

## Centers for Medicare and Medicaid (CMS) COVID-19 NHSN Reporting Requirements for Nursing Homes

The reporting requirements for nursing homes became effective on May 8, 2020, when CMS published their [interim final rule with comment](#). CMS memo [QSO-20-29-NH](#) provides additional information for nursing homes to meet COVID-19 reporting requirements including details about a grace period prior to enforcement. CMS is only collecting nursing home (i.e., skilled nursing facility and/or nursing facility) data and **not assisted living or developmental disability facility types**.

For CMS enforcement-related questions, please email: [DNH\\_Enforcement@cms.hhs.gov](mailto:DNH_Enforcement@cms.hhs.gov). For other questions or concerns regarding CMS memo QSO-20-29-NH, please email: [DNH\\_TriageTeam@cms.hhs.gov](mailto:DNH_TriageTeam@cms.hhs.gov).

| Healthcare Settings  | COVID-19 Reporting Data Fields   | CMS Reporting Deadlines and Frequency   |
|--|--|---|
| <p><b><i>CMS-certified Long Term Care Facilities (Skilled Nursing Facilities (SNFs) and/or Nursing Facilities (NFs))</i></b></p> | (i) Suspected and confirmed COVID-19 infections among residents and staff, including residents previously treated for COVID-19 | <p><u>Deadlines:</u><br/> <b>May 17, 2020:</b> facilities must submit first set of data. CMS will provide facilities with an initial two-week grace period to begin reporting cases in the NHSN system (which ends at 11:59 p.m. on May 24, 2020). Facilities that fail to begin reporting after the third week (by 11:59 p.m. on May 31st) will receive a warning letter reminding them to begin reporting the required information to CDC.</p> <p><u>Frequency:</u><br/> <b>Facilities must submit the data through the NHSN at least once every seven days.</b> Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. The collection period should also remain consistent (e.g., Monday through Sunday). Each Monday, CMS will review the data submitted to assess if each facility submitted data at least once in the previous seven days. The data pulled each Monday will also be used to update the data that is publicly reported.</p> |
|  | (ii) Total deaths and COVID-19 deaths among residents and staff  |   |
|  | (iii) Personal protective equipment and hand hygiene supplies in the facility  |   |
|  | (iv) Ventilator capacity and supplies in the facility  |   |
|  | (v) Resident beds and census   |   |
|  | (vi) Access to COVID-19 testing while the resident is in the facility  |   |
|  | (vii) Staffing shortages   |   |
|  | (viii) Other information specified by the Secretary  |   |

