHSC
- Consolidation of Residences
- Questions



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Navigation of the HHSC Provider Portals

The [HHSC Provider Portal](#) page gives you the option to continue on to the provider type you are looking for.

Long-term Care Providers

Health and Human Services provides the information that contracted service providers need to do business with us in 1 convenient location.

If you are interested in other contracting opportunities with the agency, such as providing goods or administrative services or requests for proposals for special projects or services, please [visit the Business and Contracting Opportunities page](#).

Facility-based Programs

- [Assisted Living Facilities](#)
- [Day Activity and Health Services](#)
- [Intermediate Care Facilities](#)
- [Nursing Facilities](#)

Waiver Programs

- [Community Living Assistance and Support Services](#)
- [Deaf Blind with Multiple Disabilities](#)
- [Home and Community-based Services](#)
- [Medically Dependent Children Program](#)
- [Texas Home Living](#)



ICF Provider Portal Homepage

Intermediate Care Facilities (ICF/IID)

What is an ICF/IID?

The Intermediate Care Facilities for Individuals with an Intellectual Disability or Related Conditions program provides residential and habilitation services to people with intellectual disabilities or a related condition.

COVID-19

Rule

- [ICF/IID Provider COVID-19 Vaccination Data Reporting Rule \(PDF\)](#) – effective Aug. 11, 2021
- [ICF/IID COVID-19 Expansion of Reopening Visitation Emergency Rule \(PDF\)](#) – effective Oct. 20, 2021
- [ICF/IID COVID-19 Response Emergency Rule \(PDF\)](#) – effective Dec. 07, 2021

Guidance

- [Guidance for LTC Facilities Experiencing Staffing Shortages Due to COVID-19 \(PDF\)](#) – revised Jan. 06, 2022
- [ICF/IID COVID-19 Response Plan \(PDF\)](#) – revised Jan. 07, 2022
- [Frequently Asked Questions for ICF/IIDs about COVID-19 \(PDF\)](#) – revised Jan. 07, 2022

Resources

- [National Healthcare Safety Network Long Term Care Facility COVID-19 Module Enrollment \(PDF\)](#)
- [Infection Control Basics & PPE Training for Essential Caregivers \(PDF\)](#)
- [Long-term Care COVID-19 Vaccination Options \(PDF\)](#)
- [COVID-19 Vaccination-Pharmacy Partnership for Long-Term Care \(PDF\)](#)
- [Proper N95 Respirator Use for Respiratory Protection Preparedness](#)
- [Helping Residents with Dementia Prevent the Spread of COVID-19 in LTC Communities \(PDF\)](#)
- [Helping Individuals with Intellectual Disabilities and Related Conditions Prevent the Spread of COVID-19 \(PDF\)](#)
- [Omnicare POC Testing FAQs for Healthcare Professionals \(PDF\)](#)



HCS Provider Portal Homepage

Home & Community-based Services (HCS)

What is HCS?

The Home and Community-based Services program provides individualized services and supports to persons with intellectual disabilities who are living with their family, in their own home or in other community settings, such as small group homes.

- [What is HCS \(PDF in English\)](#)
- [What is HCS \(PDF in Spanish\)](#)

COVID-19

Rule

- [HCS COVID-19 Provider Response to COVID-19 and Expansion of Reopening Visitation Rules \(PDF\)](#) – effective Aug. 20, 2021

Guidance

- [Guidance for LTC Facilities Experiencing Staffing Shortages Due to COVID-19 \(PDF\)](#) – revised Jan. 07, 2022
- [Updated COVID-19 FAQs for HCS and TxHmL Providers \(PDF\)](#) – revised Sep. 21, 2021
- [COVID-19 Response for HCS Residential Providers \(PDF\)](#) – revised Jan. 07, 2022

Resources

- [Infection Control Basics & PPE Training for Essential Caregivers \(PDF\)](#)
- [Helping Individuals with Intellectual Disabilities and Related Conditions Prevent the Spread of COVID-19 \(PDF\)](#)
- [Long-term Care COVID-19 Vaccination Options \(PDF\)](#)



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Resources for Providers



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Accessing PPE

Providers can still request support through STAR. Long-term care providers can request:

- COVID-19 mobile vaccine clinics for residents and staff
- BinaxNow testing kits. [Read PL 2020-49](#) for details.
- PPE (providers should exhaust all other options before request)
- Facility cleaning and disinfection
- Healthcare-associated infection and epidemiological support

To Request Support:

- To initiate a request for COVID-19 support described above, [contact the HHSC LTCR Regional Director](#) in the region where the facility is located.
- HHSC LTCR staff are responsible for initiating a State of Texas Assistance Request (STAR) on behalf of the long-term care provider.



