BLAST FAX 2020-103

TO: Nursing Home Administrators

FROM: Acting Commissioner Deidre S. Gifford, MD, MPH

CC: Deputy Commissioner Heather Aaron, MPH, LNHA
    Adelita Orefice, MPM, JD, CHC, Senior Advisor to the Commissioner
    Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch
    Donna Ortelle, Section Chief, Facility Licensing and Investigations Section

DATE: November 10, 2020

SUBJECT: Nursing Home Visitation and Request for Civil Money Penalties (CMP) Funds

On September 17, 2020, the Centers for Medicare and Medicaid Services (CMS) released QSO Memo 20-39, (https://www.cms.gov/files/document/qso-20-39-nh.pdf ) which provided guidance for visitation and the use of CMP funds to aid in visitation. Facilities may request CMP funds to assist with the acquisition of tents to promote outdoor visitation and/or clear dividers to create a physical barrier to reduce the risk of transmission during indoor visits. As a cautionary reminder, facilities using these funds must do so in compliance with life safety code requirements found at 42 CFR 483.90, unless these requirements are waived under the Public Health Emergency declaration.

CMS has streamlined the approval process related to the use of CMP funds to support visitation by delegating to the State Survey Agency, the Department of Public Health, the authority to review and approve CMP requests that will enhance visitation and meet CMS parameters. Funding requests are limited to a maximum of $3,000 per facility for allowable visitation aids. The application (please see enclosed) must include the following:
1. Request for funds are limited to the purchase of tents to facilitate outdoor visitation and clear dividers (e.g. Plexiglass) to facilitate indoor visitation. DPH will not approve any requests for items that are prohibited as noted below;

2. Applications must ensure that Life Safety Code (LSC) requirements found at 42 CFR 483.90 are met, unless waived under the Public Health Emergency declaration;

3. Application must demonstrate the appropriate level of visitation restrictions within available guidelines from the Center for Disease Control and Prevention (CDC), e.g. limiting the number of individuals visiting any one resident.

Expenses that are prohibited include the following:

- Outdoor furniture
- Portable air conditioning or heating units
- Fans
- Ventilation systems
- Lighting systems
- Personal Protective Equipment (PPE)
- Portable fire extinguishers of approved types
- Disinfectant and cleaning supplies
- No smoking signage
- Administrative fees
- Indirect costs
- Travel expenses
- Infrared temperature scanners
- COVID-19 testing and testing equipment

Should you have any questions and/or if you interested in requesting a CMP grant, not to exceed $3,000, please contact or complete the attached application and submit to Cynthia Hayle, R.N., M.B.A. at Cynthia.Hayle@ct.gov
# Civil Money Penalty (CMP) Reinvestment Application

**Coronavirus Disease 2019 (COVID-19)**

**In-Person Visitation Aids Request**

<table>
<thead>
<tr>
<th>Date</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Name</td>
<td></td>
</tr>
<tr>
<td>Facility Address</td>
<td></td>
</tr>
<tr>
<td>CCN (CMS Certification Number)</td>
<td></td>
</tr>
<tr>
<td>Number Certified Beds</td>
<td></td>
</tr>
<tr>
<td>Census</td>
<td></td>
</tr>
<tr>
<td>Contact Name</td>
<td></td>
</tr>
<tr>
<td>Contact Title</td>
<td></td>
</tr>
<tr>
<td>Contact Phone Number</td>
<td></td>
</tr>
<tr>
<td>Email Address</td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL CMP FUND REQUEST AMOUNT**

$ \_

**BUDGET**

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>CMS Certification Number</th>
<th>Number of Certified Beds</th>
<th>Type of Visitation Aids (e.g. tents, clear dividers)</th>
<th>Cost per Visitation Aid</th>
<th>Number of Visitation Aids</th>
<th>Total Cost per Facility</th>
<th>Compliance with LSC Yes/No</th>
<th>Compliance with Infection Control Practices Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Phone: (860) 509-7400 • Fax: (860) 509-7543
Telecommunications Relay Service 7-1-1
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph

Affirmative Action/Equal Opportunity Employer