Level of Care Determination

Aimee Khaled, Policy Specialist, LMSW

Level of Care Determination

- The LOCD is a “point in time” in-person assessment that determines an individual’s functional eligibility at the time of the assessment.
    - Look-Back Period versus Observation Period

- The in-person LOCD assessment is to be completed by the Nursing Facility, MI Choice, PACE, or the MI Health Link HCBS provider prior to or on the day of admission or enrollment into a program.

- All LOCD in-person assessments conducted, including Door 0 (zero, not eligible), must be entered online in CHAMPS within 14 calendar days of the face-to-face LOCD assessment (i.e., conducted dated) in order to ensure a compliant LOCD record.

Reassessing LOCD eligiblity- PHE unwind

- On May 12, 2023, providers must resume LOCDs for all beneficiaries. To determine eligibility following the end of the PHE, providers must conduct an in-person LOCD at the beneficiary's next scheduled assessment, prior to the end date of the current LOCD record, or if the beneficiary has a **new** significant change in condition, whichever is earliest. Passive redetermination may confirm eligibility for a beneficiary. All enrolled or admitted beneficiaries must have an LOCD conducted in-person or through passive redetermination prior to the end date of the current LOCD.
- See L 23-23

Reassessing LOCD eligiblity

- The LTSS provider is responsible for conducting a new LOCD if there is a significant change in the beneficiary's condition. When a provider possesses information that a beneficiary may no longer meet eligibility, the provider must conduct an in-person reassessment. Such information may come in the form of progress notes, routine assessments, staff observations, or any other documentation that might call into question the continued functional eligibility of the beneficiary.

- If there is no significant change in condition, the provider must conduct a new LOCD (in-person or through passive redetermination) prior to the end date of the current eligible LOCD.

LOCD Trainings

There are 2 LOCD trainings on the MDHHS provider support website that can be viewed at any time.

LOCD 101, covers LOCD policy and how to enter LOCDs into CHAMPS.

LOCD 201, reviews LOCD Door Criteria, Scoring, Key Points, and Supporting Documentation

Both can be viewed at the Provider Support website under trainings, then recorded trainings.

NHSN Post PHE COVID Reporting Updates

Form updates & Q3 2023 Up-to-date definition

- The slides in today's presentation were presented by the National Center for Emerging and Zoonotic Infectious Disease, Centers for Disease Control and Prevention (CDC)
- Links to archived trainings can be found here:
  - https://www.cdc.gov/nhsn/ltc/covid19/index.html
  - https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html

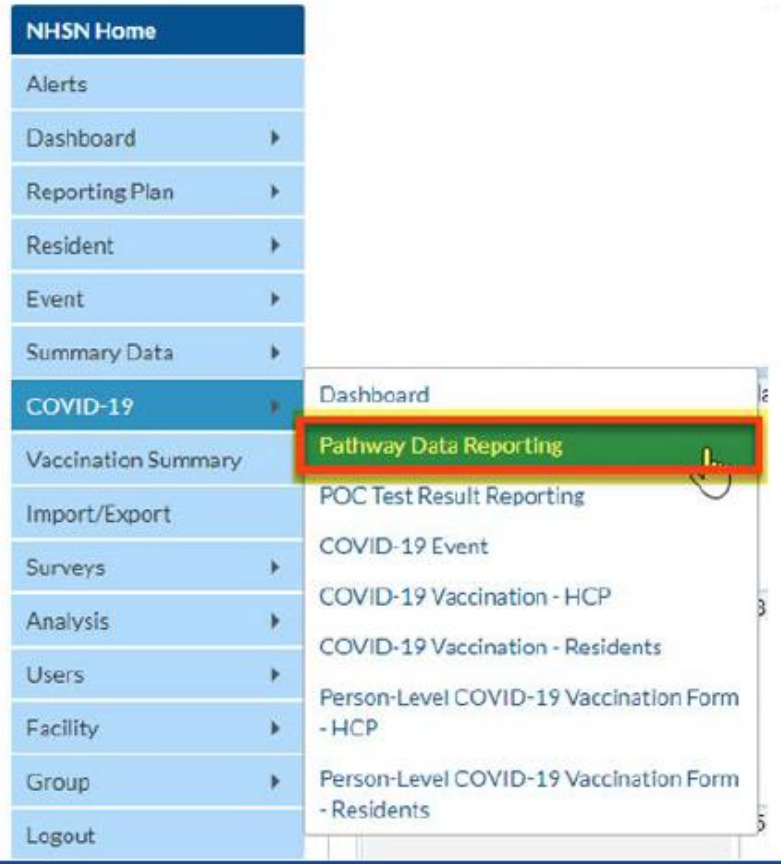
- LTCF COVID-19 Module: Surveillance Pathway Updates – June 2023
  - YouTube Webinar Recording (Video-46 minutes)

- Updates to Weekly COVID-19 Vaccination Data Reporting: Long-term Care Facilities – June 2023

COVID-19 Surveillance pathways versus COVID-19 Vaccination Modules

COVID-19 Surveillance Pathways

LTCF COVID-19 Module webpage



vs.

COVID-19 Vaccination Module

Weekly HCP & Resident COVID-19 Vaccination webpage

COVID-19 Surveillance Pathways	COVID-19 Vaccination Module
Reporting requirements	**Reporting requirements**
CMS certified facilities are required to report at least once every reporting week	**Weekly reporting requirement for LTC residents and staff** • Report at least once every reporting week • Requirement to go through December 2024
Requirement to go through December 2024	**Quarterly Reporting Requirement for Staff** • Report vaccination data 1 week/month for staff • After the weekly requirement expires in Dec. 2024, continue to report 1 week/month for staff • Use the "COVID-19 Vaccination-HCP" tab in order to report these data

Additional COVID-19 Vaccination Reporting Resources:

- Operational Guidance for Reporting COVID-19 Vaccination Data
- FAQs on Reporting COVID-19 Vaccination Data

Healthcare Personnel Safety Component: Healthcare Personnel Vaccination Module Influenza Vaccination Summary

Healthcare Personnel (HCP) Vaccination Module Influenza Vaccination Summary is an annual requirement for Long-term Care Facilities. Please note, the following slides in this training are specifically related to the **COVID-19 Surveillance Pathways NOT the Influenza Vaccination Summary**.

