

Guidance for Long-term Care Testing Plan: How to Effectively Complete the LTC Testing Plan Template to Support COVID-19 Testing

Introducing the long-term care COVID-19 testing response plan

Since March 2020, long-term care (LTC) facilities have been engaging in COVID-19 testing efforts, in collaboration with the Minnesota State Emergency Operations Center (SEOC), leveraging the services of the Minnesota National Guard. With the recent release of the [Recommendations for Long-term Care Visitation and Activities Guidance \(PDF\)](#) <https://www.health.state.mn.us/diseases/coronavirus/hcp/lcvisit.pdf> and the ongoing, ever evolving statewide COVID-19 response, we recognize that testing efforts will be an ongoing task for the state as a whole. The goal is to ensure our response efforts continue to protect the health and safety of our most vulnerable populations.

The SEOC, in collaboration with health care coalitions (HCC), have developed an LTC Testing Plan Template to assist LTC facilities in documenting their processes for continuity and response purposes. The Testing Plan Template is a tool to assist you in documenting your facility's specific processes and plans, whether you are conducting your own testing or requesting assistance from the State of Minnesota. It is designed to be flexible to meet your needs and to seamlessly integrate into your existing emergency operations plans. The template was written to serve any infectious disease that may impact your facility, while highlighting COVID-19-specific processes to ensure the plan is relevant for the current pandemic. The plan template is paired with a guidance document outlining examples, best practices, and recommendations on how to effectively complete your plan.

In completing your plan, you may decide to test on your own and may develop relationships with labs, health care providers, or private contractors. You may also opt to use State testing resources. Please keep in mind the following resources may be available to you:

Testing resources available through the SEOC

- Mobile contracted swabbing teams
- State contracted lab services
- Testing supplies, if you opt to test on your own
- Training on swabbing technique
- Personal protective equipment
- Ordering physician services

Additional resources

- [Long-term Care Testing: Covid-19](https://www.health.state.mn.us/diseases/coronavirus/hcp/lctesting.html)
(<https://www.health.state.mn.us/diseases/coronavirus/hcp/lctesting.html>)
Testing resources
- [Long-term Care Emergency Preparedness](https://www.health.state.mn.us/communities/ep/ltc/index.html)
(<https://www.health.state.mn.us/communities/ep/ltc/index.html>)
Preparedness resources developed by MDH.
- [Health Care Coalitions](https://www.health.state.mn.us/communities/ep/coalitions/index.html) (<https://www.health.state.mn.us/communities/ep/coalitions/index.html>)
Tools and resources and how to connect to health care coalitions.
- [Preparing for COVID-19 in Nursing Homes](https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html) (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>)
CDC COVID-19 guidance for long-term facilities and nursing homes.

Thank you for your ongoing efforts to ensure that our elderly population are cared for and are in a healthy and safe environment!

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Purpose section

The purpose of this document is to provide guidance on completing the Long-term care testing plan template. This template is written to apply to any pandemic/epidemic. In light of the current COVID-19 pandemic, the guidance provides specific information relative to current response efforts. The goal is for each facility to have a testing plan developed and incorporated into its emergency operations plans. It is highly recommended that minimally, the plan will be revised and updated preserving best practices, lessons learned, and the core functions of the facility's role in implementing testing within their facility.

Background section

The Minnesota Department of Health (MDH) has worked with regional [Health Care Coalitions](https://www.health.state.mn.us/communities/ep/coalitions/rhpc.html) (<https://www.health.state.mn.us/communities/ep/coalitions/rhpc.html>) to set up mechanisms to support testing efforts, including working with the large health systems and private contractors to establish mobile swabbing teams and partnering with State-contracted labs to make testing more accessible. There are more details about MDH COVID-19 testing guidance on the [MDH Long-term Care: COVID-19 website](https://www.health.state.mn.us/diseases/coronavirus/hcp/ltc.html) (<https://www.health.state.mn.us/diseases/coronavirus/hcp/ltc.html>). Additional CDC guidance is available at [Preparing for COVID-19 in Long-Term Care Facilities](https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html) (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>).

As with any response plan, the safety of staff and residents is a facility's primary responsibility. However, it is in collaboration with local, regional, and state partners.

