

Federal and State Specific COVID-19 Reporting Requirements

Federal/State	Effective Date	Notification Requirements	More Restrictive?
FEDERAL REQUIREMENTS	Effective Date: <ul style="list-style-type: none"> <li>• May 1, 2020</li> </ul>	<ul style="list-style-type: none"> <li>• Reporting to HHS                             <ul style="list-style-type: none"> <li>○ Pursuant to 42 CFR 483.80(g)(1), require facilities to electronically report information about COVID-19 to the <a href="#">Long Term Care Facility COVID-19 Module</a>. The report includes, but is not limited to, information on: 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 and hand hygiene supplies in the facility; ventilator capacity and supplies available in the facility; resident beds and census; access to COVID-19 testing while the resident is in the facility; staffing shortages; and other information specified by the Secretary. This information will be used to monitor trends in infection rates, and inform public health policies.</li> </ul> </li> <li>• Reporting to CDC:                             <ul style="list-style-type: none"> <li>○ Pursuant to 42 CFR 483.80(g)(2), facilities are required to provide the information specified above at a frequency specified by the Secretary, but no less than weekly to the Center for Disease Control and Prevention’s (CDC) National Healthcare Safety Network (NHSN) (OMB Control Number 0920-1290)</li> </ul> </li> <li>• Reporting to State or Local Health Departments                             <ul style="list-style-type: none"> <li>○ Pursuant to 42 CFR 483.80 and CDC guidance, nursing homes must notify state or local health departments about residents or staff with suspected or confirmed COVID-19, residents with severe respiratory infection resulting in hospitalization or death, or three or more residents or staff with new-onset respiratory symptoms within 72 hours of each other.</li> </ul> </li> <li>• Reporting to Residents and Resident representatives, facilities must:                             <ul style="list-style-type: none"> <li>○ Inform residents, their representatives and families by 5:00pm 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 that occur within 72 hours of each other.</li> <li>○ Provide cumulative updates to residents, their representatives, and families at least weekly by 5:00pm the next calendar day following the subsequent occurrence of either: each time a confirmed infection of COVID-19 is identified; or whenever three or more residents or staff with new onset of respiratory symptoms occur within 72 hours of each other.</li> <li>○ Include information on mitigating actions implemented to prevent or reduce the risk of transmission, including if normal operations in the nursing home will be altered such as restrictions or limitations to visitation or group activities.</li> <li>○ This information must be reported in accordance with existing privacy regulations and statute.</li> <li>○ For purposes of this reporting requirement, facilities are not expected to make individual telephone calls. Instead, facilities can utilize communication mechanisms that make this information easily available to all residents, their representatives, and families, such as paper notification, listservs, website postings, and/or recorded telephone messages.</li> </ul> </li> </ul>	

Alabama	Effective Date: May 1, 2020	No information at this time – accordingly, refer to and follow Federal Requirements	
Indiana	Effective Date: <ul style="list-style-type: none"> <li>May 4, 2020</li> </ul>	<ul style="list-style-type: none"> <li>Communication to Residents and their designated representatives <ul style="list-style-type: none"> <li>How the facility is handling issues with care and staff shortages</li> <li>General information about COVID-19</li> <li>The number of residents and staff who have tested positive and the number of “new” positive cases (those in the last 14 days)</li> <li>The number of residents who have died due to the virus</li> <li>Facility mitigation actions implemented to reduce the risk of COVID-19 transmission, including if normal operations of the facility have to be altered</li> <li>(This also must be communicated prior to any admission)</li> </ul> </li> <li>Communication Requirements <ul style="list-style-type: none"> <li>Designate a staff person in the unit or facility as the contact person for residents and their designated representatives – someone they can speak to about their concerns (provide a secondary number, OR, have a compliance or customer service hotline available)</li> <li>Effective May 4, facilities must send daily (at minimum Monday through Friday) group emails, automated voicemails, or automated electronic communications (text, email) to residents and their designated representatives, informing them of the total number (including residents and staff) of COVID-19 cases, number of new cases in the last 24 hours, and if there are three or more new cases of respiratory illness that have occurred in the last 72 hours in residents and/or staff within the facility. Facilities should also let residents and their designated representatives know what actions are being taken to prevent further spread of COVID-19 and how to reach a staff person if they have questions. If a resident does not have decision-making capacity it is permissible to inform only the designated patient representative. Patient representatives may opt out of receiving daily reports. Likewise, residents (if both resident and designated representative agree) may opt out of receiving daily reports.</li> <li>Complete the <a href="#">Facility Emergency Transfer Form</a> weekly with your facility’s COVID-19 information and email it to your local Ombudsman every Friday.</li> <li><a href="#">Local Ombudsman contact information</a> contact information should be provided to every resident and designated representative.</li> </ul> </li> </ul>	Additional information needs to be shared based on Indiana requirements compared to the Federal. See here: <a href="#">Indiana Long-term Care Facility Communication Guidelines</a>
Florida	Effective Date: <ul style="list-style-type: none"> <li>May 1, 2020</li> </ul>	Refer to and follow all Federal Requirements	
Georgia	Effective Date: <ul style="list-style-type: none"> <li>May 1, 2020</li> </ul>	Refer to and follow all Federal Requirements	
Kentucky	Effective Date: <ul style="list-style-type: none"> <li>May 1, 2020</li> </ul>	Refer to and follow all Federal Requirements	
Maryland	Effective Date: <ul style="list-style-type: none"> <li>April 24, 2020</li> </ul>	<ul style="list-style-type: none"> <li>Facility reporting to Health Department <ul style="list-style-type: none"> <li>In addition to all current reporting requirements to the state and local health departments, all facilities shall report the following information to the Chesapeake Regional Information System for Our Patients (CRISP) and any designated contact point within the local health department: <ul style="list-style-type: none"> <li>On a daily basis, each facility report should include at least the following: <ul style="list-style-type: none"> <li>The census of occupied beds;</li> </ul> </li> </ul> </li> </ul> </li> </ul>	Requires daily reports to CRISP and updates to residents and families within 12 hours