For more information regarding the Healthcare Personnel Component (HPC) flu vaccination reporting please review the Healthcare Personnel (HCP) Flu Vaccination webpage

For questions related to vaccination reporting please email NHSN@CDC.GOV and use the subject lines "COVID vaccination reporting in LTC" or "Influenza vaccination reporting in LTC"

Modifications to the COVID-19 Module Surveillance Pathways

Resident Impact and Facility Capacity

- Newly Positive Tests
- Vaccination status
- Deaths
- ~~Testing Availability~~
- ~~Influenza~~
- ~~Supplies/PPE Shortages~~

Staff and Personnel Impact

- Newly Positive Tests
- ~~COVID-19 Deaths~~
- ~~Influenza~~
- ~~Staffing Shortages~~

~~Therapeutics~~

- ~~Residents treated~~
- ~~In-house Stock~~
- ~~Stock Stored Outside the LTCF~~

Adding ✚ Hospitalizations

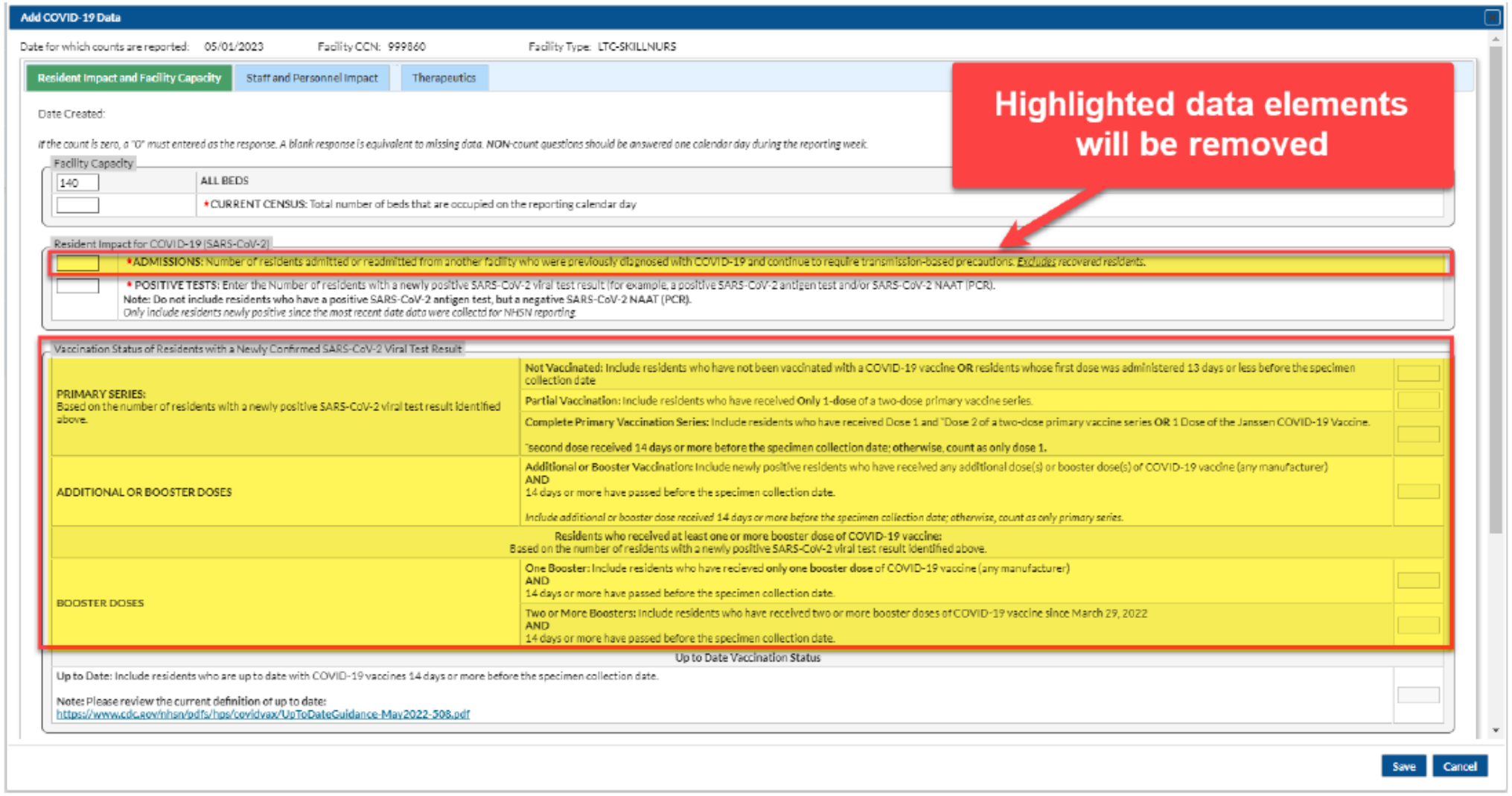
✚ ***Not Up to Date:** Auto-populated field included in the RIFC pathway

Removing Pathway

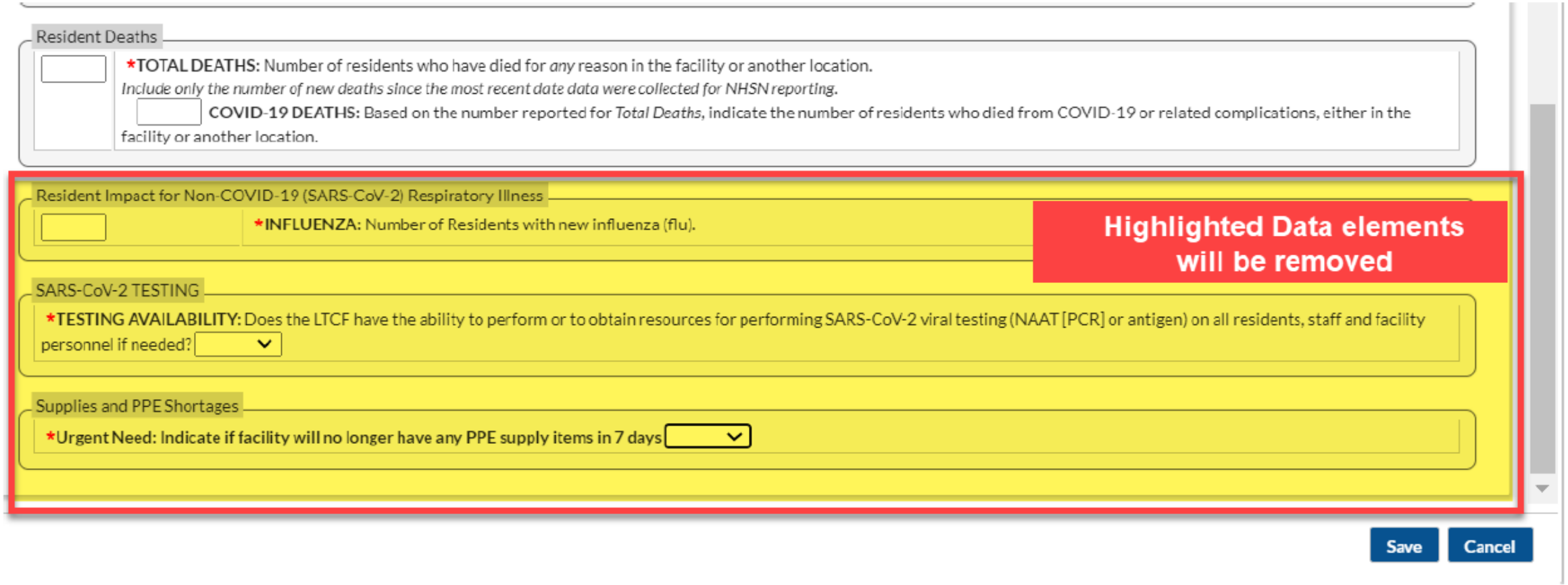
Resident Impact and Facility Capacity Pathway

NHSN COVID-19 Module

RIFC Pathway: Removing Data Elements



RIFC Pathway: Removing Data Elements



RIFC Pathway: New Auto-populated Field

New

Not Up to Date

- Auto-populated by the system
- Not editable (grayed out in the application)
  - In order to change/edit this count, counts entered for *Up to Date* and/or *Positive Tests* will need to be revised
- Calculated by subtracting the *Up to Date* count from the *Positive Test* count
  - Not Up to Date = Positive tests – Up to Date

