



## Long-Term Care Regulatory Provider Letter

<b>Number:</b> PL 20-37 (Revised)
<b>Title:</b> Reporting Guidance for Long-term Care Providers
<b>Provider Types:</b> Assisted Living Facility (ALF); Intermediate Care Facility for Individuals with an Intellectual Disability or Related Conditions (ICF/IID); Nursing Facility (NF)
<b>Date Issued:</b> November 19, 2020

### 1.0 Subject and Purpose

This letter outlines provider reporting responsibilities related to COVID-19 positive cases and deaths (COVID-19 and non-COVID-19 related). This letter and attachment also consolidate reporting requirements in a more user-friendly manner. This letter has been revised to include information for ALF and ICF providers offering point-of-care testing for COVID-19 and to clarify reporting requirements for NF providers.

### 2.0 Policy Details & Provider Responsibilities

All provider types must report all COVID-19 positive cases and deaths. The following sections divide responsibilities by provider type.

#### 2.1 NF Related Conditions COVID-19 Reporting Responsibilities

All NFs shall:

- Report the first confirmed case of COVID-19 in staff or residents, as well as the first confirmed case of COVID-19 after a facility has been without new cases for 14 days or more, to HHSC Complaint and Incident Intake (CII) through the Texas Unified Licensure Information Portal (TULIP) or by calling 1-800-458-9858 within 24 hours of the confirmed positive result.<sup>1</sup>

<sup>1</sup> 40 TAC §[19.2802\(I\)](#)

- Form 3613-A Provider Investigation Report must also be completed and submitted within five days from the day a confirmed case is reported to CII. The provider investigation report can be submitted:
  - via TULIP
  - by email at [ciiprovider@hhsc.state.tx.us](mailto:ciiprovider@hhsc.state.tx.us); or
  - by fax at 877-438-5827
- Report all confirmed COVID-19 cases immediately to the [health authority](#) with jurisdiction over the facility. If there is no local health authority, report directly to the Texas Department of State Health Services (DSHS)<sup>2</sup>.
- On a weekly basis, report all suspected and confirmed COVID-19 cases (including residents, staff, and previously treated cases) to the Centers for Disease Control and Prevention (CDC) via the National Healthcare Safety Network (NHSN). Reporting details must include<sup>3</sup>:
  - total COVID- 19 deaths;
  - personal protective equipment (PPE) and hand hygiene supplies;
  - ventilator capacity and supplies in the facility;
  - number of resident beds and census;
  - COVID-19 testing count for residents; and
  - any staffing shortages
- Report all single, confirmed COVID-19 cases or three or more residents/staff with new-onset respiratory symptoms that occur within 72 hours of each other to residents, their representative and families<sup>4</sup>. This information must be reported:
  - by 5p.m. on the next calendar day; and
  - updated weekly or sooner when there are new COVID- 19 cases for three or more residents/staff with new- onset respiratory symptoms.
- Report all deaths (COVID-19 and non-COVID-19), including those that occur within 24 hours after transferring a resident to a hospital from the NF, to HHSC via TULIP within 10 working

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<sup>2</sup> 40 TAC §[19.1601\(d\)\(2\)](#) and [Title 25, Chapter 97, Subchapter A \(relating to Control of Communicable Diseases\)](#).

<sup>3</sup> 42 CFR [§483.80\(g\)\(1\)-\(2\)](#)

<sup>4</sup> 42 CFR [§483.80\(g\)\(3\)](#)

days after the last day of the month in which the death occurred<sup>5</sup>.

