

**INFORMATIONAL LETTER NO. 2184-MC-FFS-CVD**

**DATE:** October 26, 2020

**TO:** Iowa Medicaid Nursing Facilities, Skilled Nursing Facilities, and Nursing Facilities for Persons with Mental Illness (NF/MI)

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS), and Coronavirus Disease (CVD)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** 2020 Civil Money Penalty (CMP) Grants for In-Person Visitation Aids during COVID-19

**EFFECTIVE:** Upon Receipt

The purpose of this Informational Letter is to announce the availability of Civil Money Penalty (CMP) Grant funds for in-person visitation aids during the COVID-19 Public Health Emergency (PHE).

DHS and the IME understand that nursing facility residents derive value from the physical, emotional, and spiritual support they receive through visitation from family and friends. The Centers for Medicare and Medicaid Services (CMS) memorandum [QSO-20-39-NH<sup>1</sup>](#) issued September 17, 2020, includes new guidance for visitation in nursing facilities during the COVID-19 PHE. The guidance provides reasonable ways a nursing facility can safely facilitate in-person visitation to address the psychosocial needs of residents. CMS will now approve the use of CMP funds to purchase tents for outdoor visitation and/or clear dividers to create physical barriers to reduce the risk of transmission of COVID-19 during in-person visits.

**Grant Eligibility and Approved Visitation Aids**

Applications must meet ALL the following criteria:

- A. Applications must be on the COVID-19 In-Person Visitation Aid Application Template located [here<sup>2</sup>](#).

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<sup>1</sup> <https://www.cms.gov/files/document/qso-20-39-nh.pdf>

<sup>2</sup> <https://dhs.iowa.gov/ime/providers/claims-and-billing/covid19>

- B. Applicants must only include requests for funds to purchase in-person visitation aids. Sales tax must be itemized on the application in order to be reimbursed.
- C. Applicants must ensure:
- Requests directly address the need to facilitate in-person visits for residents.
  - Appropriate Life Safety Code requirements found at 42 CFR 483.90 are met, unless waived under the PHE declaration.
  - Tent size allows for social distancing to be observed.
  - Core principles of infection prevention and control practices are followed. Surfaces must be cleaned and disinfected between resident uses. Review the EPA's List N: Disinfectants for Use against SARS-CoV-2 to determine if the disinfectant identified in the manufacturer's instructions meet EPA's criteria.
  - Work with state officials to determine the appropriate level of visitation restrictions within available guidelines from the Centers for Disease Control (CDC), Iowa Department of Public Health (IDPH) and the Iowa Department of Inspections and Appeals (DIA) (e.g., limiting the number of individuals visiting with any one resident).
- D. Facilities may only use up to \$3,000 of CMP state-approved funds for in-person visitation aids.
- E. Facility MUST be a *certified Medicaid* long-term care facility. Assisted living, hospitals, adult day health are not eligible.
- F. Facility MUST seek and receive approval from the State Fire Marshall Division to ensure Life Safety Codes are met.

Allowable Uses of CMP Funds for in-person visitation aids:

- Tents including installations (purchase and/or rental)
- Clear dividers (e.g. Plexiglas or similar product) including installation.
- If using funds for installation, identify what was included in the cost for installation including materials, labor and the installer's bid.

Prohibited Expenses include but are not limited to:

- Outdoor furniture (chairs, tables, etc.)
- Portable air conditioning and/or heating units
- Fans
- Ventilation systems
- Lighting system
- Personal Protective Equipment (PPE)
- Portable fire extinguishers of approved types
- Disinfectant and Cleaning Supplies (Disinfectant wipes, hand sanitizer, etc.)
- No-Smoking signage
- Administrative fees
- Indirect Cost. For example: federally determined indirect (facilities and administrative-F&A) costs such as staff fringe benefits or facility maintenance.
- Travel expenses

- Infrared temperature scanners
- COVID-19 testing and testing equipment
- Capital improvements

### **Submission and Acceptance of In-Person Visitation Aid Grant Applications**

- DHS/IME is only accepting In-Person Visitation grant applications for the items as described above.
- Only **one** CMP grant application will be approved per facility up to a max of \$3,000.
- Facilities should ensure all anticipated expenditures are included in the application, including any applicable sales tax. Additional expenditures that are not identified in the original application and approval letter will not be reimbursed.
- Facilities will be reimbursed based on the approved amount or the actual expenditures, whichever is less. If actual expenditures are less than the original approved amount, DHS/IME will award for the amount of the actual expenditures.

### **Required Documentation**

To be considered for an In-Person Visitation Aid grant, DHS/IME must receive the required completed documentation:

- Application on the approved template
- W9
- DHS Attestation

These forms, as well as a copy of the application, can be found on the DHS website – see link above. Please save and submit the completed application with the following naming convention (Nursing Facility Name\_Date of application). Submit the application, W9 and DHS attestation to the following email address: [IMECMP@dhs.state.ia.us](mailto:IMECMP@dhs.state.ia.us).

If you have submitted an application after September 17, 2020, but prior to the published date of this Informational Letter, you will need to resubmit the application following the procedure identified here. If you have submitted an application to an address other than the one listed, it will not be considered.

**DHS/IME will accept grant applications through January 23, 2021, or at the end of the public health emergency (PHE) whichever is later.** Grant proposals received after 4:00 p.m. CST on January 23, 2021, or the end of the PHE shall not be considered.

### **Grant Awards**

DHS/IME will begin accepting and reviewing CMP In-Person Visitation Aid awards immediately and applications that meet the defined CMS parameters as outlined above will be approved. Applicants requesting grant funds will receive an approval or denial letter via email. DHS/IME may also request additional information or changes to the

application if needed. Once an applicant receives an approval letter, they may purchase the visitation aids consistent with the items on the approved application and approval letter.

Approved grants funds shall be used for the sole purpose of providing nursing facility residents with in-person visitation aids to support safe in-person visitation. Any funds spent in a manner not consistent with the certification on the completed application or as outlined in the eligibility criteria, will be subject to recovery.

Grant proposals for other quality improvement initiatives will be solicited at another time and will be posted to the [Iowa Bid Opportunities website](#)<sup>3</sup>.

### **Payment of Grants**

DHS/IME will only reimburse facilities that have completed an application packet, including the W9 and DHS Attestation and received an approval letter. In order for DHS/IME to process payment of grant awards timely, you must include all the required documentation for payment:

1. Copy of DHS/IME Approval Letter
2. Summary Invoice (This should be a summary of all the receipts and be in a similar format to the application and approval letter. Click here<sup>4</sup> for a template that can be used. The summary invoice must contain at a minimum:
  - a. Nursing Facility Name
  - b. Address
  - c. CMS Certification Number (CCN)
  - d. Tax ID
  - e. Itemized detail of visitation aids purchased or installed
3. Copies of all receipts for visitation aid purchases, materials and labor for installation.
4. Copy of approval email from the State Fire Marshall Division.

DHS/IME will reimburse facilities based on the approved amount or the actual expenditures, as verified on the summary invoice and itemized detailed receipts, whichever is less. If a facility's expenditures exceed the approved amount, DHS/IME will pay at the approved amount.

Please send all required documentation in one email to the CMP email box: [IMECMP@dhs.state.ia.us](mailto:IMECMP@dhs.state.ia.us).

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<sup>3</sup> <https://bidopportunities.iowa.gov/>

<sup>4</sup> (link to come)