

COVID-19 Testing Guidance

For Ohio Assisted Living Facilities and Nursing Homes

JULY 2022: This document was created to help provide Ohio long-term care facilities with updated information about COVID-19 testing. Given the ongoing nature of the pandemic, this document may be updated as strategies and processes evolve. This document is not intended to be inclusive of all information or resources. Additionally, this document does not supersede any current rules, laws, or regulations. Specific questions about the applicability and implementation of this information should be referred to clinical and legal staff.

According to the Centers for Disease Control and Prevention (CDC), due to the congregate nature and population served, long-term care settings are at high risk for the spread of COVID-19 among residents. Often, when a new-onset infection is identified, there are others in the facility who are also infected but who do not yet have symptoms. Experience has demonstrated that unrecognized asymptomatic and pre-symptomatic infections are likely contributors to transmission in congregate settings. Rapid action to identify, isolate, and test others who might be infected is critical to prevent COVID-19 spread.

This guidance applies to each residential care facility licensed by the Ohio Department of Health (ODH) and each nursing home licensed by ODH, or certified by the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services (CMS), or by the Ohio Department of Medicaid (ODM).

Testing Priorities

1. Staff and residents, regardless of vaccination status, with signs or symptoms should be tested immediately.

2. Staff and residents, regardless of vaccination status, should be tested when there is a newly identified COVID-19 positive staff or resident.

Facilities have two options for outbreak testing:

2A: If a facility can identify close contacts of the individual with COVID-19, they can conduct focused testing based on known close contacts.

2B: If a facility does not have the expertise, resources, or ability to identify all close contacts, they should test facility-wide or at a group level such as a unit, floor, or other specific area.

3. Staff, whose vaccination status is not up-to-date, should be tested routinely based on the extent of the virus in the community.

“Not up-to-date” refers to a person who has not received all CDC recommended COVID-19 vaccines, including those who may be waiting to receive their second dose, or boosters.

4. Staff, whose vaccination status is up-to-date, do not have to be routinely tested.

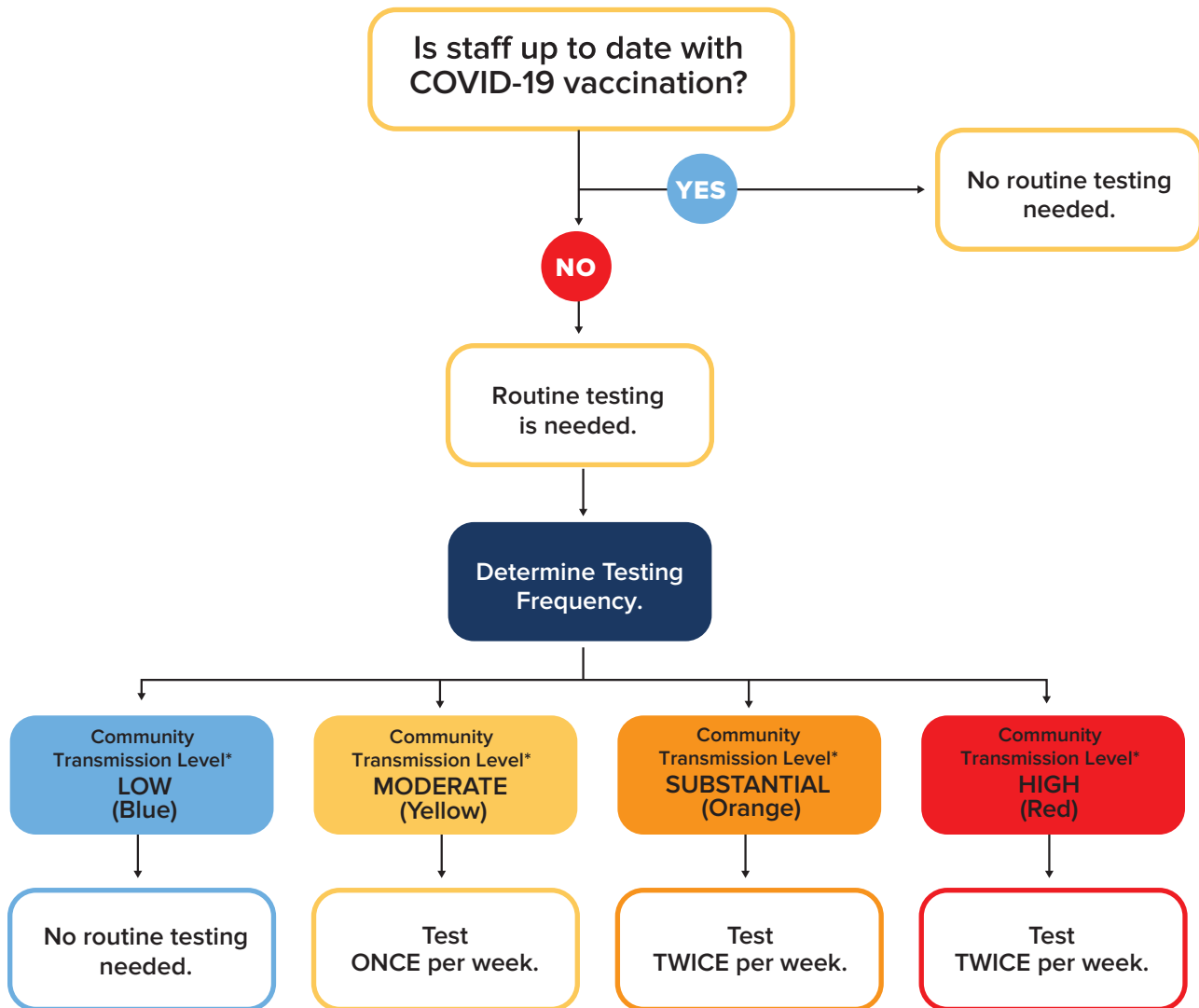
“Up-to-date” refers to a person who has received all CDC recommended COVID-19 vaccines, including any booster dose(s) when eligible.