RIFC Pathway Vaccination Status

"Vaccination status" **of residents newly positive for SARS-CoV-2 through viral testing methods is reported in the *Resident Impact and Facility Capacity* Pathway.**

- **NOT** to be confused with the weekly COVID-19 vaccination summary data used to report cumulative vaccination coverage for residents who have received COVID-19 vaccination at the facility or elsewhere.
- For information regarding *Weekly COVID-19 Vaccination Data Reporting*, visit https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html

RIFC Pathway Vaccination Status

14-day window for determining vaccination status

- For residents with a newly positive SARS-CoV-2 viral test result, a COVID-19 vaccine dose received inside the 14-day window (specifically, received 13 days or less before the specimen collection date), **is not counted when reporting vaccination status.**

Example: Mr. Andrews received the primary COVID-19 vaccine series in 2021 and received 2 additional monovalent booster doses since then. He also received the Bivalent dose **12 days ago**. Mr. Andrews also tested positive for COVID-19 this week, however since he did not receive the Bivalent dose 14 days or more prior to testing positive, he will not be included in the *Up to Date* count.

Up to Date Vaccination Status

Up to Date: Include residents who are up to date with COVID-19 vaccines 14 days or more before the specimen collection date.

Note: Please review NHSN's surveillance definition of Up to date

RIFC Pathway Newly Added Data Element: Hospitalizations

New

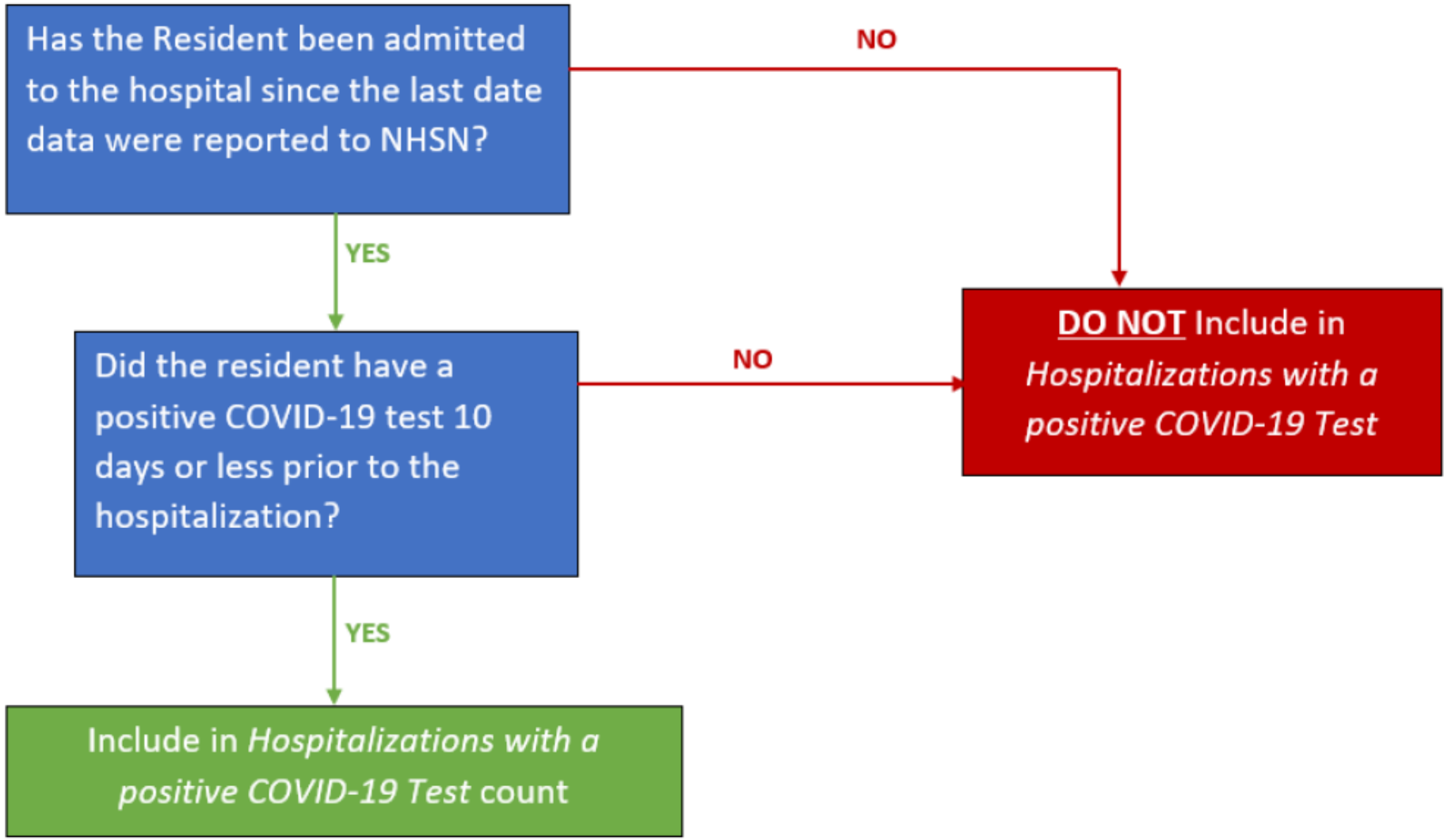
- **Hospitalizations with a positive COVID-19 Test:** Number of residents who have been hospitalized with a positive COVID-19 test.

  Note: Only include residents who have been hospitalized during this reporting period and had a positive COVID-19 test in the 10 days prior to the hospitalization, date of specimen collection is calendar day 1.