As facility administrators work towards limiting the spread of any pandemic/epidemic within the facility, testing is a key component. Testing is one part of a broad-based response strategy that includes triage and clinical consultation, infection prevention and control measures, resident and staff health screening, exclusion of ill staff, and planning for staffing surge capacity in case of staff shortages. To effectively design and implement a comprehensive testing plan, facility administrators should also ensure intersecting plans and policies are in place. Plans and policies include, but are not limited to:

- Cohort or isolation protocols and other mitigation efforts to minimize the impact of the pandemic/epidemic.
- Continuity plans for staffing.
- Conservation and continuity planning for supplies of personal protective equipment (PPE).
- Training plan to train staff on what PPE is appropriate to protect them in given situations and how to correctly put on and take off the equipment, as well as the infection prevention and control procedures.
- If the recommended personal protective equipment for testing includes an N95 mask, the facility should also have a respiratory protection plan in place.

How to use the testing plan template

The testing plan template was created to assist long-term care (LTC) facilities in documenting and organizing their processes when the need arises to test staff and/or residents. Every plan is unique to the organization and the resources available to them. Therefore, this template has been designed for flexibility.

This template does not assume that every facility will make its own arrangements for testing without State assistance; many will make use of resources and support provided by the State. This template is scalable whether your facility has the resources and relationships needed to conduct your own in-house testing or you need State assistance.

The first half of the template is your base plan. The second half consists of worksheets for use when you require assistance from external partners and, therefore, can vary based on the response and disease. Throughout the template, you will find bracketed [...] fields of text that are placeholders for you to provide your unique processes for accomplishing the specific task. Any section of the plan can be changed or edited to meet your local policies, procedures, or needs.

As with any plan, testing plans should be developed in coordination with facility leaders and local and regional partners. Once completed, this plan is designed to easily integrate into your existing emergency operations plans (EOP). For more information on EOPs for long-term care, please review the MDH toolkit for [Long Term Care Emergency Preparedness](https://www.health.state.mn.us/communities/ep/ltc/index.html) (<https://www.health.state.mn.us/communities/ep/ltc/index.html>).

Walking through the template sections below

The following are sections of the Testing Plan Template. It is highly recommended to have this document alongside your plan template for ease of reference when seeking additional insight on how to best complete each section.

Pandemic/epidemic threat assessment section

Any emergency preparedness and response plan should be predicated on an assessment of the threat factors so that appropriate mitigation and response actions can be identified. For additional information on how to conduct a threat assessment, connect with your [Regional Health Care Preparedness Coordinators \(RHPCs\)](https://www.health.state.mn.us/communities/ep/coalitions/rhpc.html) (<https://www.health.state.mn.us/communities/ep/coalitions/rhpc.html>).

Note: for purposes of the COVID-19 response, MDH guidance indicates that all long-term care facilities are at high risk and should move forward with testing. For more information visit: [Long-term Care Testing: COVID-19](https://www.health.state.mn.us/diseases/coronavirus/hcp/lctesting.html) (<https://www.health.state.mn.us/diseases/coronavirus/hcp/lctesting.html>).

Activation section

In this section you will enter the role of the person who will be appointed as the swabbing team lead. Typically, this is the facility administrator or the director of nursing.

Operational considerations section

Medical orders

The facility is responsible for securing medical orders for resident and staff tests. There are several options to consider to best meet your needs:

- For skilled nursing facilities and assisted living with medical directors, the medical director who oversees resident medical care writes a blanket order for residents and staff.
- Facilities without a relationship with a medical director could contact the primary care physicians (or other ordering providers) of the residents to obtain orders, or work with another provider with whom the facility has a relationship. Facilities could also request staff to receive an order from their primary physician.
- For facilities seeking additional support in obtaining medical orders, the commissioner of health has authorized the MDH medical director to order COVID-19 tests for residents and/or staff. To use this process, contact the SEOC Swabbing Team (SEOC.COVID.Testing@state.mn.us) to request use of the MDH standing order, after being scheduled for a testing date.

The medical order pathway may be the same for both residents and staff, or different. You should also determine if you are going to include in your testing efforts the essential caregivers and staff who routinely enter your facility, but are not directly employed as part of the order. In this section, also include information regarding the process outlined to submit physician request orders and any other pertinent submission and reporting details.

Example:

Medical orders will be obtained by contacting [Dr. Physician at 555-555-5555] and providing a current listing of all residents and staff. [Dr. Physician] will complete the order and submit it to the lab once the testing date has been determined.