- All deaths under unusual circumstances must be reported to CII within 24 hours. See [PL 19-17](#).
- If the death might have resulted from abuse, neglect, or exploitation, additional reporting requirements might apply<sup>6</sup>.
- NFs offering point-of-care testing related to COVID-19 must report data for all testing completed, for each individual tested. Reporting is to be made within 24 hours of results being known or determined, on a daily basis<sup>7</sup>.
  - CMS [now requires](#) that all NFs submit antigen test result data to NHSN within 24 hours of conducting an antigen test. DSHS receives test result data from NHSN, which means that NFs fulfill the state requirement to report test result data to DSHS by reporting test result data to NHSN.
  - NFs still must adhere to the state requirement to report test result data to their local health department. Therefore, NFs must report test result data to NHSN and their local health department.
- To submit antigen test result data to NHSN, NF employees responsible for reporting must complete the Secure Access Management Services (SAMS) identity verification process to be migrated to a level-3 SAMS access in NHSN. The identity verification process is outlined below and detailed on [this webpage](#). Each employee that submits testing data must complete the process to be migrated to a level-3 SAMS access.
  - In October, the CDC sent emails to many NF employees enrolled in the NHSN COVID-19 module with instructions to upgrade to a level-3 SAMS access. Check your email inbox for communication from SAMS, via [sams-no-reply@cdc.gov](mailto:sams-no-reply@cdc.gov), requesting two forms of identification (ID). If you are unable to locate the email, contact [NHSN@cdc.gov](mailto:NHSN@cdc.gov) and include in the subject line, "Enhancing Data Security."

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<sup>5</sup> [PL 20-08](#), THSC [§260A.016](#), 40 TAC [§19.606](#) and [§19.1010](#)

<sup>6</sup> [PL 19-17](#), [PL 20-08](#), THSC [§260A.016](#), 40 TAC [§19.606](#) and 40 TAC [§19.1010](#)

<sup>7</sup> [Executive Order GA-10](#), [QSO-20-37-CLIA](#), NH

- Locate identification documents included on the list of [SAMS identity verification documents](#).
- Log into SAMS at <http://sams.cdc.gov> and use the Update Profile menu option on the left side of the page. Confirm that your home mailing address is correct and current within your SAMS profile.
- Ensure that your name and address match how it appears on the documents you plan to submit to SAMS.
- Submit the identification forms as directed in the email received from SAMS.
- Once confirmed, SAMS will send you a "Welcome to SAMS" email. A SAMS grid card will be mailed to your residential/home address by USPS mail. The SAMS grid card permits Level-3 access to NHSN.
- After receiving your SAMS grid card, be sure to log into SAMS at <http://sams.cdc.gov>. Underneath the National Healthcare Safety Network System header, please select the "NHSN Reporting" link. DO NOT access the "NHSN LTC Reporting" option, as this option will direct you to level one security.
  - If you experience problems during enrollment, please contact the NHSN user support [nhsn@cdc.gov](mailto:nhsn@cdc.gov) with "Enhancing Data Security" in the subject line.
  - Once enrolled in level-3 SAMS access, NFs can contact [nhsn@cdc.gov](mailto:nhsn@cdc.gov) for assistance with submitting test result data. TMF Health Quality Institute also provides assistance with NHSN reporting, which can be reached by contacting [nhnetwork@tmf.org](mailto:nhnetwork@tmf.org).
- The following steps outline what is needed to begin reporting in order to report to the local health department.
  - Locate your local health department or DSHS Region <https://www.dshs.texas.gov/regions/2019-nCoV-Local-Health-Entities/>
  - The LHD or DSHS region will provide the input forms and process for you. The required data elements are submitted to your Local Health Department or DSHS Region using the forms and process they provided.

- The required data is submitted to the LHD or DSHS Region for the area in which the facility is located, using the forms and processes indicated<sup>8</sup>.