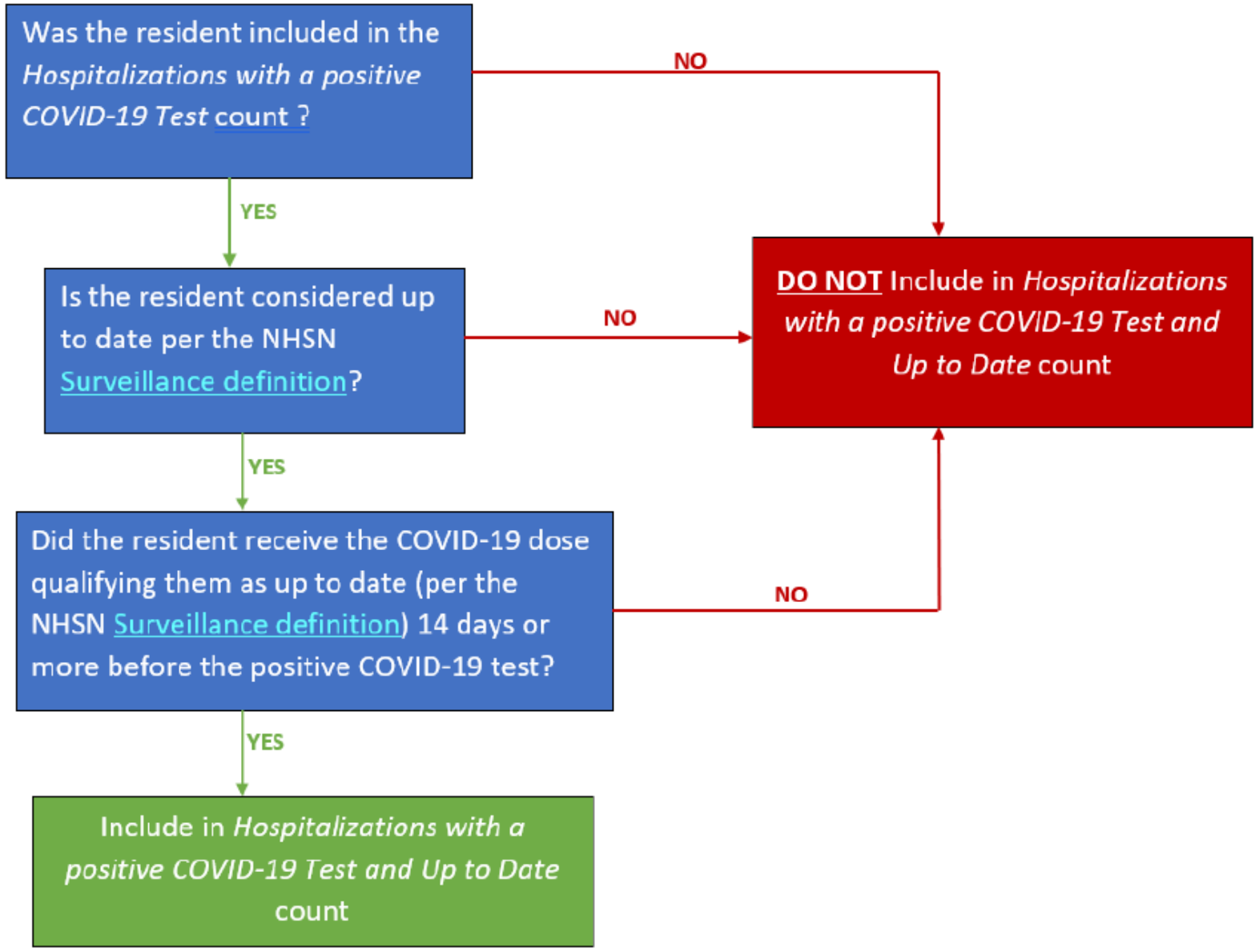
New

- **Hospitalizations with a positive COVID-19 Test and Up to Date:** Based on the number reported above for "Hospitalizations with a positive COVID-19 Test", indicate the number of residents who were hospitalized with a positive COVID-19 test and also up to date with COVID-19 vaccinations at the time of the positive COVID-19 test.

Hospitalizations with a positive COVID-19 Test Decision Tree



Hospitalizations with a positive COVID-19 Test and Up to Date Decision Tree



RIFC Pathway: Data Reporting Example

Resident Impact for COVID-19 (SARS-CoV-2)

2	* **POSITIVE TESTS:** Enter the Number of residents with a **newly** positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR). **Note: Do not include residents who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR).** *Only include residents newly positive since the most recent date data were collectd for NHSN reporting.*

Vaccination Status of Residents with a Newly Confirmed SARS-CoV-2 Viral Test Result

Up to Date Vaccination Status	
Up to Date: Include residents with a newly positive SARS-CoV-2 viral test result who are up to date with COVID-19 vaccines 14 days or more before the specimen collection date. **Note: Please review the current NHSN surveillance definition of up to date.**	1
Not Up to Date: Based on the counts entered for POSITIVE TESTS and UP TO DATE, the count for residents who are NOT considered up to date based on the NHSN Surveillance definition has been calculated above. This count is not editable, to edit please update the count entered for UP TO DATE.	1

Hospitalizations

This is not a subset of the "Positive Tests" count reported above. Include only the number of new hospitalizations with a positive COVID-19 test since the most recent date data were reported to NHSN.

1	*__Hospitalizations with a positive COVID-19 Test:__ Number of residents who have been hospitalized **with** a positive COVID-19 test. **Note:** Only include residents who have been hospitalized during this reporting period and had a positive COVID-19 test in the **10 days prior to the hospitalization,** date of specimen collection is calendar day 1. 1 **__Hospitalizations with a positive COVID-19 Test and Up to Date:__ Based on the number reported for *"Hospitalizations with a positive COVID-19 Test"* indicate the number of residents who were hospitalized **with positive COVID-19 test and also up to date with COVID-19 vaccinations at the time of the positive COVID-19 test.**

