

## 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 Community Transmission Levels, go to the CDC COVID-19 Integrated County View site. Click on the link below, enter your state and county.

[CDC COVID Data Tracker: County View – Community Transmission Levels](#)

[CDC - Stay Up to Date with Your COVID-19 Vaccines](#)

Topic	Red (High)	Orange (Substantial)	Yellow (Moderate)	Blue (Low)
	Twice a week*	Twice a week*	Once a week*	Not recommended
Routine Testing Intervals for Staff	<p>*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is &lt;48 hours (see QSO-20-38-NH Revised 03/10/2022)</p> <ul style="list-style-type: none"> <li>o Routine testing of staff, who are <b>not up-to-date</b>, should be based on the extent of the virus in the community (Refer to the COVID-19 Integrated County View link above to determine Community Transmission Levels)</li> <li>o Staff, who are <b>up-to-date</b>, do not have to be routinely tested</li> <li>o For healthcare providers who work in the facility infrequently, refer to the CDC's Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV2 Spread in Nursing Homes testing guidance (Ideally be tested within the 3 days before their shift [including the day of the shift])</li> </ul>			
Facility Staff Defined	<p>"Facility staff" includes employees, consultants, contractors, volunteers, and caregivers who provide care and services to residents on behalf of the facility, and students in the facility's nurse aide training programs or from affiliated academic institutions</p>			
Routine Testing Intervals for Residents	Not generally recommended			
Symptomatic Staff and Residents	Staff and/or residents with signs and symptoms must be tested regardless of vaccination status			
Newly Admitted Residents or Left Facility > 24 Hours	<ul style="list-style-type: none"> <li>o Generally residents who leave the facility &gt; 24 hours, should be managed as a new admission or readmission with a series of two viral tests for COVID: Immediately and if negative, again 5-7 days after admission <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html</a></li> <li>o May opt to test residents who are asymptomatic &amp; <b>not up-to-date</b> with all COVID vaccine doses if out of the facility &gt; 24 hours <a href="#">(QSO-20-39-NH Revised 03/10/2022)</a></li> </ul>			
Asymptomatic Residents with Close Contact to Someone with COVID	<p>***Regardless of vaccination status***</p> <ul style="list-style-type: none"> <li>o Series of two viral tests for COVID: Immediately (generally not earlier than 24 hours after exposure) and if negative, again 5-7 days after exposure</li> </ul>			
Outbreak (continued on page 2)	<p><b>During Outbreak Investigation there are two approaches:</b></p> <ul style="list-style-type: none"> <li>o <b>Contact Tracing (e.g. specific close contacts)</b> - 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</li> <li>o <b>Broad-based Testing (e.g. unit, facility wide)</b> - If the facility does <b>not</b> 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</li> <li>o For <b>both approaches</b>, 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</li> </ul>			

Topic	Red (High)	Orange (Substantial)	Yellow (Moderate)	Blue (Low)
Outbreak continued	<ul style="list-style-type: none"> <li>o For further information on CDC contact tracing and broad-based testing, including frequency of repeat testing, see CDC guidance at <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html</a></li> </ul> <p style="text-align: center;"><b>***Outbreak Testing - Visitation***</b></p> <ul style="list-style-type: none"> <li>o Refer to the Visitation Grid or CMS Memorandum QSO-20-39-NH Revised 03/10/2022</li> </ul>			
Testing Considerations	<p><b>***Routine testing must occur as directed in QSO memo 20-38-NH revised 03/10/2022 which references the CDC Community Transmission Levels found in the link above***</b></p> <ul style="list-style-type: none"> <li>o Monitor CDC COVID-19 Integrated County View site for Community Transmission Levels every other week and adjust the frequency of staff testing accordingly               <ul style="list-style-type: none"> <li>o Do not decrease testing frequency until the Community Transmission Level remains at the lower activity level for two weeks</li> </ul> </li> <li>o In general, asymptomatic staff and residents who have recovered from COVID-19 in the prior 90 days, do not need to be retested               <ul style="list-style-type: none"> <li>o However, if testing is performed an antigen test is recommended</li> <li>o Testing visitors may not be a condition of visitation</li> <li>o The use of Point of Care COVID-19 testing is allowed per CLIA, but not required</li> </ul> </li> <li>o Orders from a physician, physician assistant, nurse practitioner, or clinical nurse specialist are required for a resident to be tested for COVID-19 (Refer to QSO-20-38-NH Revised 03/10/2022)</li> </ul>			
Refusal of Testing	<p><b>***Facilities must have procedures in place to address staff and residents who refuse testing (QSO-20-38-NH Revised 03/10/2022)***</b></p> <p style="text-align: center;"><b>Staff:</b></p> <ul style="list-style-type: none"> <li>o If <b>outbreak testing</b> has been triggered and a staff member, who is <b>not-up-date</b>, and refuses testing, the staff member should be restricted from the building until the procedures for outbreak testing have been completed</li> <li>o <b>Any</b> staff who have signs and symptoms of COVID-19 should be prohibited in the building until the return to work criteria are met</li> </ul> <p style="text-align: center;"><b>Residents:</b></p> <ul style="list-style-type: none"> <li>o Residents (or resident representatives) may exercise their right to decline COVID-19 testing 42 CFR § 483.10(c)(6)</li> <li>o Residents who refuse testing may require transmission-based precautions (TBP) based on symptoms or vaccination status. For further information see CDC guidance at <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html</a></li> </ul>			