Laboratory services

If you are doing test collection without the support of a State-contracted swabbing team or other local provider partner providing laboratory services, securing lab processing services is the facility's responsibility. When choosing a lab, there are several options to consider:

- **Established lab agreement:** if you have an already established lab agreement, inform your point of contact of your testing efforts and discuss details regarding: available capacity on the desired testing

dates; uploading the orders; specimen collection; swab preferences; labeling; transporting; and reporting results.

- **No established lab agreement:** connect with your local/regional and any other facilities, hospitals, and public health partners to identify options. Your regional health care coalition may be able to help with connections and information.
- Request a lab assignment from the **State through [REDCap COVID-19 Testing Requests and Allocations for Long Term Care](https://redcap.health.state.mn.us/redcap/surveys/?s=FXNEEE7PXX)** (<https://redcap.health.state.mn.us/redcap/surveys/?s=FXNEEE7PXX>).

Specimen collection

Determine if the facility will use its own staff to collect specimens or seek assistance from another source. Options include, but are not limited to:

- Another health care facility.
- A contractor.
- A State-provided mobile swabbing team. To request assistance, complete the REDCap survey: [COVID-19 Testing Requests and Allocations for Long-term Care](https://REDCap.health.state.mn.us/REDCap/surveys/?s=FXNEEE7PXX) (<https://REDCap.health.state.mn.us/REDCap/surveys/?s=FXNEEE7PXX>).

If your staff need assistance learning to swab, you can request training assistance through the State or your regional health care system.

Testing supplies

If the facility is conducting its own in-house testing, without the support of a State-contracted mobile swabbing team or a provider partner that is providing their own supplies, then securing testing resources and supplies is the facility's responsibility. Do not order supplies until checking with the lab you will be using to find out what they accept. If the facility is working with a mobile swabbing team, consult with the team regarding testing supplies, as they generally bring their own supplies. Reference the [Supply Checklist for Point Prevalence Survey \(PDF\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/pps2supplies.pdf) (<https://www.health.state.mn.us/diseases/coronavirus/hcp/pps2supplies.pdf>) for additional information and assistance with completing Attachment 3 in the testing plan template.

Additionally, there are several support options to consider:

- Contact your partnering lab for additional information regarding which specific collection swabs/transport media they accept. They may be willing to ship supplies to you.
- Use your normal supply chain to obtain other supply items whenever possible.
- Contact your health care coalition for information regarding possible other resources available if you have emergency needs.

Testing requirements section

This section should include the requirements for testing. A facility may have more stringent testing requirements than recommended by the CDC or MDH.

See [COVID-19 Testing Recommendations for Long-term Care Facilities \(PDF\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/lctestrec.pdf) (<https://www.health.state.mn.us/diseases/coronavirus/hcp/lctestrec.pdf>) for minimum requirements set forth by MDH.

Key aspects include:

- Testing of residents
- Testing of staff
- Facility-wide testing by point prevalence survey

Note: testing a group of individuals at a single time is referred to as a “point prevalence survey,” or PPS. The PPS approach provides information on the overall number of affected individuals in the facility at that point in time. A serial point prevalence survey is an ongoing, weekly re-testing of all negative individuals in the group until no new tests are positive (see [Long-term Care Testing: COVID-19](https://www.health.state.mn.us/diseases/coronavirus/hcp/lctesting.html) (<https://www.health.state.mn.us/diseases/coronavirus/hcp/lctesting.html>) for additional information.)

Testing approach section

Implementation of testing may vary based on the disease. However, the following are standard key components that will guide your completion of this section if you are doing your own testing. If you plan to use a State-provided COVID-19 swabbing team, additional information can be found at [Long-term Care Testing: COVID-19](https://www.health.state.mn.us/diseases/coronavirus/hcp/lctesting.html) (<https://www.health.state.mn.us/diseases/coronavirus/hcp/lctesting.html>).

Testing Approach

Task	Considerations
Specimen collection (N95 masks should be used as part of a respiratory program that includes fit testing)	<ul style="list-style-type: none"> ▪ Perform procedures in a resident’s room or other designated space, with the door closed. ▪ Staff in the room should wear a surgical facemask, or N95 respirator if available, eye protection, gloves, and a gown. ▪ Only staff who are essential to collect the specimen should be present. ▪ After the specimen is collected, surfaces should be cleaned and disinfected in the room where specimens are collected.
Testing all residents	<ul style="list-style-type: none"> ▪ Methods used, number of residents, time, frequency, etc. ▪ How would the process differ if the agency was testing a sampling of the residents? ▪ How would the sample size and individuals chosen be determined?
Testing of all staff	<ul style="list-style-type: none"> ▪ Note any differences that apply specifically to testing staff that may differ from those listed for residents above.