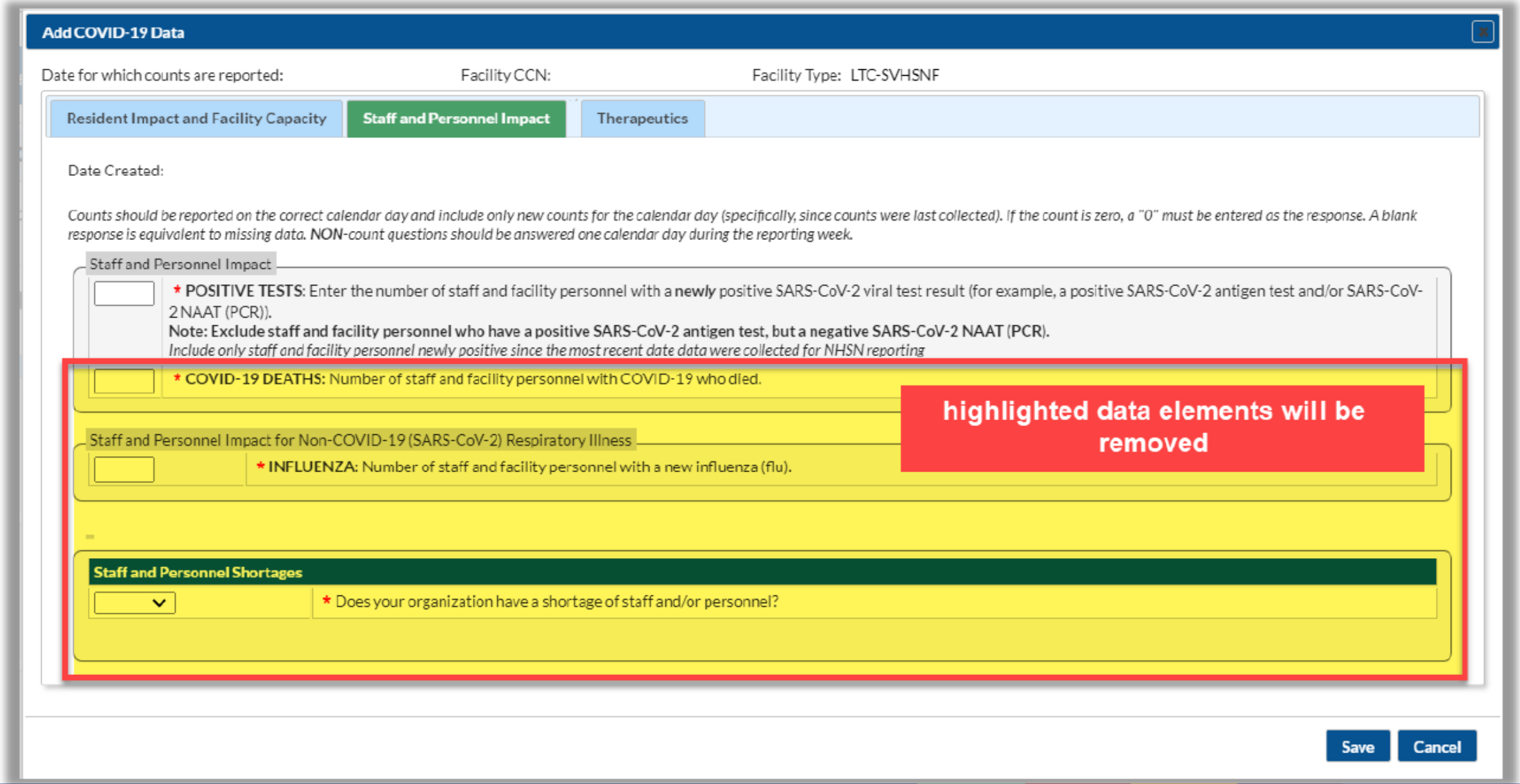
Resident Deaths

0	*__TOTAL DEATHS:__ Number of residents who have died for *any* reason in the facility or another location. *Include only the number of new deaths since the most recent date data were collected for NHSN reporting.* 0 **COVID-19 DEATHS:** Based on the number reported for *Total Deaths*, indicate the number of residents who died from COVID-19 or related complications, either in the facility or another location.

Staff and Personnel Impact Pathway Updates

NHSN COVID-19 Module

Staff and Personnel Impact Pathway



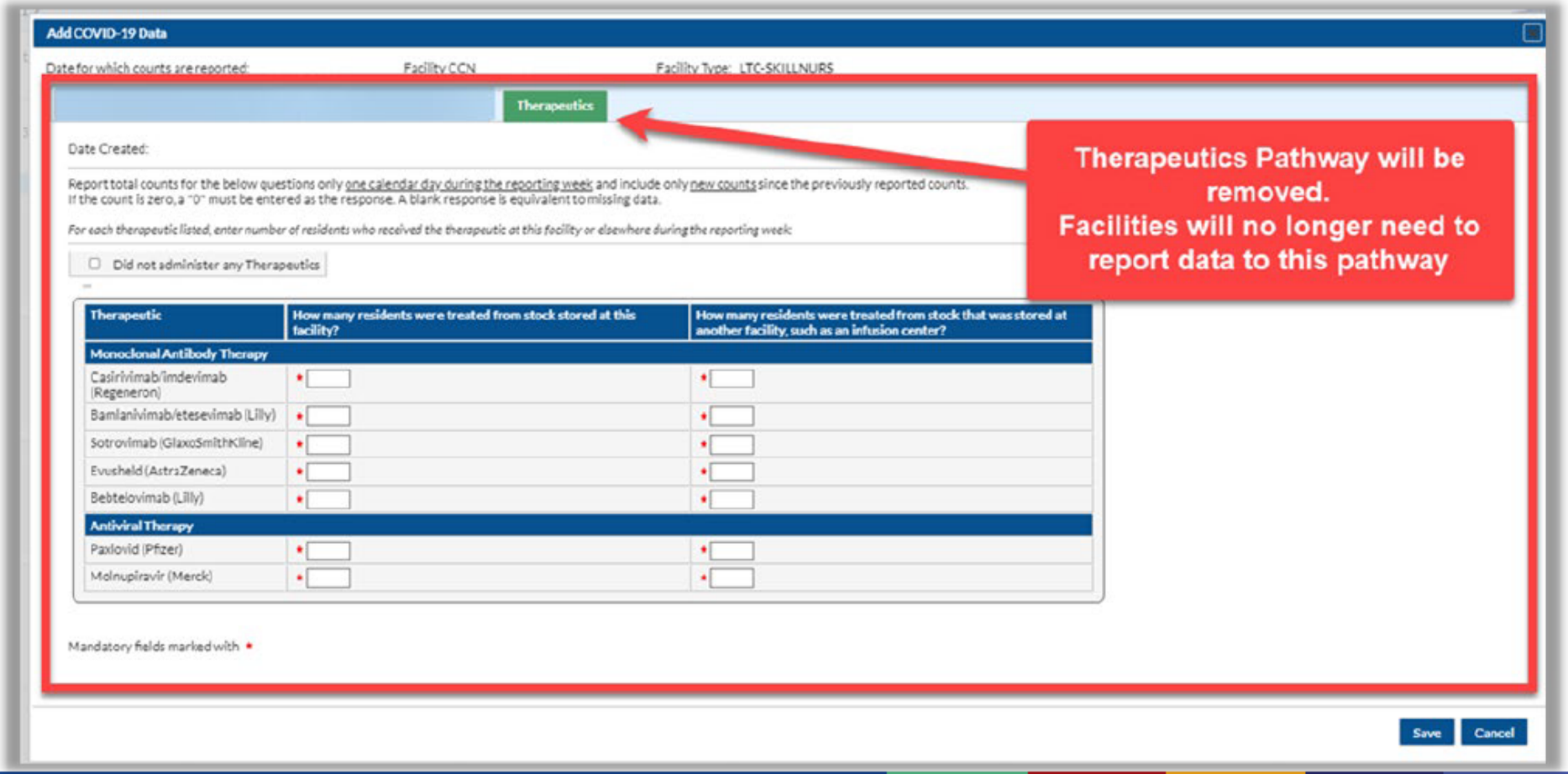
Therapeutics Pathway Updates

Removing Pathway

REMOVING

Therapeutics Pathway: Removing Pathway

- Removing this pathway
  - Facilities will no longer need to report data to this pathway



One Stop Browsing for NHSN LTCF COVID-19 Module Resources

Visit NHSN LTCF COVID-19 Module web page for reporting resources

LTCF COVID-19 Module

Print

Facilities eligible to report data to NHSN's LTCF COVID-19 Module include nursing homes/skilled nursing, Intermediate Care Facilities for individuals with Intellectual disability (ICF/ID), and assisted living facilities.

Introduction

On This Page

- Enrollment & Data Security
- Training
- CMS Requirements
- Forms & Instructions
- Facility CSV Data Import
- Group CSV Data Import
- POC CSV Data Import
- Facility Resources
- Group Resources

Nursing Home COVID-19 Data Dashboard

FAQs about the POC Testing Reporting Tool [PDF - 4 MB]

CDC COVID-19 Info
Get the latest information from the CDC about COVID-19

Data Collection Forms and Instructions

Resident Impact and Facility Capacity

COVID-19 Resident Impact and Facility Capacity Pathway Form (57.144) [PDF – 251 KB] (print-only) -

- Table of Instructions (57.144) [PDF – 476 KB] -

Staff and Personnel Impact

COVID-19 Staff and Personnel Impact Pathway Form (57.145) [PDF – 161 KB] (print-only) -

