

Order of the Secretary of Health for Testing of Residents and Staff in Long-Term Care Facilities Frequently Asked Questions

June 26, 2020

Question: Why did the Secretary of Health issue this Order?

Answer: The Secretary of Health issued this Order to assist in protecting the safety of residents and staff in Long-Term Care Facilities (LTCFs) across the Commonwealth. Many facilities across the Commonwealth are already conducting universal testing per the Department of Health (DOH) plans published on May 12 and May 29, 2020. For facilities that have not begun testing already, this Order mandates testing beginning July 1, 2020 because doing so protects vulnerable populations and frontline workers.

In addition, the Secretary of Health issued this Order to increase facility readiness. Facilities need to prepare for a potential second surge in the future and developing capacity to do this in advance of a surge will help everyone to be better prepared.

Question: Why did the Secretary of Health issue this Order for only some facilities licensed by the Department of Human Services (DHS)?

Answer: Secretaries Levine and Miller determined which facilities should be required to test residents and staff. Personal Care Homes (PCHs), Assisted Living Residences (ALRs), and Intermediate Care Facilities (ICFs) licensed by DHS are all subject to the requirements herein, which are reflective of the same requirements established for Skilled Nursing Facilities (SNFs). Many residents living in PCHs, ALRs, and ICFs are among the most vulnerable populations due to underlying health conditions. Testing for COVID-19 can help make sure that staff infected with COVID-19 stay home, and that infection control measures (such as appropriate use of PPE, infection control expertise support, and cohorting) are utilized when appropriate.

Not all DHS-licensed facilities were included in the Order because 1) other DHS-licensed facility types do not have as many residents who are either elderly or have preexisting conditions, 2) many DHS-licensed facilities are not residential facilities, and 3) many other DHS-licensed facilities are structured as small homes with only a few people in each home, leading to different infection control considerations. DHS staff are working closely with licensed providers to monitor conditions at all DHS-licensed facilities, including those not encompassed within the scope of this order, and providers can request additional support if necessary.

Question: What is the timeline for testing? How long does a facility have to initiate or complete the tests?

Answer: A facility has until August 31, 2020 to complete the initial baseline testing, including testing of all staff and residents. A facility that has tested all staff and residents in the 14 days prior to the issuance of this Order (since June 12, 2020) should count that testing as meeting the initial baseline testing requirement, as long as the testing is appropriately captured in the data collection survey

specified in the Requirements for Testing issued on June 26, 2020. There is no requirement for when a facility must begin testing, but testing must be completed by the August 31, 2020.

Question: If a facility has completed universal testing, and it has been more than 14 days since the last case in staff or residents, does the facility need to continue testing?

Answer: The Order of the Secretary does not require continued testing. However, continued testing is recommended contingent upon the availability of testing supplies and personal protective equipment (PPE). PCHs, ALRs, and ICFs should continue to test residents and staff if any become symptomatic and follow guidelines in [PA-HAN-509](#) for any new cases of COVID-19.

Question: My facility is following PA-HAN 501, but now we cannot meet minimum staffing requirements. What should we do?

Answer: Staff who are symptomatic should be excluded from work and isolated until they meet return to work criteria as specified in PA-HAN-509. Asymptomatic staff who test positive should be excluded from work and isolated for 10 days from the date of their first positive test, if they have not developed symptoms. A facility should consider a plan to augment staff, such as contacting staffing agencies, prior to receiving testing results. If there are no longer enough staff to provide safe patient care, and other contingency capacity strategies have been exhausted (see [CDC strategies](#)), a facility and employer may need to implement crisis capacity strategies to continue to provide patient care. The decision to follow contingency or crisis standards rests with the facility, but these decisions and actions must be detailed in and consistent with their emergency preparedness plan. Under crisis capacity standards, asymptomatic positive staff may be permitted to work in certain roles. Please follow guidance in [PA-HAN-501](#). A facility in staffing crisis may also need to reach out to partners, such as their local Healthcare Coalition or, beginning in July, their Regional Response Health Collaborative Program (RRHCP), to discuss additional options. If contingency or crisis capacity strategies are implemented, the facility should notify their licensing program office. The facility continues to be obligated to comply with licensing standards.

Question: What if I am unable to cohort patients or create the red, yellow, green zones as outlined in PA-HAN-509 due to lack of empty beds or space?

Answer: While some of these facility types will not be able to cohort as effectively as SNFs, [PA-HAN-509](#) lays out a series of alternatives to separating the facilities into three zones. Please reference the section titled “Potential Cohorting Modifications for LTCFs” in [PA-HAN-509](#) for recommendations on how a facility that cannot move patients around their facility can implement appropriate infection control measures. For technical assistance with the implementation of infection prevention and control measures, please reach out to your licensing program office. If you are a facility licensed by the Office of Long Term Living (OLTL), contact RA-pwarlheadquarters@pa.gov. If you are a facility licensed by the Office of Developmental Programs (ODP), contact RA-PWODPEMRGNCYRSPRQ@pa.gov. RRHCPs will be available to assist facilities beginning in July.

Question: What is the penalty if I do not follow the Secretary’s Order? Will I receive a deficiency or fine?

