

COVID-19 UPDATE



SNF/Long Term Care Transfer Guidelines

Situation: Skilled Nursing Facilities are regulated by their local and state Departments of Public Health. The Department of Health supersedes other agencies including the Centers for Disease Control. The Post Acute Leadership team is in close contact with Illinois and Wisconsin County and State Departments of Public Health. The purpose of this document is to share information regarding recommendations from the state Departments of Public Health and will be updated as changes and recommendations occur

Background: Per the Centers for Disease Control (CDC), SNF and Long Term Care patients are the most vulnerable in our population. While COVID Mortality is about one in five hundred for persons 30 and younger, the CDC stated in March that COVID-19 is fatal for one of twelve persons' in their 60's and fatal for one of seven in their 80's. The current focus is still to try and prevent/remove any COVID-19 patients from this setting.

Assessment: Admittance Criteria for Skilled Nursing Facilities and other congregate settings:

- **Category 1: Patients with no clinical concern for COVID-19:** Acceptable for transfer to congregate facility for discharge (no change in standard process)
- **Category 2: Patients investigated for possible COVID-19, but negative testing:** If patient has negative testing, negative influenza testing, and meeting usually critical criteria for discharge, then acceptable for transfer to congregate facility
- **Category 3: Patients under investigation for COVID-19, but test results pending:** Will NOT be transferred to congregate facility until test completed.
- **Category 4: Patients positive for COVID-19 testing:** Acceptable for transfer if patient is clinically stable and the site is able to maintain transmission-based precautions if still required. Criteria for discharging transmission based on precautions: [CDC Guidelines](#)
 - Test based
 - 2 negative results of an FDA Emergency Use-Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥ 24 hours apart (total of two negative specimens)
 - Resolution of fever without the use of fever-reducing medications and
 - Improvement in respiratory symptoms (e.g., cough, shortness of breath)

Preferred for:

- Patients who are hospitalized
 - Immunosuppressed
 - Patients being transferred to congregate living
- Symptom based
 - Improving symptoms
 - Afebrile (<99.0) for 72 hours without treatment
 - 10 days since first symptoms or the longer of the two.
 - Consider consulting with your infectious disease experts when making decision about discontinuing Transmission-Based Precautions for patients who might remain infectious longer than 10 days (e.g., severely immunocompromised)
- If a current resident in a LTC is suspected of or positive COVID-19 they may remain in the facility if the following circumstances:
 - The resident does not need a higher level of care than what can be provided in the facility.
 - The resident can be placed in a private room with private bath with appropriate isolation initiated.
 - They have the **adequate PPE** to protect the other residents in the facility.
 - The situation/circumstance are reviewed with the Department of Public Health and they agree with the plan
- COVID-19 testing guidance
 - Patients from congregate living who are hospitalized with unexplained pneumonia
 - Patients with COVID-19 like symptoms
 - Temperature > 100.0 or fever
 - Cough
 - Sore throat
 - Shortness of breath/difficult breathing
 - Muscle aches
 - Headache
 - Abdominal discomfort
 - Vomiting
 - Diarrhea
 - Loss of taste/smell
 - Rigors
 - Symptoms cannot be attributed to an underlying or previously recognized condition

Recommendation:

- Continue to work on "Home First" alternatives
- Focus on discharging non-infected patients to free hospital beds with those that may be suspect or positive
- Care Management to work closely with PAN SNF program managers to remove barrier to transition
 - Daily huddles
- Utilize waiver discharging traditional Medicare FFS patients without qualifying hospital stay

- PAN SNF leadership working with Department of Public Health regarding alternate surge plans
- Consider all patient transfers from skilling nursing facilities as potentially infected
- Please reach out to your PAN SNF Program Manager with any concerns.

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