- Table of Instructions (57.145) [PDF – 250 KB] [PDF – 358 KB] -

Point of Care Testing

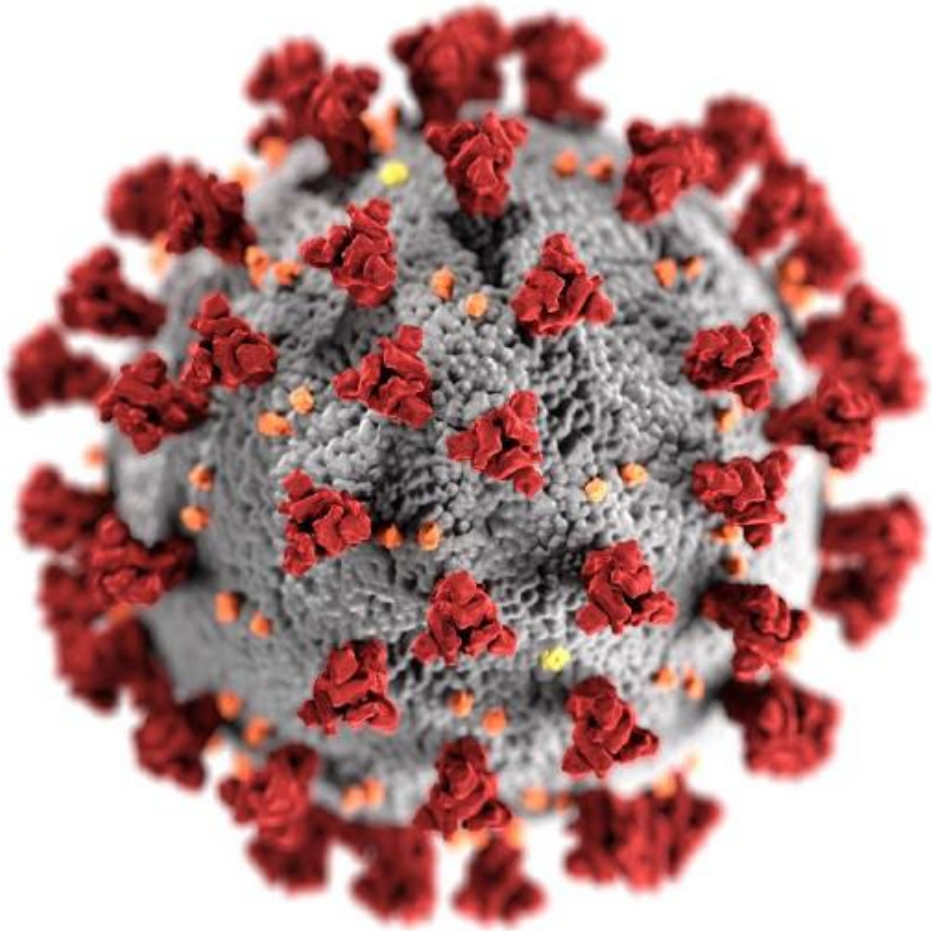
Point of Care Test Reporting Tool (57.155) [PDF – 80 KB] (print-only) -

- Table of Instructions (57.155) [PDF – 200 KB] -

Updates to Weekly COVID-19 Vaccination Data Reporting: Long-term Care Facilities

Division of Healthcare Quality Promotion
Centers for Disease Control and Prevention (CDC) COVID-19

June 2023



cdc.gov/coronavirus

Current Weekly COVID-19 Vaccination: Resident Form

Removing

- Primary vaccine series and booster dose questions on question 2 and 4

Keeping

- Question 1
- Question 3 – 3.3 (modified definition)
- Question 5
- (moving to question 2)

	1. *Number of residents staying in this facility for at least 1 day during the week of data collection
Primary Vaccine Series	2. *Cumulative number of residents in Question #1 who have received **primary** series COVID-19 vaccine in this facility or elsewhere since December 2020:
	2.1. *Only dose of a two-dose **Primary** COVID-19 vaccine series
	2.2. *Any completed **Primary** COVID-19 vaccine series
	3. *Cumulative number of residents in Question #1 with other conditions:
	3.1. *Medical contraindication to COVID-19 vaccine
	3.2. *Offered but declined COVID-19 vaccine
	3.3. *Unknown COVID-19 vaccination status
Boosters	4. *Cumulative number of residents with complete primary series vaccine in Question #2 who have received **any booster(s) or additional dose(s)** of COVID-19 vaccine since August 2021
	4.1. *Cumulative number of residents in Question #4 who have received **only one booster dose** of COVID-19 vaccine since August 2021
	4.2. *Cumulative number of residents in Question #4 who received **two or more booster doses** of COVID-19 vaccine, and the most recent dose was received since March 29, 2022
Up to Date	**Question 5 asks about individuals who are up to date. Please review the current definition of up to date:** https://www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-May2022-508.pdf
	5. *Cumulative number of residents in question #2 who are up to date with COVID-19 vaccines

Weekly COVID-19 Vaccination: Revised Resident Form

New Version: After removing Primary Series, and Boosters

1. *Number of residents staying in this facility for at least 1 day during the week of data collection	
2. *Cumulative number of residents in Question #1 who are **up to date** with COVID-19 vaccines. **Please review the current definition of up to date:** Key Terms and Up to Date Vaccination	
3. *Cumulative number of residents in Question #1 with other conditions:	
3.1. *Medical contraindication to COVID-19 vaccine	
3.2. *Offered but declined COVID-19 vaccine	
3.3. *Unknown/other COVID-19 vaccination status	

