



OKLAHOMA

State Department of Health

Important Updates from OSDH

April 23, 2020

Recording of Long-Term Care Conference Call: Wednesday, April 22nd

The Long-Term Care Survey Division, Mike Cook, Service Director, along with James Joslin, Assistant Deputy Commissioner, provided the weekly LTC COVID-19 Provider Conference Call on Wednesday, April 22, 2020. [Click here to download the recording of the call.](#) The download will be in a zipped file, and will need to be extracted.

Tune in each Wednesday at 1:00 to receive the most current guidance related to the prevention and management of the coronavirus.

FAQs: Nursing Home Reimbursement

Q: Is there a provision or waiver that addresses extensions for therapeutic leave maximums (also called “bed hold”) for ICF/IID or nursing homes?

A: Medicaid rules for therapeutic leave ([OAC 317:30-5-126](#)) allow for ICF/IID facilities to receive payments for therapeutic leave up to 60 days per year, (30 days if the resident was admitted on or after July 1 for the remaining calendar year) or 14 **consecutive** days.

Nursing homes may receive payment for up to 7 days of therapeutic leave per calendar year per resident.

Please be aware, the rule at ([OAC 317:30-5-126](#)) includes conditions/criteria that must be met to qualify as therapeutic leave.

Hospital stays are not considered therapeutic leave.

The Oklahoma Health Care Authority is currently seeking waivers through state plan amendments (SPA) that would extend maximums for paid therapeutic leave. Language for SPA is being drafted now and will be available at a future date.

For further information and a complete list of the Nursing Home Reimbursement FAQs, visit the [LTC COVID-19 Resource Website](#).

Hospital Discharge to Long-Term Care

The Oklahoma State Department of Health (OSDH) has provided key guidance on testing and discharging residents from the hospital to a long-term care facility.

Residents with no history of COVID-19 being discharged from the hospital to LTC will receive one COVID-19 test, with results returned within 48 hours *prior* to discharge. Such tests are eligible for priority processing through the Public Health Lab using the following forms available at:

[Prevention and Preparedness Public Health Forms](#)

- [Laboratory Requisition](#)
- [Case/Patient Screening Form for COVID-19 Testing](#)

Identify if the resident is COVID+ at the time of the hospital discharge

- If **Negative**, the resident will be discharged according to plan, where facility-specific isolation protocols will be initiated and a 2nd test will be administered in accordance with CDC guidelines.
- If **Positive**, the resident will be discharged to one of the following LTC facilities (in priority order):
 - Originating LTC facility (if facility has COVID + residents and is engaging in cohorting protocols)
 - Local LTC facility with cohorting of COVID + residents
 - COVID + transitional care facility (Enid/Tulsa/OKC)

** The resident will be treated in accordance with CDC guidelines for COVID + individuals **

For complete guidance refer to the [Hospital Discharge to LTC Guidance document](#) and you may also find it on the [LTC COVID-19 Resource website](#).

Return to Work Criteria for HCP with Confirmed or Suspected COVID-19

CDC updated the Return to Work Guidance on April 13, 2020 and a summary of the guidance includes:

- Test-based strategy is the preferred method for determining when HCP may return to work in healthcare setting.
- Exclude from work until
 - Resolution of fever without the use of fever-reducing medications and
 - Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
 - Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart (total of two negative specimens)
- If the Test-based strategy *cannot* be used, the Non-test-based strategy may be used for determining when HCP may return to work in healthcare settings:
- Non-test-based strategy. Exclude from work until:
 - At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
 - At least 7 days have passed *since symptoms first appeared*

Current guidance is everyone should wear a mask while in the facility.

Complete return to work guidance may be found on the [LTC COVID-19 Resource website](#).

Do you have MDS or OASIS questions?
Contact the QIES Help Desk at (405) 271-5278
MDShelp@health.ok.gov or OASIShelp@health.ok.gov

Your Oklahoma QIES Help Desk team -

Diane Henry, State RAI Coordinator
Wanda Roberts, State Automation Coordinator
Holly Murphy, RN Consultant

Danita Leyndyke, Administrative Assistant



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