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BinaxNow Testing Kits

Providers can request free BinaxNOW COVID-19 POC antigen test kits. The requested test kits can now be used to test any individuals, including residents, staff, and visitors.

To request consideration for the free BinaxNOW POC antigen COVID-19 test kits, a provider must complete the Attestation for Free Test Kits, [LTCR Form 2198](#). A provider must submit the completed attestation to the HHSC Regional Director or designee for the region in which the provider is located.

The Regional Director or designee will elevate the completed attestation form to the State Operations Center in TDEM. Staff from HHSC Long-term Care Regulation (LTCR) and the TDEM will review the completed attestation form for accuracy and completeness. Staff may require and request documentation from the provider to support the attestation.

The attestation criteria require a provider to:

- have a current Clinical Laboratory Improvement Amendment (CLIA) Certificate of Waiver or a CLIA laboratory certificate;
- administer the test only by provider staff who successfully complete training provided by [Abbott Laboratories](#) or who are clinicians with appropriate education and training;
- follow all reporting requirements associated with the use of the Binax cards; and
- report test results appropriately.



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BinaxNow Testing Kits

Any provider that meets the attestation criteria is eligible to request free BinaxNOW COVID-19 POC antigen test kits.

A provider must have a current CLIA Certificate of Waiver or a CLIA laboratory certificate before it can receive and administer the free BinaxNOW COVID-19 tests. To obtain a CLIA Certificate of Waiver for the free BinaxNOW COVID-19 tests, complete [Form CMS-116](#) available on the [CMS CLIA website](#) or on the [HHSC Health Care Facilities Regulation - Laboratories webpage](#) found under the Application header. Email the form to the regional CLIA licensing group via the [HHSC HCF Regulation – Laboratories webpage](#).

Providers that have existing CLIA Certificates of Waivers and are using a waived COVID-19 test are not required to update their CLIA Certificates of Waiver. As defined by CLIA, waived tests are categorized as “simple laboratory examinations and procedures that have an insignificant risk of an erroneous result.” The [Food and Drug Administration](#) determines which tests meet these criteria when it reviews a manufacturer’s application for a test system waiver.

See: [PL 2020-49 \(PDF\)](#)



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Additional Resources

Federal COVID-19 Local Fiscal Recovery Funds are being distributed to Texas cities and counties. HHSC urges LTCR providers that need COVID-19 resources to use the following resources:

- Contact your city, county, or regional advisory council to find out if resources or funds will be available for health care staffing support, testing services, resident, or site assessment, and disinfecting services as these resources are no longer available through HHSC.



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Reporting COVID-19 Cases



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ICF COVID-19 Reporting Requirements

ICF/IIDs are **only required** to report to HHSC within 24 hours of:

- a facility's first positive case of COVID-19, or
- a new positive case of COVID-19 after a facility has been without a new case of COVID-19 for 14 days or more.

Facilities **should not** report COVID-19 positive cases to HHSC outside of the two reportable events listed above. Additionally, the reportable events listed above **do not** include an individual that was admitted to the facility with an active COVID-19 infection or an individual that developed COVID-19 while in quarantine upon being admitted to the facility.

See: [26 TAC §551.46 \(m\)](#)



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ICF COVID-19 Reporting Requirements

Within five working days after making a report, the facility must ensure an investigation of the incident is conducted and send a written investigation report on Form 3613A, Provider Investigation Report, to HHSC. Since the facility is self-reporting cases of COVID-19, the 3613-A is required.

HHSC updated [Provider Letter \(PL\) 20-37](#) Reporting Guidance for Long-term Care Providers. When providing the Provider Investigation Report (Form 3613-A) to HHSC regarding a COVID-19 infection, the facility checks each appropriate option and fills in each applicable blank **excluding** the name of the staff member with the COVID-19 diagnosis. HHSC does not require the name of the staff member who tested positive for COVID-19 as part of the reporting process.