Current Weekly COVID-19 Vaccination: HCP Form

Removing

- Questions 2.1, 2.2 and 5

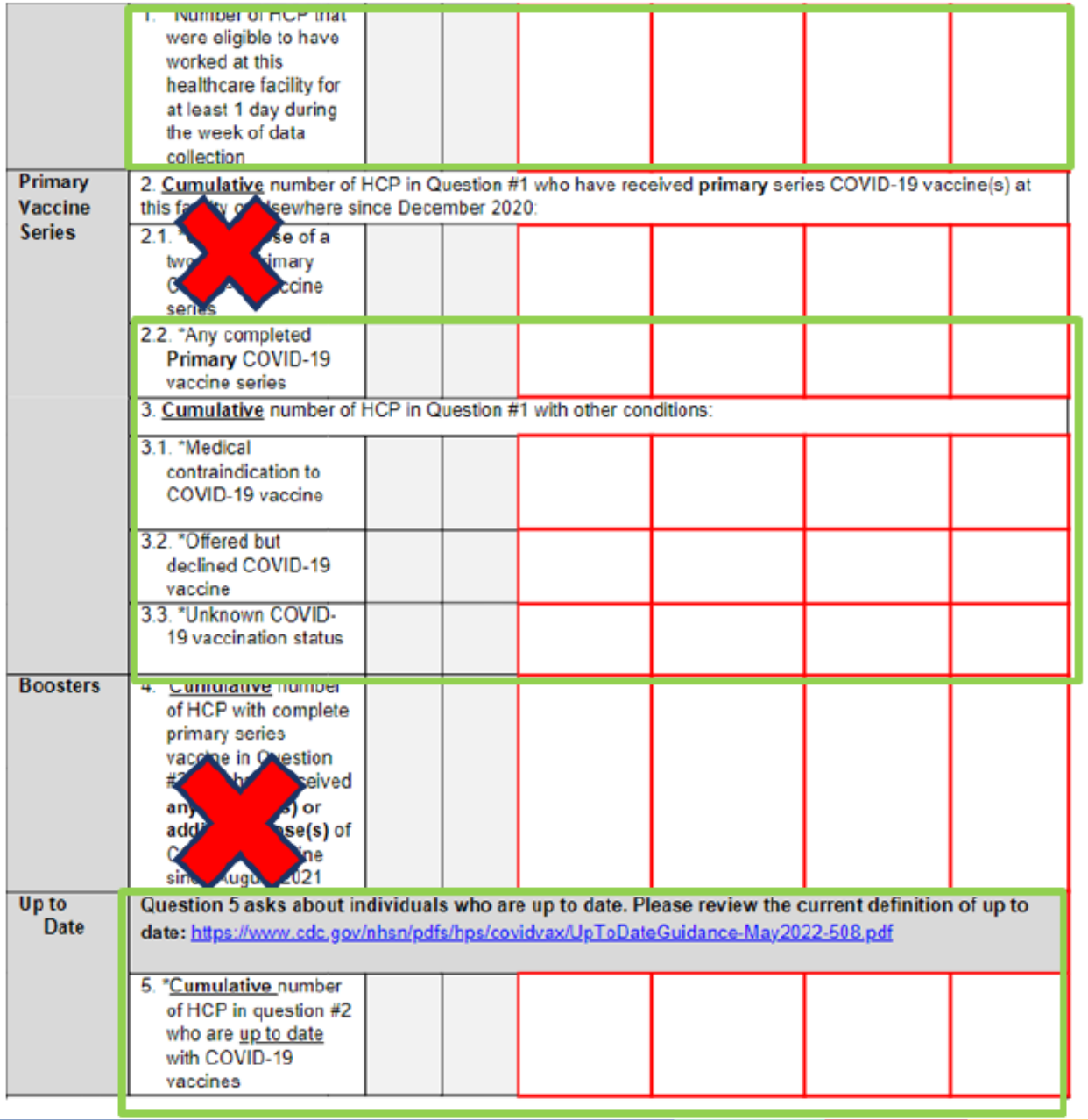
Moving

- Up to date from question 5 to question 4

Keeping

- Questions 1, 2, and 3 - 3.3

Updated Foot notes



Weekly COVID-19 Vaccination: Revised HCP Form

New Version:

with up to date changes and reduction of questions

Cumulative Vaccination Coverage						
	Healthcare Personnel (HCP) Categories					
	All Core HCP[a]	All HCP[b]	Employee HCP	Non-Employee HCP		
			*Employees (staff on facility payroll)[c]	*Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants[d]	*Adult students/ trainees & volunteers[e]	*Other Contract Personnel[f]
1. *Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection						
2. *Cumulative number of HCP in Question #1 who have received **complete primary series**[g] COVID-19 vaccine(s) at this facility or elsewhere since December 2020						
3. *Cumulative number of HCP in Question #1 with other conditions:						
3.1. *Medical contraindication to COVID-19 vaccine						
3.2. *Offered but declined COVID-19 vaccine						
3.3. *Unknown/other COVID-19 vaccination status						
4.*Cumulative number of HCP in question #1 who are **up to date** with COVID-19 vaccines. **Please review the current definition of up to date:** Key Terms and Up to Date Vaccination						

Definition for Up to Date COVID-19 Vaccination Status

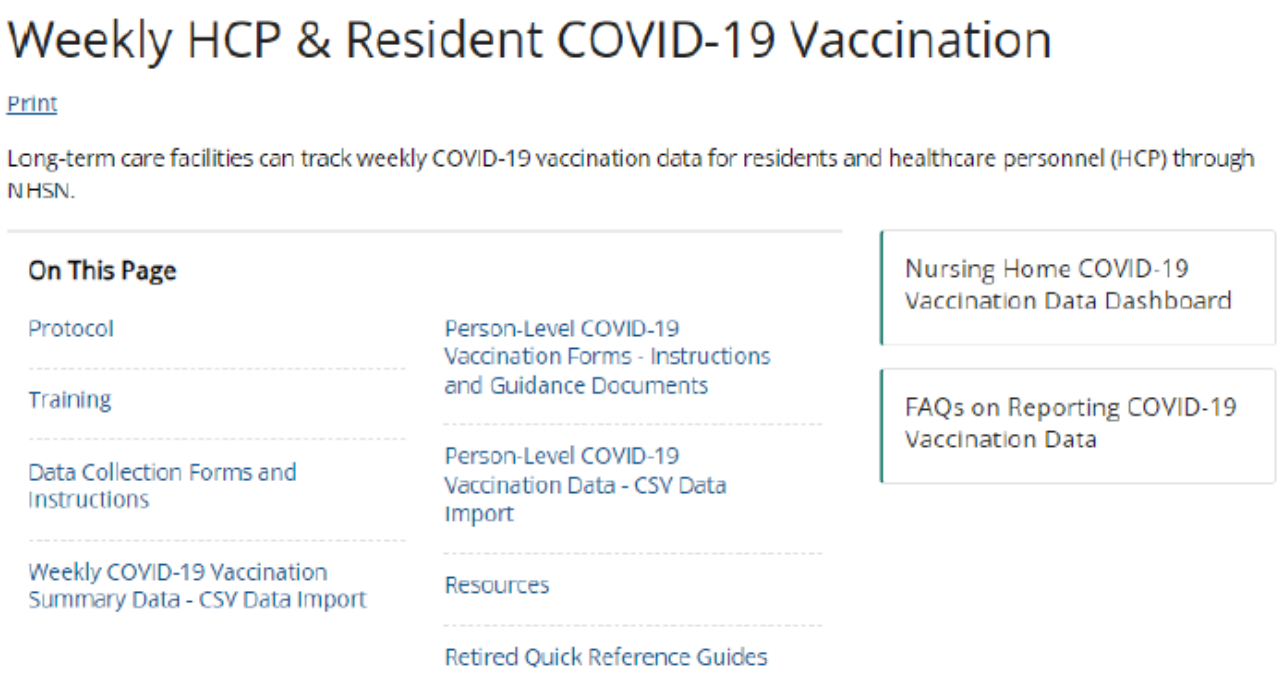
- In April of 2023 Food and Drug Administration (FDA) and the CDC announced changes to its Emergency Use Authorization for COVID-19 vaccines.

- Beginning on **June 26, 2023** (Q3 2023), residents and healthcare personnel are considered up to date with their COVID-19 vaccinations if they have **received an updated (bivalent) vaccine(s)**.

- An individual is considered up to date once they received 1 updated bivalent Pfizer-BioNTech or bivalent Moderna COVID-19 vaccine. This up to date definition is the same for all individuals, regardless of age and immunocompromised status.

Resource: The NHSN Website

- Weekly HCP & Resident COVID-19 Vaccination | LTCF | NHSN | CDC
  - Training Slides
  - Quick Reference Guides
  - FAQs
  - Data Collection Forms
  - .CSV
  - Person – Level Forms



Weekly HCP & Resident COVID-19 Vaccination

Print

Long-term care facilities can track weekly COVID-19 vaccination data for residents and healthcare personnel (HCP) through NHSN.

