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October 9, 2020

To: All Nursing Facilities and Certified ICF/IID Facilities

Re: Revised COVID-19 Testing and Visitation Guidance:

Due to recent significant changes regarding nursing facility COVID-19 testing and visitation, the Division of Licensing & Certification (DLC) is issuing this clarification guidance regarding Nursing Home- Long Term Care (LTC) and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) expectations for reopening, consistent with the Centers for Medicare & Medicaid Services (CMS) memorandum QSO-20-39-NH.

The new guidance issued in CMS memo QSO-20-39-NH (attached for your reference) supersedes previous CMS requirements for visitation, which were based on a “phased” reopening approach. The memo establishes “Core Principles of Covid-19 Infection Prevention,” and provides guidelines for indoor visitation. This means that LTC and ICF/IID facilities no longer need to identify a CMS Nursing Home phase of reopening in order to provide limited visitation and non-essential healthcare staff services such as beautician services within their facilities. Consequently, facilities are no longer required to publicly post their reopening phases.

All LTC and ICF/IID facilities in Maine will comply with the attached CMS QSO-20-39-NH memo, except in regard to the QSO’s positivity rate metrics, which Maine DHHS is replacing with new case rate metrics. In Maine, the county risk level (low, moderate, or high) will be based on 28-day average County Transmission rates (new cases/10,000 resident population in the county), which will be updated every 14 days and reported on the Maine CDC’s website. Facilities should check the update for new case rates every two weeks, beginning October 8, 2020. The risk level of a county will be based on the transmission rates in Table 1.

**Table 1. County Transmission Rate Thresholds**

<b>County New Case Rate in the Last 28 Days (Updated Every 14 Days)</b>	
<b>Low</b>	Less than 8/10,000
<b>Moderate</b>	8/10,000 to less than 16/10,000
<b>High</b>	16/10,000 or higher

The 28-day county transmission rate can be obtained at the Maine CDC website here: <https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus/data.shtml>  
 Scroll to the bottom of the page, where you will see a list of additional data tables. Choose “View Tables of Data for the Previous 14 and 28 Days”

Click on “Download Data for the Previous 14 and 28 Days (PDF)”  
 Use the 28-day table to locate your county’s “Rate per 10,000”

**Facility Testing Plan**

All nursing facilities and ICF/IID are required to have a facility testing plan consistent with CMS QSO-20-30-NH and CMS QSO-20-38-NH. This requirement has not changed, except that the frequency of testing will now be based on the 28-day average of new cases in the county instead of positivity rate. Table 2 specifies the required frequency.

**Table 2. Frequency of Surveillance Testing for Each County Risk Level**

County New Case Rate in the Last 28 Days (Updated Every 14 Days)		Testing Frequency
<b>Low</b>	Less than 8/10,000	Monthly
<b>Moderate</b>	8/10,000 to less than 16/10,000	Monthly
<b>High</b>	16/10,000 or higher	Twice Each Month

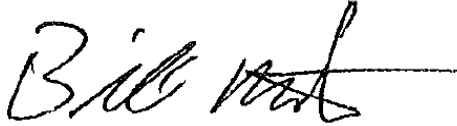
Please provide the DLC with a copy of your facility’s testing plan electronically after any revisions or updates have been made to those plans.

**Visitation and Other Community Engagement**

The degree to which a facility allows visitation and other types of community engagement is based on the conditions in the facility and conditions in the county. As with testing frequency, county conditions will now be based on the new case rate in Table 2. Enclosed with this memo is a matrix titled “Maine CDC Guidance for Community Engagement of Congregate Homes- Nursing and ICF/IID Facilities.”

The matrix indicates what level of community engagement your facility should have based on the conditions in your facility and in your county.  
Please feel free to contact our office if there are questions regarding this notice.

Sincerely,

A handwritten signature in black ink that reads "Bill Montejo". The signature is written in a cursive style with a long horizontal line extending to the right from the end of the name.

Bill Montejo, RN  
Director, Division of Licensing & Certification