## **2.2 ALF Related Conditions COVID-19 Reporting Responsibilities**

All ALFs shall:

- Report the first confirmed case of COVID-19 in staff or residents, as well as the first confirmed case of COVID-19 after a facility has been without new cases for 14 days or more, to CII through TULIP or by calling 1-800-458-9858 within 24 hours of the confirmed positive result<sup>9</sup>.
  - Form 3613-A Provider Investigation Report must also be completed and submitted within five days from the day a confirmed case is reported to CII. The provider investigation report can be submitted:
    - via TULIP
    - by email at [ciiprovider@hhsc.state.tx.us](mailto:ciiprovider@hhsc.state.tx.us); or
    - by fax at 877-438-5827
- Report all confirmed COVID-19 cases immediately to the health authority with jurisdiction over the facility. If there is no local health authority, report to DSHS directly<sup>10</sup>.
- ALFs offering point-of-care testing related to COVID-19 must report data for all testing completed, for each individual tested. Reporting is to be made within 24 hours of results being known or determined, on a daily basis. The following steps outline what is needed to begin reporting in order to meet state and federal requirements.

Once you have CLIA or a CLIA waiver:

- Register here:  
<https://www.dshs.state.tx.us/coronavirus/forms/registerlab.aspx>
- Submit the online registration webform.

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<sup>8</sup> [QSO-20-37-CLIA, NH, QSO-20-38-NH](#), and [FAQs: Laboratory Data Reporting for COVID-19 Testing](#) for required data elements.

<sup>9</sup> 40 TAC [§553.2001\(m\)](#)

<sup>10</sup> 26 TAC [§553.44\(o\)](#)

- Complete DSHS onboarding process.
  - Submit required testing data to DSHS.
- AND
- Locate your local health department or DSHS Region  
<https://www.dshs.texas.gov/regions/2019-nCoV-Local-Health-Entities/>
  - The LHD or DSHS region will provide the input forms and process for you. The required data elements are submitted to your Local Health Department or DSHS Region using the forms and process they provided.
  - The required data is submitted to the LHD or DSHS Region for the area in which the facility is located, using the forms and processes indicated<sup>11</sup>.
- Report all resident deaths, serious injury of a resident, or any threat to a resident's health or safety resulting from a disaster or emergency to CII via TULIP or 1-800-458-9858 within 24 hours and complete form 3613-A provider investigation report within 5 days<sup>12</sup>.
  - If the death might have resulted from abuse, neglect, or exploitation, additional reporting requirements might apply<sup>13</sup>.

### **2.3 ICF Related Conditions COVID-19 Reporting Responsibilities**

All ICFs shall:

- Report the first confirmed case of COVID-19 in staff or residents, as well as the first confirmed case of COVID-19 after a facility has been without new cases for 14 days or more, to CII through TULIP or by calling 1-800-458-9858 within 24 hours of the confirmed positive result<sup>14</sup>.
  - Form 3613-A Provider Investigation Report must also be completed and submitted within five days from the day a confirmed case is reported to CII. The provider investigation report can be submitted:
    - via TULIP

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<sup>11</sup> See Footnote 5

<sup>12</sup> 26 TAC [§553.44\(o\)](#)

<sup>13</sup> [PL 19-23](#)

<sup>14</sup> 26 TAC [§551.46\(m\)](#)

- by email at [ciiprovider@hhsc.state.tx.us](mailto:ciiprovider@hhsc.state.tx.us); or
- by fax at 877-438-5827
- Report all confirmed COVID-19 cases immediately to the health authority with jurisdiction over the facility. If there is no local health authority, report to DSHS directly<sup>15</sup>.
- Report all significant incidents or changes in the client's condition to the client's parents or guardians (including but not limited to serious illness), no later than 24 hours after the incident<sup>16</sup>.
- ICFs offering point-of-care testing related to COVID-19 must report data for all testing completed, for each individual tested. Reporting is to be made within 24 hours of results being known or determined, on a daily basis. The following steps outline what is needed to begin reporting in order to meet state and federal requirements.