		<ul style="list-style-type: none"> <li>• Number of residents with positive COVID-19 test results;</li> <li>• Number of residents with suspected COVID-19;</li> <li>• Number of residents with negative COVID-19 test results;</li> <li>• Number of deaths, by COVID-19 status;</li> <li>• Number of staff with positive COVID-19 test results;</li> <li>• Number of residents with severe respiratory infection or COVID-19 resulting in hospitalization;</li> <li>• Number of staff with severe respiratory infection or COVID-19 resulting in hospitalization;</li> <li>• Number of residents or staff with new-onset respiratory symptoms that occur within 72 hours of another resident or staff developing respiratory symptoms; and</li> <li>• Any other information required</li> </ul> <ul style="list-style-type: none"> <li>• Facility reporting to residents, residents' representatives and staff <ul style="list-style-type: none"> <li>○ All facilities must provide informational updates on COVID-19 to residents, representatives and staff within 12 hours of the occurrence of a single confirmed infection of COVID-19, or when three or more residents or staff with new-onset respiratory symptoms that occur within 72 hours.</li> <li>○ Updates to residents, representatives, and staff must be provided weekly, or each subsequent time a confirmed infection of COVID-19 is identified and/or whenever three or more residents or staff with new-onset of respiratory symptoms occurs within 72 hours.</li> <li>○ Facilities shall include information on mitigating actions implemented to prevent or reduce the risk of transmission, including if normal operations in the nursing home will be altered.</li> </ul> </li> </ul>	
North Carolina	Effective Date: <ul style="list-style-type: none"> <li>• May 1, 2020</li> </ul>	Refer to and follow all Federal Requirements	
Ohio	Effective Date: <ul style="list-style-type: none"> <li>• April 15, 2020</li> </ul>	<ul style="list-style-type: none"> <li>• No later than 24 hours after the facility is notified of its first confirmed or probable case of COVID-19, all licensed facilities shall: <ul style="list-style-type: none"> <li>○ Notify the residents, sponsor or guardian, of positive or probable cases of COVID-19 within the facility. This applies to both residents and staff who test positive or have a probable diagnosis</li> <li>○ The notification shall include the steps the facility is taking to reduce the spread of the infection within the facility.</li> </ul> </li> <li>• If a facility already has staff or residents who are confirmed to have COVID-19 or a probable case, and the facility has not yet notified the residents, sponsors and/or guardians, it must do so within 24 hours and include steps the facility is taking to prevent the spread of the infection within the facility.</li> <li>• A copy of the notification materials (letter or call script) shall be sent to the Ohio Department of Health, Bureau of Survey and Certification, 246 North High Street Columbus, Ohio 43215</li> </ul>	In addition to federal requirements, must ALSO send copy of notification materials to the Department of Health
Tennessee	Effective Date: <ul style="list-style-type: none"> <li>• April 22, 2020</li> </ul>	<ul style="list-style-type: none"> <li>• Notification to local health department: <ul style="list-style-type: none"> <li>○ Facilities must IMMEDIATELY notify the local public health department of a suspected or confirmed COVID-19 cases in residents or staff</li> </ul> </li> <li>• Notification to residents and their representatives:</li> </ul>	REQUIRES IMMEDIATE notification to the local health department AND

		<ul style="list-style-type: none"> <li>○ Facilities must IMMEDIATELY notify residents and their representatives of suspected or confirmed COVID-19 cases inside the facility.</li> </ul>	residents and representatives. No definition of "immediately"
Virginia	<p>Effective Date:</p> <ul style="list-style-type: none"> <li>• May 1, 2020</li> </ul>	Refer to and follow all Federal Requirements	