See: [26 Texas Administrative Code \(TAC\) §551.213\(c\)](#)



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HCS COVID-19 Reporting Requirements

Per [40 TAC §9.198\(e\)](#), program providers must notify the following departments/individuals within 24 hours of becoming aware of an individual or staff member, to include HH/CC providers, with confirmed COVID-19:

- Local health department, or DSHS if there is no local health department;
- HHSC via encrypted or secure email to waiversurvey.certification@hhsc.state.tx.us within 24 hours of becoming aware of an individual or staff member. Including service providers, with confirmed COVID-19;
- An individual's legally authorized representative (LAR) if the individual is confirmed to have COVID-19, or if the presence of COVID-19 is confirmed in the residence;
- Any individual who lives in the residence and his or her LAR, if the program provider is aware of probable or confirmed cases among program provider staff or individuals living in the same residence.

Additionally, a program provider must not release personally identifying information regarding confirmed or probable cases of individuals or staff.



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Reporting COVID-19 When an Individual is on Leave and Not Returning

ICF:

It is the provider's responsibility to ensure the local health department or DSHS is notified. DSHS has stated on calls that they would rather have it reported twice than it goes unreported.

HCS:

Per HCS Visitation Emergency Rules 9.198(d) (1)&(2), the program provider must contact the local health department, DSHS and notify HHSC of a COVID positive test.

If the individual is still enrolled in the HCS program and the family notifies the program provider, it will be the responsibility of the program provider to report it.



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ICF COVID-19 Daily Track Report

After a case of COVID-19 has been reported, an ICF/IID provider must submit a COVID Daily Track Report to the appropriate Region Program Manager (or ARD/RD as necessary) every day until the facility no longer has positive cases, and at the 14-day marker the surveyor returns to the home.

The providers should be reporting the COVID status in their facilities daily, either by email or by calling the manager in the region. This information is being tracked and must be updated daily if there are any changes. If there is nothing to report nothing needs to go to the region. This information is being updated on the website and needs to be accurate.



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What happens after a provider makes a report of COVID-19 to HHSC?

ICF Survey Operations will:

- Conduct Priority 1 intake investigation;
- Review facility infection control practices; and
- Determine if staff work at other facilities

HCS Survey Operations will:

- Initiate desk reviews and outreach to program providers
- Conduct a focused review of infection control processes.

Additional information regarding HHSC actions after a report of COVID-19 are detailed in the Provider Response Plans.

[HCS/TxHmL Provider Response Plan](#) (updated 1/18/2022)

[ICF Provider Response Plan](#) (updated 1/18/2022)



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Updated CDC Return to Work Guidance

Updated CDC Return to Work Guidance



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Work Restrictions for DSP with COVID-19 Infection			
Vaccination Status	Conventional	Contingency (when staffing shortages are anticipated)	Crisis (when staffing shortages occur)
Boosted*, Vaccinated, or Unvaccinated	10 days OR 7 days with a negative test#, if asymptomatic or mildly symptomatic (with improving symptoms)	5 days with/without negative test, if asymptomatic or mildly symptomatic (with improving symptoms)	No work restrictions, with prioritization considerations (e.g. asymptomatic or mildly symptomatic)
Work Restrictions for Asymptomatic DSP with Exposure to COVID-19			
Boosted	No work restrictions, with negative test on days 2+ and 5-7	No work restrictions	No work restrictions
Fully vaccinated, Unvaccinated, within 90 days of prior infection	10 days or 7 days with a negative test	No work restrictions with negative tests on days 1+, 2, 3 and 5-7	No work restrictions (test if possible)
<p>*DSP are considered "boosted" if they have received all COVID-19 vaccine doses, including a booster dose, as recommended by CDC.</p> <p>#Negative test result within 48 hours before returning to work</p> <p>+Calculating day of test: 1) for those with infection consider date of first positive test if asymptomatic OR date of symptom onset as day 0; 2) for those with exposure consider day of exposure as day 0</p>			

(Table adapted by HHSC LTRC. [Original CDC table](#))



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Emergency Staffing Requests



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Emergency Staffing Requests

HHSC LTCR offers emergency staff for ICF and HCS providers facing severe critical shortages because existing staff is unable to work due to being infected with COVID-19. Emergency staffing is only approved for providers that can't provide necessary care to residents or individuals due to COVID-19 related staffing shortages. Emergency staffing is temporary while providers obtain alternative staffing resources or until existing staff can return to work.