Once you have CLIA or a CLIA waiver:

- Register here:  
<https://www.dshs.state.tx.us/coronavirus/forms/registerlab.aspx>
- Submit the online registration webform.
- Complete DSHS onboarding process.
- Submit required testing data to DSHS.  
AND
- Locate your local health department or DSHS Region  
<https://www.dshs.texas.gov/regions/2019-nCoV-Local-Health-Entities/>
- The LHD or DSHS region will provide the input forms and process for you. The required data elements are submitted to your Local Health Department or DSHS Region using the forms and process they provided.
- The required data is submitted to the LHD or DSHS Region for the area in which the facility is located, using the forms and processes indicated<sup>17</sup>.
- Report all deaths (COVID-19 and non-COVID-19) that occur in an ICF/IID within one hour to CII. See:

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<sup>15</sup> 42 CFR §[483.460\(c\)\(5\)\(ii\)](#)

<sup>16</sup> 42 CFR §[483.420\(c\)\(6\)](#)

<sup>17</sup> See Footnote 5

- [PL 17-02](#) (licensed facilities)
- [PL 17-03](#) (non-licensed facilities).
- If the death might have resulted from abuse, neglect, or exploitation, additional reporting requirements might apply<sup>18</sup>

### **3.0 Background/History**

Previously, the reporting requirements for COVID-19 and deaths for ALFs, NFs, and ICF/IIDs were located in several different locations. This letter consolidates reporting requirements into one place.

### **4.0 Resources**

See attachment.

### **5.0 Contact Information**

If you have any questions about this letter, please contact the Policy, Rules and Training Section by email at [PolicyRulesTraining@hsc.state.tx.us](mailto:PolicyRulesTraining@hsc.state.tx.us) or call (512) 438-3161.

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<sup>18</sup> [PL 20-08](#), THSC §[260A.016](#), [PL 17-02](#), [PL 17-03](#)





Attachment

**Nursing Facility COVID-19 Reporting Responsibilities**

Report What	Report to Who	By When	As Required By
<p>Report the first confirmed case of COVID-19 in staff or residents, and the first confirmed case of COVID-19 after a facility has been without new cases for 14 days or more.</p> <p>Submit a Form 3613-A Provider Investigation Report.</p> <p>Do not send subsequent cases or addendums (first cases only and those after 14 days or more after new case).</p>	<p>HHSC Complaint &amp; Incident Intake (CII) via TULIP or 1-800-458-9858</p>	<p>24 hours for initial report; 5 days for facility investigation report.</p>	<p>40 TAC §<a href="#">19.2802(l)</a></p>
<p>Confirmed COVID-19 cases</p>	<p>The <a href="#">health authority</a> with jurisdiction over their facility .</p>	<p><a href="#">Immediately</a></p>	<p>40 TAC §<a href="#">19.1601(d)(2)</a> and <a href="#">Title 25,</a></p>

	<p>In instances where there is no local <a href="#">health authority</a>, report to DSHS directly.</p>		<p><a href="#">Chapter 97, Subchapter A (relating to Control of Communicable Diseases)</a>.</p>
<ul style="list-style-type: none"> <li>• Suspected and confirmed COVID-19 cases among residents and staff, including residents previously treated for COVID-19;</li> <li>• Total deaths including COVID-19 deaths among residents and staff;</li> <li>• Personal protective equipment and hand hygiene supplies in the facility;</li> <li>• Ventilator capacity and supplies in the facility;</li> <li>• Resident beds and census;</li> <li>• Access to COVID-19 testing while the resident is in the facility; and</li> </ul>	<p>The Centers for Disease Control and Prevention via the National Healthcare Safety Network system.</p>	<p>Weekly</p>	<p>42 CFR <a href="#">§483.80(g)(1)-(2)</a></p>

