

CMS Nursing Facility Testing Requirements Using CDC COVID-19 Integrated County View Site

<https://www.cms.gov/files/document/qso-20-38-nh-revised.pdf>

To view the COVID-19 levels of community transmission, go to the CDC COVID-19 Integrated County View site. Click on the link below, enter your state and county.

<https://covid.cdc.gov/covid-data-tracker/#county-view>

Topic	Red (High)	Orange (Substantial)	Yellow (Moderate)	Blue (Low)
Routine Testing Intervals for Staff	Twice a week*	Twice a week*	Once a week*	Not recommended
Symptomatic Staff and Residents	*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours (see QSO-20-38-NH Revised 09/10/2021) o Routine testing is required for unvaccinated staff o Fully vaccinated staff are no longer required to be routinely tested			
Routine Testing Intervals for Residents	Staff and/or residents with signs and symptoms must be tested regardless of vaccination status			
Facility Staff Defined	Not generally recommended			
Outbreak	<p style="text-align: center;">During Outbreak Investigation there are two approaches:</p> <ul style="list-style-type: none"> o Contact Tracing (e.g. specific close contacts) - If the facility does have the expertise, resources, and ability to identify close contacts of the individual with COVID-19, they may choose to conduct focused testing based on known close contacts o Broad-based Testing (e.g. unit, facility wide) - If the facility does not have the expertise, resources, and ability to identify close contacts of the individual with COVID-19, they should investigate the outbreak at a facility-wide or group level o For both approaches, staff and residents (regardless of vaccination status) should be tested immediately, and staff and residents that tested negative should be retested every 3 days to 7 days until testing identifies no new cases of COVID-19 infection among staff or residents for a period of at least 14 days since the most recent positive result o For further information on CDC contact tracing and broad-based testing, including frequency of repeat testing, see CDC guidance at https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html 			

Topic	Red (High)	Orange (Substantial)	Yellow (Moderate)	Blue (Low)
Outbreak continued	<p align="center">***Outbreak Testing - Visitation***</p> <ul style="list-style-type: none"> o If first round of outbreak testing reveals no additional COVID-19 cases in other areas (e.g., units) of the facility, visitation can resume for residents in areas/units with no COVID-19 cases o If the first round of outbreak testing reveals one or more additional COVID-19 cases in other areas/units of the facility (e.g., new cases in two or more units), then facility should suspend indoor visitation for residents (vaccinated and unvaccinated), until the facility meets the criteria to discontinue outbreak testing <ul style="list-style-type: none"> o Indoor Visitation Suspended o Outdoor Visitation may continue o Compassionate Care visits should continue at all times o See the Visitation Grid or CMS Memorandum QSO-20-39-NH Revised 04/27/2021 			
Testing Considerations	<p align="center">***Routine testing must occur as directed in QSO memo 20-38-NH revised 09/10/2021 which references the CDC COVID-19 levels of community transmission shown in the link above***</p> <ul style="list-style-type: none"> o Monitor CDC COVID-19 Integrated County View site every other week and adjust the frequency of staff testing accordingly <ul style="list-style-type: none"> o Do not decrease testing frequency until the county positivity rate remains at the lower activity level for two weeks o Staff and residents who have recovered from COVID-19 and are asymptomatic do not need to be retested for COVID-19 within 3 months after symptom onset <ul style="list-style-type: none"> o Testing visitors may not be a condition of visitation o The use of Point of Care COVID-19 testing is allowed per CLIA, but not required o Orders from a physician, physician assistant, nurse practitioner, or clinical nurse specialist are required for a resident to be tested for COVID-19. (See the memo QSO-20-38-NH Revised 09/10/2021) 			
Refusal of Testing	<p align="center">***Facilities must have procedures in place to address staff and residents who refuse testing (QSO-20-38-NH Revised 09/10/2021)***</p> <p align="center">Staff:</p> <ul style="list-style-type: none"> o If outbreak testing has been triggered and an unvaccinated staff member refuses testing, the staff member should be restricted from the building until the procedures for outbreak testing have been completed o Any staff who have signs and symptoms of COVID-19 should be prohibited in the building until the return to work criteria are met <p align="center">Residents:</p> <ul style="list-style-type: none"> o Residents (or resident representatives) may exercise their right to decline COVID-19 testing 42 CFR § 483.10(c)(6) o Residents who refuse testing may require transmission-based precautions (TBP) based on symptoms or vaccination status. For further information see CDC guidance at https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html 			