On This Page

Protocol

Training

Data Collection Forms and Instructions

Weekly COVID-19 Vaccination Summary Data - CSV Data Import

Person-Level COVID-19 Vaccination Forms - Instructions and Guidance Documents

Person-Level COVID-19 Vaccination Data - CSV Data Import

Resources

Retired Quick Reference Guides

Nursing Home COVID-19 Vaccination Data Dashboard

FAQs on Reporting COVID-19 Vaccination Data

Healthcare-Associated Infection Reduction Program

Chelsea Ludington, MPH, CIC

IPRAT

Infection Prevention Resource and Assessment Team

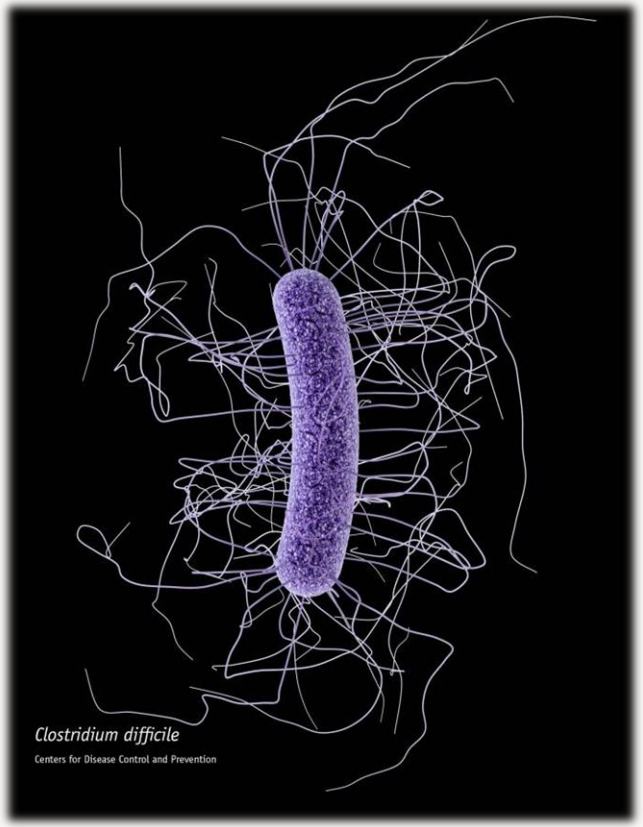
The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.

HAI Reduction Program

Goal

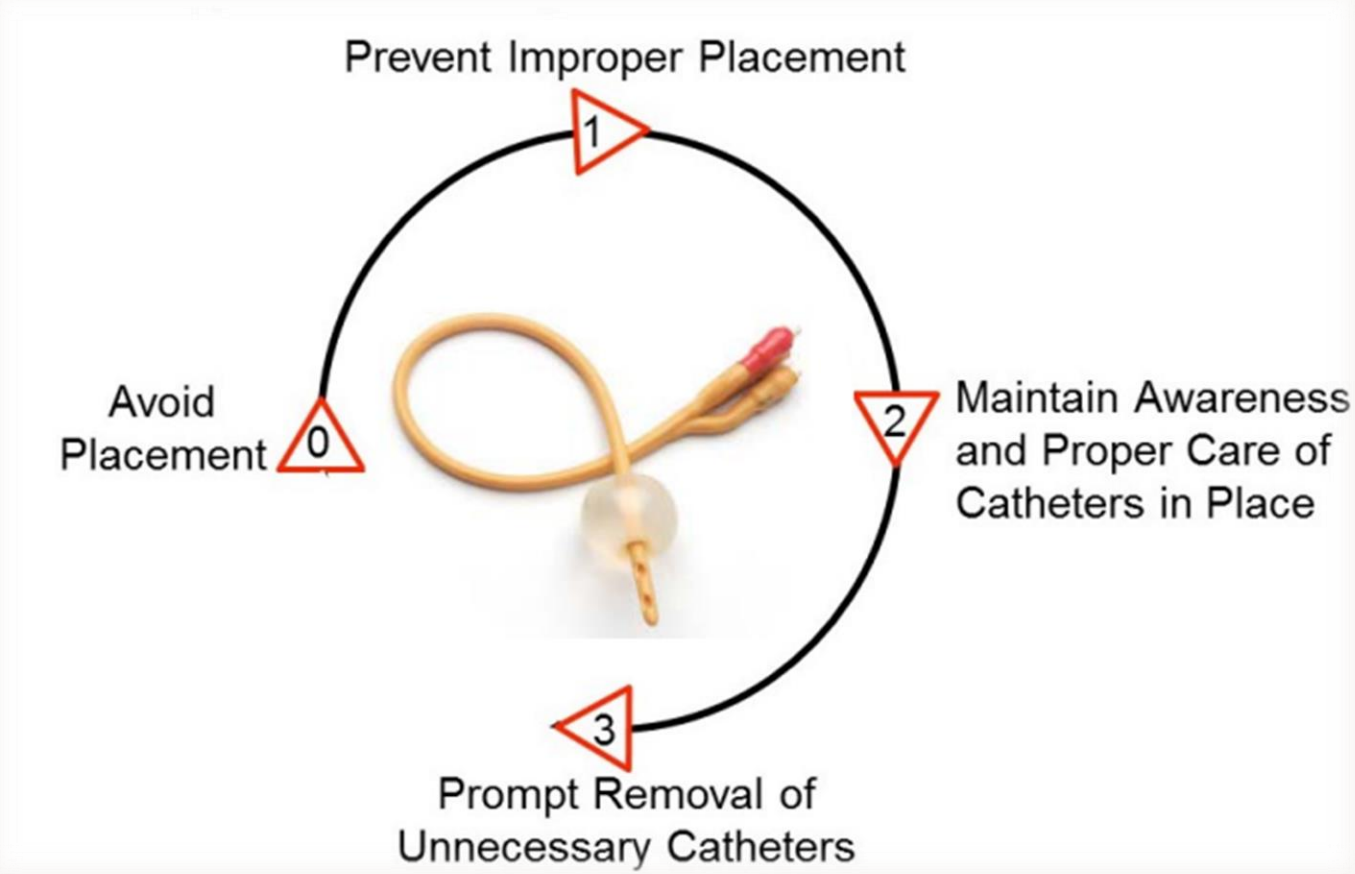
"To provide infection prevention support and resources to long-term care facilities within Michigan for the implementation of evidence-based best practices to provide safe patient care and prevent hospital-acquired infections. Through this program, IPRAT will work with facilities toward the goal of HAI elimination."

CDI Elimination



- Barrier precautions
- Hand hygiene
- Cleaning and disinfection
- Antibiotic & diagnostic stewardship

CAUTI Elimination



Insertion

Maintenance

Want to learn more about our HAI elimination initiative?

MDHHS-IPRAT@Michigan.gov

517-335-8165

www.Michigan.gov/IPRAT

Long Term Care Operations Staff

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- Curt Korten, MA LLP LPC CAADC CCS, Home Health and Hospice Specialist
- Paris Lawson, Nursing Facility Enrichment Coordinator
- Ian Lowers, Nursing Facility Analyst
- Malia Robb, Nursing Facility Enrichment Grant Coordinator
- Amy Willing, Financial Analyst

Email addresses

- **General Questions**: MDHHS-LTCOPERATIONS@michigan.gov
- **Civil Monetary Penalty Reinvestment Grants (CMP Grants)**: MDHHS-CMPGRANTS@michigan.gov
- **Medicaid Nursing Facility Bed Certifications:** MDHHS-BEDCERTS@michigan.gov
- **Quality Measure Initiative (NFQMI):** MDHHS-NFQMI@michigan.gov
- **Infection Control Grants:** MDHHS-ICGRANTS@michigan.gov
- **Bed Isolation Requests:** MDHHS-NFISOLATION@michigan.gov
- **Private Room Requests:** MDHHS-NFISOLATION@michigan.gov

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