<ul style="list-style-type: none"> <li>Staffing shortages.</li> </ul>			
<p>Either a single confirmed COVID-19 case, or three or more residents or staff with new-onset of respiratory symptoms occurring within 72 hours of each other.</p>	<p>Residents, their representatives, and families.</p>	<p>By 5 p.m. the next calendar day; then update weekly or sooner when there are new COVID-19 cases, or three or more residents or staff with new-onset of respiratory symptoms</p>	<p>42 CFR <a href="#">§483.80(g)(3)</a></p>
<p>Nursing facilities offering point-of-care testing related to COVID-19 must report data for all testing completed, for each individual tested.</p>	<p>The following steps are required to begin reporting: Once you have CLIA or a CLIA waiver:</p> <ol style="list-style-type: none"> <li>Register for NHSN <a href="#">here</a> and complete the following steps: Step 1: Training and Preparation Step 2: Register Step 3a: Register with SAMS (facilities reporting test data through NHSN must upgrade to Level 3 SAMS access) Step 3b: Complete and Submit Identity Proofing Verification Step 4: Submit NHSN Forms Electronically Step 5: Submit Consent</li> </ol>	<p>Within 24 hours of results being known or determined, on a daily basis.</p>	<p><a href="#">QSO-20-37-CLIA, NH</a> <a href="#">QSO-20-38-NH</a></p>

	<p>AND</p> <ol style="list-style-type: none"> <li>1. Locate your local health department or DSHS Region <a href="https://dshs.texas.gov/regions/2019-nCoV-Local-Health-Entities/">https://dshs.texas.gov/regions/2019-nCoV- Local-Health-Entities/</a></li> <li>2. The LHD or DSHS region will provide the input forms and process. The required data elements are submitted to your Local Health Department or DSHS Region using the forms and process they provided.</li> <li>3. The required data is submitted to the LHD or DSHS Region for the area in which the facility is located, using the forms and processes indicated.</li> </ol>		
<p>All deaths (COVID-19 and non-COVID-19) that occur in a NF and those that occur within 24 hours after transferring a resident to a hospital from the NF.</p>	<p>HHSC via TULIP</p>	<p>Ten working days after the last day of the month in which the death occurred.</p>	<p><a href="#">PL 20-08</a>, THSC <a href="#">§260A.016</a>, <a href="#">§19.606</a> and <a href="#">§19.1010</a></p>

**Assisted Living Facility COVID-19 Reporting Responsibilities**

Report What	Report to Who	By When	As Required By
<p>Report the first confirmed case of COVID-19 in staff or residents, and the first confirmed case of COVID-19 after a facility has been without new cases for 14 days or more.</p> <p>Submit a Form 3613-A Provider Investigation Report.</p> <p>Do not send subsequent cases or addendums (first cases only and those after 14 days or more after new case).</p>	<p>HHSC Complaint &amp; Incident Intake (CII) via TULIP or 1-800- 458-9858</p>	<p>24 hours for initial report; 5 days for facility investigation report.</p>	<p>40 TAC  <a href="#">§553.2001(m)</a></p>
<p>Confirmed COVID-19 cases</p>	<p>The <a href="#">health authority</a> with jurisdiction over their facility.                      In instances where there is no local <a href="#">health authority</a>, report to DSHS directly.</p>	<p><a href="#">Immediately</a></p>	<p>26 TAC  <a href="#">§553.41(n)(3)</a> and  <a href="#">Title 25, Chapter 97, Subchapter A (relating to Control of Communicable Diseases).</a></p>

<p>Assisted living facilities offering point-of-care testing related to COVID-19 must report data for all testing completed, for each individual tested.</p>	<p>The following steps are required to begin reporting: Once you have CLIA or a CLIA waiver:</p> <ol style="list-style-type: none"> <li>1. Register here: <a href="https://www.dshs.texas.gov/coronavirus/lab-reporting.aspx">https://www.dshs.texas.gov/coronavirus/lab-reporting.aspx</a></li> <li>2. Submit the online registration webform.</li> <li>3. Complete DSHS onboarding process.</li> <li>4. Submit required testing data to DSHS. AND</li> </ol> <ol style="list-style-type: none"> <li>1. Locate your local health department or DSHS Region <a href="https://dshs.texas.gov/regions/2019-nCoV-Local-Health-Entities/">https://dshs.texas.gov/regions/2019-nCoV-Local-Health-Entities/</a></li> <li>2. The LHD or DSHS region will provide the input forms and process for you. The required data elements are submitted to your Local Health Department or DSHS Region using the forms and process they provided.</li> <li>3. The required data is submitted to the LHD or DSHS Region for the area in which the facility is located, using the forms and processes indicated.</li> </ol>	<p>Within 24 hours of results being known or determined, on a daily basis.</p>	<p><a href="#">QSO-20-37-CLIA, NH</a>  <a href="#">QSO-20-38-NH</a></p>
<p>A death (COVID-19 and non-COVID-19), serious injury of a resident, or threat to resident health and safety resulting from a disaster or emergency</p>	<p>CII via TULIP or 1-800-458-9858</p>	<p>Within 24 hours and complete form 3613- A provider investigation report within 5 days.</p>	<p>26 TAC <a href="#">§553.44(o)</a></p>