Answer: The Governor and the Secretary believe that facilities intend and are attempting to care for their residents appropriately. If, however, it appears that a facility willfully refuses to test as required in the Secretary’s Order or is negligent in complying with the Order, DOH has the option to fine the facility

under the Disease Preventions and Control Law. Facilities are strongly urged to request help when necessary and take every step necessary to comply with the Secretary's Order.

Question: How can facilities get assistance with swabbing residents and staff?

Answer: Facilities should rely primarily on in-house clinical expertise (e.g., the Medical Director, RNs, LPNs) to conduct testing if available. ICFs are required to have physician services available to the facility 24/7, for example. If a facility does not have those team members on staff or contract or because they are out sick, RRHCPs will be able to assist with ordering, conducting, and reporting the results of the testing beginning in July. Also, DOH is bringing on additional resources to assist with swabbing. A facility in need of assistance should reach out to their licensing program office, and send an email to ra-dhCOVIDtesting@pa.gov to request assistance with testing from DHS and DOH.

Question: Who will help facilities with follow-up testing?

Answer: Facilities should have plans in place to implement follow-up testing if residents or staff within the facility test positive, as outlined in [PA-HAN-509](#). Facilities can coordinate with commercial vendors, including staffing support to conduct the tests, and commercial laboratories authorized by the Commonwealth to conduct SARS-CoV-2 testing. RRHCPs will also be able to assist beginning in July.

Question: How can facilities get assistance in obtaining supplies to conduct the swabbing?

Answer: Facilities should first reach out to their laboratory or medical supply vendors to procure sufficient supplies to conduct specimen collection. If normal supply chain procurements are unable to provide sufficient supplies, facilities lacking testing supplies can send an email to ra-dhCOVIDtesting@pa.gov. The facility will receive an autoreply with a link to a form to request support, including supplies, from DOH. The form must be completed in its entirety. Shipments will be based on the quantities available at the time the request is reviewed.

Question: Is there a specific type of swab or test that facilities should be using? Does one type of swab have a higher or lower error rate than the other?

Answer: Viral testing (i.e., RT-PCR) should be used to inform additional actions necessary to keep SARS-CoV-2 out of facilities, detect COVID-19 cases quickly, and stop transmission. Facilities should consult with the laboratory that will be performing the testing as to the appropriate and approved specimen collection methods, which are often either Nasal Pharyngeal (NP) or Anterior Nares (nostril) swab. Both swab types can typically be used; [current CDC guidance](#) does not recommend one collection type over another. Testing practices should aim for rapid turn-around times (e.g., less than 48 hours) in order to facilitate effective action. At the current time, antibody test results should not be used to diagnose someone with an active SARS-CoV-2 infection and should not be used to inform infection prevention and control actions.

Question: How can a facility without a clinical staff order testing for staff and residents?

Answer: RRHCPs will be established by DHS and available to support facilities without clinical staff beginning in July. RRHCPs will provide the support of clinical staff, who will be able to order, perform, and report the results of the testing. However, if a facility needs to perform universal testing before

RRHCPs are operational, they should still complete the survey at ra-dhCOVIDtesting@pa.gov to request assistance from DOH and DHS.

Question: Who gets billed for the COVID-19 test?

Answer: The individual's primary health care coverage should be billed for the COVID-19 test. The RRHCP grants specify that the health systems are going to be providing testing support, beginning at the start of July, which could also bill the primary health care coverage or Medicare or Medical assistance. Facilities can also use CARES Act funding distributed by DHS to cover the costs of testing for some of their staff or residents. Each facility's staff should consult with their employer to determine how the test should be paid for and whether there are any particular testing arrangements in place for that facility's staff.

The Commonwealth is currently paying for no-cost testing at Walmart (in cooperation with Quest Laboratories, until July 17) and Rite Aid (until at least August 25) to perform free, on-site testing, which may be an option for staff. Any staff who work at a PCH, ALR, or ICF can specify that they work in the health care field (during the pre-screening process) and should have their test covered at no cost. The website for Rite Aid is available here: <https://www.riteaid.com/pharmacy/services/covid-19-testing> and the website for Walmart (in cooperation with Quest laboratories) is available here: [MyQuestCOVIDTest.com](https://www.questdiagnostics.com/MyQuestCOVIDTest.com). There are a total of 19 sites available throughout the state.

Question: How can a DHS-licensed facility that is not mandated by this Order undertake universal testing?

Answer: All long-term care facilities licensed by DHS are free to submit their request for testing assistance to ra-dhCOVIDtesting@pa.gov to notify DHS and DOH. However, certain elements of this testing survey may be difficult to complete (such as requirements for an ordering physician). All facilities may contact their licensing program offices for additional help and support, and the RRHCPs will be available to assist all DHS-licensed facilities undertake testing after the RRHC program is operational near the beginning of July.

Question: Who do I contact if I have additional questions?

Answer: If you are a facility licensed by OLTL, contact RA-pwarlheadquarters@pa.gov. If you are a facility licensed by the ODP, contact RA-PWODPEMRGNCYRSPRQ@pa.gov. If you are a type of facility not mandated to conduct universal testing by the Secretary's Order, please contact your licensing program office or RRHCP after July 1, 2020.