Providers may only request emergency staffing from HHSC if all the strategies from the Staffing Contingency Checklist have been exhausted. If a provider has implemented or attempted each item in the Staffing Contingency and still does not have adequate staff to meet critical staffing levels, the provider must contact the Regional Director for their LTCR Region to request emergency staffing.

LTCR may request documentation to support that all mitigation strategies have been exhausted and that all other checklist items have been exhausted before facilities and providers are provided emergency staff.



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Emergency Staffing Requests

LTCR may perform an on-site survey to confirm that all mitigation strategies have been exhausted and that all other checklist items have been exhausted before providers are provided emergency staff.

This is only available on an emergency basis, as staff are available, and as a temporary measure. Not all requests for emergency staffing will be fulfilled. Requests are prioritized by level of need.



Emergency Staffing Requests

Providers may request emergency staff from HHSC in an emergency as a one-time option to alleviate staffing crisis due to the impact of Omicron variant on staffing resources.

HHSC revised [Provider Letter 2022-02](#) on January 18, 2022, to clarify and provide additional information about the process HCS and ICF/IID providers should follow to request emergency staffing from HHSC.

To complete a one-time request for emergency staff from HHSC, HCS and ICF providers should follow all steps located in [PL 2022-02](#).



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Consolidation of Homes



ICF Group Home Consolidation

HHSC allows for temporary closure of an ICF through HHSC Licensing and Credentialing. HHSC does not require a temporary closure for short term closures, only extended periods of time.

- If the licensed provider is going to be temporarily closed for an extended period of time, contact LTCR Licensing and Credentialing at [LTC ALF ICF Licensing@hhs.texas.gov](mailto:LTC_ALF_ICF_Licensing@hhs.texas.gov)
- If the licensed provider is going to be closed for short period of time (i.e. 24/48 hours, weekend), contact the regional office ([Regional Director](#) and Program Manager).
- If two licensed ICF/IID providers are consolidating facilities and the this will place the provider over capacity at the facility they are consolidation to, contact LTCR Survey Operations at lcrsurveyoperation@hhs.texas.gov. This section is responsible for approving the temporary increase in licensed capacity. This information will be provided to LTCR Licensing and Credentialing.



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ICF Group Home Consolidation

When consolidation ends:

- Contact the regional office ([Regional Director and Program Manager](#)); and
- Contact LTCR Survey Operations at lctcrsurveyoperation@hhs.texas.gov.



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HCS Consolidation of Residences

[PL 2021-29](#), updated on September 14, 2022, provides instruction on what information to send to HHSC when the HCS provider temporarily increases from 4 to 6 individuals. “HHSC will still allow an HCS four-person residence to add up to two additional individuals temporarily if the residence has the space to accommodate them and has been approved as a four-person residence by HHSC. (Rule: [40 TAC §9.153\(39\)\(B\)](#)).

The program provider must notify HCS Survey Operations of the additional individual(s) by emailing the following information to WaiverSurvey.Certification@hhsc.state.tx.us.

- Provider Name and Contract Number
- Name and CARE ID of the individual moving
- Location code and address of permanent residence
- Location code and address of temporary residence”



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HCS Consolidation of Residences

Unless the duration is for a single shift, a program provider notifies HHSC any time there is an increase in capacity regardless of the duration, short-term or long-term.

Once the program provider resumes regular business operations, they must notify HHSC at WaiverSurvey.Certification@hhsc.state.tx.us that the individuals have returned to their residences.



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Questions?

For more information:

<https://hhs.texas.gov/services/health/coronavirus-covid-19/coronavirus-covid-19-provider-information>

Email: LTCRPolicy@hhs.texas.gov

Phone: 512-438-3161



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Thank you!

For more information:

<https://hhs.texas.gov/services/health/coronavirus-covid-19/coronavirus-covid-19-provider-information>

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Phone: 512-438-3161