**Intermediate Care Facility for People with an Intellectual Disability or Related Conditions COVID-19 Reporting Responsibilities**

Report What	Report to Who	By When	As Required By
<p>Report the first confirmed case of COVID-19 in staff or individuals, and the first confirmed case of COVID-19 after a facility has been without new cases for 14 days or more.</p> <p>Submit a Form 3613-A Provider Investigation Report.</p> <p>Do not send subsequent cases or addendums (first cases only and those after 14 days or more after new case).</p>	<p>HHSC Complaint &amp; Incident Intake (CII) via TULIP or 1-800- 458-9858</p>	<p>24 hours for initial report; 5 days for facility investigation report.</p>	<p>26 TAC <a href="#">§551.46(m)</a></p>

<p>Confirmed COVID-19 cases</p>	<p>The <a href="#">health authority</a> with jurisdiction over their facility.</p> <p>In instances where there is no local <a href="#">health authority</a>, report to DSHS directly.</p>	<p><a href="#">Immediately</a></p>	<p><a href="#">42 CFR §483.460(c)(5)(ii)</a></p> <p>Texas Health &amp; Safety Code, Chapter 81; 26 TAC 551.42(e)(8); and 42 CFR</p>
			<p><a href="#">§483.460(c)(5)(ii)</a> (directing ICFs to follow CDC guidelines and state laws).</p> <p>Guidance is also provided in the ICF COVID-19 FAQs, a Gov Delivery, ICF Response Plan, and weekly webinars.</p>



<p>Intermediate care facilities offering point-of-care testing related to COVID-19 must report data for all testing completed, for each individual tested.</p>	<p>The following steps are required to begin reporting:                  Once you have CLIA or a CLIA waiver                  1. Register here:  <a href="https://www.dshs.texas.gov/coronavirus/lab-reporting.aspx">https://www.dshs.texas.gov/coronavirus/lab-reporting.aspx</a>                  2. Submit the online registration webform.                  3. Complete DSHS onboarding process.                  4. Submit required testing data to DSHS.                  AND                   1. Locate your local health department or DSHS Region  <a href="https://dshs.texas.gov/regions/2019-nCoV-Local-Health-Entities/">https://dshs.texas.gov/regions/2019-nCoV-Local-Health-Entities/</a>                  2. The LHD or DSHS region will provide the input forms and process for you. The required data elements are submitted to your Local Health Department or DSHS Region using the forms and process they provided.                  3. The required data is submitted to the LHD or DSHS Region for the area in which the facility is located, using the forms and processes indicated.</p>	<p>Within 24 hours of results being known or determined, on a daily basis.</p>	<p><a href="#">QSO-20-37-CLIA, NH</a>  <a href="#">QSO-20-38-NH</a></p>
<p>All deaths (COVID-19 and non-COVID-19) that occur in an ICF/IID.</p>	<p>HHSC Complaint &amp; Incident Intake at 1-800-458-9858</p>	<p>Within one hour</p>	<p><a href="#">PL 17-02</a> (licensed facilities)  <a href="#">PL 17-03</a> (non-licensed facilities).</p>