Testing implementation section

Use this section to address policy or recommendations for staff on how to address various scenarios that might come up.

Testing Scenario Examples

Scenario	Examples
Resident refuses to be tested	<ul style="list-style-type: none"> ▪ Isolate the resident ▪ Contact physician ▪ Contact family/guardian ▪ No action, just move on to next resident
Staff member refuses testing	<ul style="list-style-type: none"> ▪ Remove from resident care for specified time ▪ No consequence
Staff member fails to show up for testing	<ul style="list-style-type: none"> ▪ Second testing date set ▪ Consider performance management implications ▪ Remove from resident care for specified time
If the lab is unable to process a test	<ul style="list-style-type: none"> ▪ Retest ▪ No action
If the testing has to be postponed due to a lack of supplies or staff	<ul style="list-style-type: none"> ▪ Administration must make the decision to postpone or cancel the testing ▪ The swabbing team lead can postpone testing.

Reporting/tracking Results

This section will be determined by the medical order method selected above. Document how the process will be tracked and records will be maintained as well as how the results will be shared with residents and staff in a private and secure manner.

- To whom will the laboratory send the results? This is normally the ordering physician, but this can be delegated to another person, such as the director of nursing. If you are using the State as the ordering physician, the resident results will be sent to the facility and the staff will be contacted by the State nurse line.
- Who will share results with staff and/or resident/guardian?

Note: the current link to report cases to MDH for COVID-19 is Submitting Clinical Information on Long Term Care COVID-19 Cases (<https://REDCap-c19.web.health.state.mn.us/REDCap/surveys/?s=H8MT9TTNCD>). In addition to state reporting requirements, Skilled Nursing Facilities are also required to report positive cases to Centers for Disease Control and Prevention (CDC) through the National Health Care Safety Network (NHSN).

Cost

This section addresses who covers the cost of the test. Normally, insurance will cover the cost of the lab test for the resident. For staff, the facility needs to decide if it will cover that cost or if insurance will be billed.

Currently for COVID-19, when using a State swabbing team/State-contracted lab, the facility submits insurance information to the lab, and the lab handles insurance billing for staff. For residents, the billing depends on the reimbursement model for the resident's care payment model; some facilities prefer to handle billing for residents' tests on their own. Additionally, for COVID-19, the following applies through December 2020:

- MDH will directly fund all State-contracted COVID-19 mobile swabbing teams.
- For facilities using State-contracted mobile swabbing teams, the lab will bill insurance companies or public programs for COVID-19 testing costs for residents and staff, if the facility is unable to handle the billing itself. Facilities are responsible for collecting and submitting insurance information to the lab. Any testing costs that are not reimbursed by insurance will be billed by the MDH-contracted lab to MDH.
- Medicaid-certified skilled nursing facilities are encouraged to seek reimbursement from the Department of Human Services for the costs of COVID-19 testing for their staff.
 - In order to seek reimbursement for these testing costs, nursing facilities must use either the Minnesota Department of Human Services (DHS) Nursing Facility Rates and Policy (NFRP) for COVID-19 Form A or Form B. A Medicaid-enrolled provider may choose to claim these testing costs on its Medicaid cost report INSTEAD of claiming it on Form A or Form B. Both forms are found on the [Nursing Facility Provider Portal \(https://nfportal.dhs.state.mn.us/PortalLogin.aspx?ReturnUrl=%2fRateNoticesPDF%2fRateNoticePDF.aspx\)](https://nfportal.dhs.state.mn.us/PortalLogin.aspx?ReturnUrl=%2fRateNoticesPDF%2fRateNoticePDF.aspx). Testing costs must be reported on line 9080, "Other Employee Benefits," on the Medicaid cost report. COVID-19 reimbursement forms may be submitted by facilities to DHS no more than once monthly. Costs reimbursed through COVID-19 Form A or Form B must be recorded as an adjustment on line 9080.
 - Allowable costs for testing are limited to the Medicare fee schedule in effect on that date of service. These limits apply to the testing costs, regardless of whether the facility is seeking reimbursement via the NFRP COVID-19 reimbursement forms or is claiming these costs on its Medicaid cost report.
 - If the facility is using in-house nursing staff to collect specimens, a separate fee for that service will not be allowed. Incremental staffing costs to perform this function can be claimed on Forms A or B.
 - Testing costs eligible for reimbursement under 12A, using Form A or Form B, must be COVID-19-related expenses. Eligibility for reimbursement under 12A for COVID-19 staff testing will end 60 days after the governor's emergency declaration for COVID-19 is over.