Please note: the testing priorities above represent the minimum testing frequency.

Determining Routine Testing Frequency for Staff

CDC COVID-19 Community Transmission Levels

The CDC recommends use of COVID-19 Community Transmission Levels to assess level of COVID-19 spread within individual communities. These levels should be used to determine testing frequency in healthcare facilities, including long-term care facilities.



When applying the CDC COVID-19 community transmission levels for testing, facilities should monitor their level of community transmission every other week and adjust the frequency of performing staff testing (for example every first and third Tuesday).

If **community transmission increases** to a higher level of activity, the facility should begin testing staff at the higher frequency level.

If **community transmission decreases** to a lower level of activity, the facility should continue testing staff at the higher frequency level until community transmission has remained at the lower level of activity for at least two weeks before reducing testing frequency.

*How to determine a transmission level will be explained in the next section.

Locating COVID-19 Community Transmission Levels

Facilities can locate their COVID-19 community transmission level by visiting the CDC COVID Data Tracker or the Ohio Department of Aging (ODA) COVID-19 Care Center Portal.



CDC Data Tracker

(<https://covid.cdc.gov/covid-data-tracker/#county-view>)

Select: State and County

State or territory: Ohio | County or metro area: Licking County

Select: Community Transmission

Data Type: Community Transmission | Map Metric: Community Transmission

Identify: Transmission Level

Legend: High (Red), Substantial (Orange), Moderate (Yellow), Low (Blue), No Data (Grey)

| 7-day Metrics | |
|---|-----------|
| Cases | 16,169 |
| % Positivity | 10.14.9 % |
| Deaths | 0 |
| % of Population ≥ 5 Years of Age Fully Vaccinated | 62.4% |
| New Hospital Admissions (7-Day Moving Avg) | 141.71 |



ODA COVID-19 Care Center Portal

(<https://covidcare.age.ohio.gov>)

After login, facility transmission level is reported here

Ohio | Department of Aging | COVID-19 Care Center

Welcome to COVID-19 Care Center

As of 06/07/2022 Your County Community Transmission Rate is **High**.
For more information visit: [CDC COVID Data Tracker: County View](#)

Legend: High (Red), Substantial (Orange), Moderate (Yellow), Low (Blue), No Data (Grey)

Main Menu

COVID-19 Care Portal Programs Validated on 09/13/2021

- Facility Profile
- Weekly Reporting
- Testing Program Selection
- Vaccine Program Selection
- Vaccine Maintenance Schedule
- Crisis Staffing Request **NEW**

Log Out

Ohio.gov

Reporting

Persons in charge of any laboratory that examines specimens of human origin for evidence of COVID-19 infection shall electronically report within **twenty-four (24) hours** the results of all such examinations, in the manner set forth by the ODH Director and according to the protocols outlined for COVID-19 reporting on the ODH Electronic Laboratory Reporting website and the updated HHS Laboratory Data Reporting Guidance.

COVID-19 testing facilities are no longer required to report negative results for tests authorized for use under a Clinical Laboratory Improvement Amendments (CLIA) certificate of waiver through CMS. This includes rapid and antigen testing performed for screening testing at schools, correctional facilities, employee testing programs, long-term care facilities, and rapid testing performed in pharmacies, medical provider offices, and drive-thru and pop-up testing sites.

Line Level Reporting Options

Options for laboratories or other entities performing COVID-19 testing to electronically report their testing results:

- <https://odh.ohio.gov/know-our-programs/Electronic-Laboratory-Reporting/Electronic-Laboratory-Reporting>
- <https://www.cdc.gov/nhsn/ltc/covid19/index.html>
- <https://www.simplereport.gov>

State-Supported Testing Program

State-supported testing remains available to help facilities satisfy current testing priorities (see page 1). Through the program, participants have access to free PCR and rapid antigen tests, training, and technical assistance.

- **Option 1: Alternating rapid antigen and PCR tests**
- **Option 2: Rapid antigen tests only**
- **Option 3: PCR tests only**
- **Option 4: No state-supported tests**



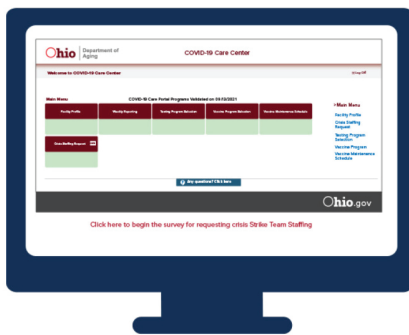
For more information visit:

<https://aging.ohio.gov/care-and-living/coronavirus-response/the-road-back>

Regional Rapid Response Assistance Program (R³AP) Support for Long-Term Care Providers

R³AP provides a team of statewide experts who operate in-person and remotely to support the needs of long-term care facilities. Free assistance provided by R³AP includes but is not limited to:

What we provide:



COVID-19 Testing Support



COVID-19 Vaccine Access



COVID-19 Resources and Supplies



COVID-19 Crisis Staffing Teams

1-855-R3AP-ODA or aging.ohio.gov/R3AP



REGIONAL RAPID RESPONSE ASSISTANCE PROGRAM **R³AP**

with support from the Ohio Department of Health

www.aging.ohio.gov/r3ap

1-855-732-7632 or 1-855-R3AP-ODA