

April 29, 2021

<Provider Name>  
<Provider Address 1>  
<Provider Address 2>  
<City> <State> zipcode5-zipcode4

Dear Provider:

RE: COVID-19 Reporting Requirements for Skilled Nursing Facilities

Effective October 28, 2020, the Michigan Department of Health and Human Services (MDHHS) updated COVID-19 reporting requirements for all licensed Skilled Nursing Facilities, hereafter referred to as “facilities,” to report specific data elements identified by the Centers for Medicare & Medicaid Services (CMS) directly to MDHHS. These data elements include, but are not limited to, Personal Protective Equipment (PPE) available onsite, information related to COVID-19 cases, and staff shortages.

Data received as a part of this requirement ensures that MDHHS continues to receive the information necessary to respond to the COVID-19 outbreak, provide an understanding of the impact on residents and facilities, and identify resource needs and support prioritization of public health action. MDHHS implements this requirement pursuant to Emergency Orders Under MCL 333.2253 – [Requirements for Hospitals, Laboratories and Health Professionals](#) and [Requirements for residential care facilities](#).

### **New or Modified COVID-19 Reporting Requirements**

The new or modified COVID-19 Reporting Requirements apply to all licensed and operating nursing homes (facilities) in Michigan, and take the place of requirements presented in previously issued L letters [20-24](#), [20-32](#) and [20-65](#). New or updated language is in *italics*.

### **General COVID-19 Reporting Information**

*Reporting COVID-19 surveillance data directly to MDHHS as outlined below does not remove the requirement to report all COVID-19 antigen test results (positive, negative, and inconclusive) conducted by a facility under a Clinical Laboratory Improvement Amendment (CLIA) Certificate of Waiver to the appropriate state and local entities. Nor does it remove the need to inform legal guardians or health proxies for all residents within the facility of the presence of a confirmed COVID-19 positive employee or resident within the same time frame.*

### **MDHHS COVID-19 Antigen Test Result Reporting Requirements**

*All Skilled Nursing Facilities performing antigen tests under a CLIA Certificate of Waiver are subject to laboratory reporting requirements as outlined in Emergency Order Under MCL 333.2253 – [Requirements for Hospitals, Laboratories and Health Professionals](#). All antigen test results must be reported daily using one of the approved reporting methods. Beginning May 26, 2021, all Skilled Nursing Facilities must report SARS-CoV-2 test results provided by a point-of-care (POC) device using the [National Healthcare Safety Network \(NHSN\) Point of Care Test Result Reporting Tool](#). Facilities without current access to the NHSN POC Test Result Reporting Tool may meet reporting requirements using the [MDHHS Antigen Test Result Reporting Form](#) until May 26, 2021.*

### **MDHHS COVID-19 Surveillance Data Submission Requirements and Frequency**

All facilities must submit COVID-19 related data to MDHHS via the EMResource platform by completing all data fields identified in the [EMResource NHSN Module Quick Guide](#). Facilities are required to report on the frequency outlined below.

MDHHS will continue to transmit the facility reported data set to NHSN on the facility's behalf. Facilities will only need to report in EMResource to satisfy the COVID-19 related MDHHS and CMS reporting requirements. **Should a facility choose to submit data directly to NHSN, the requirement to complete EMResource reporting to MDHHS will remain in effect.**

*Be advised that MDHHS will transmit all facility data that is received as is. Facilities retain full accountability for ensuring that their submissions meet NHSN requirements. Failure to submit complete data according to requirements can result in both state and federal compliance actions.*

**Reporting period:** One week, 7-day period, Wednesday through Tuesday. Beginning at 12:01 AM (0001 HRS) Wednesday, ending at 12:00 AM (midnight, or 0000 HRS) Wednesday the day of data submission.

**Data submission requirement:** Data should be submitted in EMResource once weekly between the hours of 7:00 AM (0700 HRS) and 12:00 PM (noon, or 1200 HRS) on Wednesday.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			Week 1 Data Collection			

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1 Data Collection			Week 1 Data Submission	Week 1 Data Correction (if necessary)		
			Week 2 Data Collection			

Note: While NHSN allows for reporting at least once per week on a self-identified day, MDHHS requires facilities to submit data weekly on a specified day, Wednesday, between the hours of 7:00 AM (0700 HRS) and 12:00 PM (noon, or 1200 HRS) in the EMResource platform. This reporting requirement is intended to be time-limited in response to the COVID-19 Pandemic; it remains in effect until MDHHS notifies providers of its termination.

**Data Correction**

MDHHS will conduct validation of data submitted by facilities and will contact facilities that have data flagged for validation concerns. Facilities will be required to confirm and/or correct data entries that were submitted in error or do not meet standard data definitions. Data corrections must occur by 12:00 PM (noon, or 1200 HRS) on Friday for the preceding Wednesday’s submission. Data that is not corrected will be included in transmission to the Centers for Disease Control and Prevention (CDC)-NHSN portal.

**Reporting Instructions and Definitions**

Instructions, as well as a data dictionary of each element, can be accessed within the EMResource platform through the “attached file” link. These documents should be downloaded and referenced for accuracy in reporting. *All reporting platform resources* should be referenced regularly as they are updated to align with national reporting requirements when needed.

Questions regarding the information contained within this letter should be directed to [MDHHS-MSA-COVID19@michigan.gov](mailto:MDHHS-MSA-COVID19@michigan.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "K. Massey", with a long horizontal flourish extending to the right.

Kate Massey, Director  
Medical Services Administration