Plan maintenance section

Add any other plan review requirement or policies specific to your facility.

Attachment 1 section

When completing Attachment 1, it is important to have made the decision on how testing will roll out in your facility. If the decision is to work with a contracted team, be sure to cross-reference any expectations the contractor has for you as the facility. If the decision is to conduct your own testing in-house, be sure to review the [Road Map for Conducting a COVID 19 Point Prevalence Survey \(PDF\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/pps0roadmap.pdf) (<https://www.health.state.mn.us/diseases/coronavirus/hcp/pps0roadmap.pdf>) for additional details about supplies and processes.

A few best practices for achieving a successful testing experience include, but are not limited to:

- Have frequent and transparent communications with all partners involved with conducting testing and being tested. In addition, it is key to inform local and regional partners of your upcoming testing efforts.
- Routinely connect with any contractors/partners assisting you with your testing efforts.
- Understand all documentation needed for prior, during, and after testing.
- At any time, contact the State via email with questions, comments, or concerns: SEOC.COVID.Testing@state.mn.us.

Attachment 2 section

Upon completing Attachment 2, it is important to have identified the path for which laboratory will be used. If working with a mobile swabbing team, please communicate with them so that you understand any special instructions regarding their partnering lab. This worksheet will assist the facility in having a single spot in which key dates and results are documented for record-keeping purposes. At any time, contact the State via email with questions, comments, or concerns: SEOC.COVID.Testing@state.mn.us.

Attachment 3 section

Attachment 3 is focused on staff and testing supplies needed to implement testing at the facility. If a mobile swabbing team has been selected, please be sure to discuss what, if any testing supplies the facility needs to secure prior to testing. In most cases, the mobile swabbing teams are fully equipped and no additional supplies are needed. At any time, contact the State via email with questions, comments, or concerns: SEOC.COVID.Testing@state.mn.us.

Additional resources to assist your COVID-19 response

[MDH Long-term Care Testing Website](https://www.health.state.mn.us/diseases/coronavirus/hcp/ltctesting.html)

(<https://www.health.state.mn.us/diseases/coronavirus/hcp/ltctesting.html>)

[CDC Testing Overview](https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html) (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html>)

[Planning and Preparedness Checklist for Testing at Your Facility by a State Mobile Team \(PDF\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/ltctestlist.pdf)

(<https://www.health.state.mn.us/diseases/coronavirus/hcp/ltctestlist.pdf>)

[MDH Evaluating and Testing: COVID-19](https://www.health.state.mn.us/diseases/coronavirus/hcp/eval.html)

(<https://www.health.state.mn.us/diseases/coronavirus/hcp/eval.html>)

[Preparing for COVID-19 in Nursing Homes](https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html) (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>)

[Responding to Coronavirus \(COVID-19\) in Nursing Homes](https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html) (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html>)

[Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html) (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>)

[MDH COVID-19 Toolkit \(PDF\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/ltctoolkit.pdf) (<https://www.health.state.mn.us/diseases/coronavirus/hcp/ltctoolkit.pdf>)

Detailed information for long-term care facilities regarding COVID-19 active screening of residents.

[Recommendations for Long-term Care Visitation and Activities: How and When to Safely Transition to the Next Level Throughout the COVID-19 Pandemic \(PDF\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/ltcvisit.pdf)

(<https://www.health.state.mn.us/diseases/coronavirus/hcp/ltcvisit.pdf>)

- [Long-term Care Visitation and Activities Recommendations Summary \(PDF\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/ltcvisitsum.pdf)
(<https://www.health.state.mn.us/diseases/coronavirus/hcp/ltcvisitsum.pdf>)
- [Frequently Asked Questions: Long-term Care Visitation and Activities Recommendations \(PDF\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/ltcvisitfaq.pdf)
(<https://www.health.state.mn.us/diseases/coronavirus/hcp/ltcvisitfaq.pdf>)



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