



State of California—Health and Human
Services Agency
**California Department of
Public Health**



GAVIN NEWSOM
Governor

May 11, 2023

AFL 20-43.4

TO: Skilled Nursing Facilities (SNFs)

SUBJECT: SNF Coronavirus Disease 2019 (COVID-19) Daily Reporting
(This AFL supersedes AFL 20-43.3 and AFL 20-60)

AUTHORITY: Title 42 Code of Federal Regulations (CFR) section 483.80
Proclamation of Emergency (PDF)

All Facilities Letter (AFL) Summary

- This AFL announces that effective May 12, 2023, CDPH's online COVID-19 SNF Survey is discontinued.
- SNFs must continue to submit weekly COVID-19 data to the Department of Health and Human Services (DHHS) via the Centers for Disease Control and Prevention's (CDC's) National Health Safety Network (NHSN) system until December 31, 2024, unless DHSS specifies an earlier date.

Background

On May 8, 2020, the Centers for Medicare and Medicaid Services (CMS) published an interim final rule requiring SNFs to report COVID-19 facility data to the CDC and to notify residents, residents' representatives, and families of residents of when there are COVID-19 positive residents or healthcare workers in the facility. The report must include, but is not limited to, the following:

- Suspected and confirmed COVID-19 infections among residents and staff, including residents previously treated for COVID-19
- Total deaths and COVID-19 deaths among residents and staff
- Personal protective equipment (PPE) and hand hygiene supplies in the facility
- Ventilator capacity and supplies in the facility
- Resident beds and census
- Access to COVID-19 testing while the resident is in the facility
- Staff shortages
- Other information specified by the Secretary

On February 9, 2023, DHHS announced that the federal COVID-19 Public Health Emergency (PHE) will end on May 11, 2023. In addition, CMS issued QSO-23-13-ALL to provide guidance for the expiration of the federal COVID-19 PHE. SNFs must report COVID-19 data to NHSN as specified in Title 42 CFR section 483.80(g) until December 31, 2024;

however, the reporting requirement specified in Title 42 CFR section 483.80(g)(1)(viii) regarding COVID-19 vaccine status of residents and staff will continue indefinitely to support national efforts to control the spread of COVID-19.

COVID-19 Reporting

This AFL announces that effective May 12, 2023, SNFs are no longer required to report COVID-19 data daily to CDPH via the COVID-19 SNF Survey; however, in accordance with Title 42 CFR section 483.80(g), SNFs must report COVID-19 data directly to the CDC's NHSN system until December 31, 2024, unless DHSS specifies an earlier date. SNFs must continue to report COVID-19 vaccine status of residents and staff, specified in Title 42 CFR section 483.80(g)(1)(viii), to NHSN indefinitely, unless additional regulatory action is taken.

Additionally, the weekly CDPH COVID-19 surveillance/response-driven testing data reporting specified in AFL 20-60 will no longer be required effective May 12, 2023. SNFs do not need to report COVID-19 surveillance/response-driven testing data to NHSN, unless requested. Facilities may refer to CMS COVID-19 NHSN Reporting Requirements for Nursing Homes (PDF) for the required COVID-19 reporting data fields.

Enrolling in NHSN

The instructions below provide an overview of how to enroll in NHSN. For full details on how to enroll, please refer to the NHSN Long-Term Care Facility COVID-19 Module and Enrollment in Long-term Care Facility COVID-19 Module (PDF).

1. Prepare for NHSN Enrollment

1. Review applicable training materials.
2. Prepare your computer to interact with NHSN (e.g. change spam-blocker settings to allow emails from nhsn@cdc.gov and SAMS-NO-REPLY@cdc.gov).

2. Register the Facility with NHSN

1. Review and accept the NHSN Rules of Behavior (after selecting Agree, you will be guided to the NHSN Registration page).
2. Complete the NHSN Registration Form.

3. Register with the Security Access Management System (SAMS)

1. Open the "Invitation to Register with SAMS" email; open the link provided in the email to begin the SAMS registration.
2. Accept the SAMS Rules of Behavior.
3. Complete SAMS Registration page.

4. Complete NHSN Enrollment

1. Login to the SAMS website using the username and password created in the SAMS Registration page.
2. Complete the NHSN LTC Enrollment.

5. Accept the NHSN Agreement to Participate and Consent

1. After receiving an email from NHSN, login to the SAMS website.
2. Review and accept the NHSN Agreement to Participate and Consent.

Notification to Residents, Residents' Representatives, and Families of Residents

It is vitally important for facilities to notify residents, resident representatives, and family members when there are COVID-19 positive residents or healthcare workers in the facility to keep them informed of the conditions at the facility and to comply with new federal requirements. Pursuant to Title 42 CFR section 483.80(g)(3), facilities must inform residents, their representatives, and families of those residing in facilities by 5 P.M. the next calendar day following the occurrence of either:

- A single confirmed infection of COVID-19, or
- Three or more residents or staff with new-onset of respiratory symptoms occurring within 72 hours of each other

This notification will provide an opportunity to inform families of the safety measures your facility is taking to protect their loved ones. Constant communication and transparent information are useful tools for all facilities to use with their healthcare worker staff, residents, and community.

NOTE: Although the requirement referenced above is set to expire December 31, 2024, CMS is exercising enforcement discretion and will not expect providers to meet the requirements at Title 42 CFR 483.80(g)(3) at this time.

Failure to Report

Failure to report resident or staff incidences of communicable disease or infection, including confirmed COVID-19 cases (or Persons Under Investigation for COVID-19), as required, may result in a federal and/or separate state enforcement action.

Facilities that fail to report specified COVID-19 data elements will receive a warning letter reminding them to report the required information to CDC. CMS will impose a per day (PD) CMP of \$1,000 for one day for the failure to report that week. For each subsequent week that the facility fails to submit the required report, the noncompliance will result in an additional one-day PD CMP imposed at an amount increased by \$500. Facilities that fail to comply with the daily SNF reporting requirement may also be subject to a B citation.

For the purposes of this AFL the following definitions apply:

- "COVID suspect" means, persons with symptoms of COVID-19 or persons who are asymptomatic that have been exposed to a lab-confirmed case of COVID-19.
- "COVID laboratory positive means, an individual who has at least one respiratory specimen that tested positive for the virus that causes COVID-19 by a CDC laboratory, state or local public health laboratory, or commercial laboratory using Food and Drug Administration (FDA)-validated COVID-19 nucleic acid amplification (NAA) test.

If you have any questions about this AFL, please contact COVID-19SNFSURVEY@cdph.ca.gov.

Sincerely,

Original signed by Cassie Dunham

Cassie Dunham

Deputy Director

Resources:

- CDPH COVID-19 Dashboard
- NHSN Long-Term Care Facility COVID-19 Module
- Enrollment in Long-term Care Facility COVID-19 Module (PDF)
- Interim Final Rule 2020-09608
- CMS QSO-20-29 (PDF)
- CMS QSO-23-13-ALL (PDF)
- CMS COVID-19 NHSN Reporting Requirements for Nursing Homes (PDF)



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