

Per state and CMS regulation, LTCFs should be following the [CMS QSO 20-38-NH \(revised\)](#) guidance for routine testing.

3 Testing Strategy

Given the significant risk of COVID-19 outbreaks in long-term care facilities, MDHHS has issued an [Emergency Order](#) requiring that nursing facilities, homes for the aged, and adult foster care facilities licensed to care for 13 or more individuals conduct diagnostic testing in certain circumstances, to the best of their ability. Under the current testing order, revised October 12, 2021 facilities are required to follow testing guidance issued in [CMS QSO 20-38-NH \(revised\)](#).

Source: [MDHHS | Long Term Care COVID-19 Plan](#).

Usually this informs routine staff testing, for example:

Routine testing of staff, *who are not up-to-date*, should be based on the extent of the virus in the community. *Staff, who are up-to date*, do not have to be routinely tested. *For HCP who work in the facility infrequently, see the CDC's [testing guidance](#).* Facilities should use their community transmission level as the trigger for staff testing frequency. **Reports of COVID-19 level of community transmission are available on the CDC COVID-19 Integrated County View site: <https://covid.cdc.gov/covid-data-tracker/#county-view>.** Please see the COVID-19 Testing section on the CMS COVID-19 Nursing Home Data webpage: <https://data.cms.gov/covid-19/covid-19-nursing-home-data> for information on how to obtain current and historic levels of community transmission on the CDC website.

Table 2: Routine Testing Intervals by County COVID-19 Level of Community Transmission

Level of COVID-19 Community Transmission	Minimum Testing Frequency of Staff <i>who are not up-to-date</i> ⁺
Low (blue)	Not recommended
Moderate (yellow)	Once a week*
Substantial (orange)	Twice a week*
High (red)	Twice a week*

⁺Staff *who are up-to-date* do not need to be routinely tested.

*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours.

If the 48-hour turn-around time cannot be met due to community testing supply shortages, limited access or inability of laboratories to process tests within 48 hours, the facility should have documentation of its efforts to obtain quick turnaround test results with the identified laboratory or laboratories and contact with the local and state health departments.

The facility should test all staff, *who are not up-to-date*, at the frequency prescribed in the Routine Testing table based on the level of community transmission reported in the past week. Facilities should monitor their level of community transmission every other week (e.g., first and third Monday of every month) and adjust the frequency of performing staff testing according to the table above.

- If the level of community transmission increases to a higher level of activity, the facility should begin testing staff at the frequency shown in the table above as soon as the criteria for the higher activity level are met.
- If the level of community transmission decreases to a lower level of activity, the facility should continue testing staff at the higher frequency level until the level of community transmission has remained at the lower activity level for at least two weeks before reducing testing frequency.

It directs facilities to use the [COVID-19 Integrated County View Data Tracker website](#) as the data source for determining Community Transmission Level.

The following is a quick guide on how to find the Community Transmission Level in CDC's COVID Data Tracker website.

With recent website changes: the [COVID-19 Integrated County View Data Tracker website](#) has the "COVID-19 Community Level" right underneath the State/Territory and County/Metro dropdowns. Keep in mind, Community Level is used to determine mask usage in public places for the **general public**. Community Level looks at factors related to healthcare utilization within the community and is designed to measure the impact of COVID-19 on communities.

The screenshot shows the website interface for Michigan and Allegan County. At the top, there are dropdown menus for "State or territory:" (Michigan) and "County or metro area:" (Allegan County), with a "Reset Selections" link. Below this, the page title is "Allegan County, Michigan" with a link to the "State Health Department". The main heading is "COVID-19 Community Level" with a green dot and the word "Low". Underneath, there are "Recommended actions based on current level" and "Weekly Metrics Used to Determine the COVID-19 Community Level".

Weekly Metrics Used to Determine the COVID-19 Community Level	
Case Rate per 100,000 population	33.03
New COVID-19 admissions per 100,000 population	1.2
% Staffed inpatient beds in use by patients with confirmed COVID-19	1.9%

How are COVID-19 Community Levels calculated?
Note: The COVID-19 Community Level and associated metrics presented above are updated weekly on Thursday and may differ from the values for the same metrics presented below, which are updated daily.

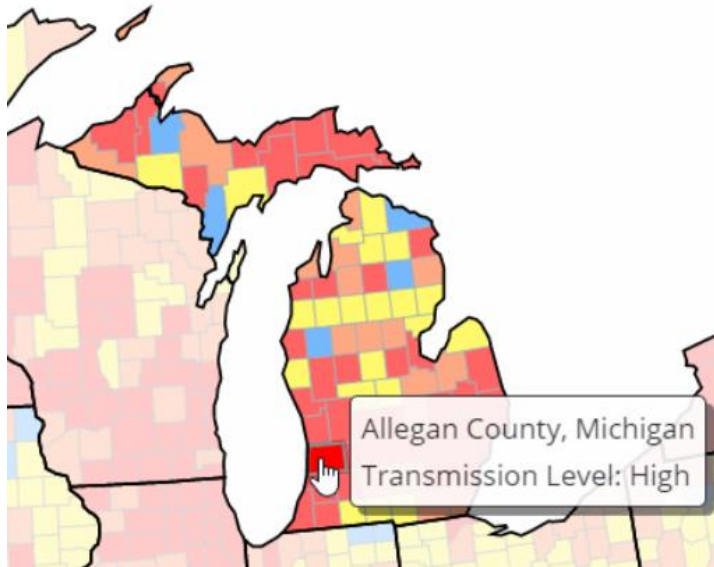
On this page:
[Cases & Deaths](#)
[Testing](#)
[Vaccinations](#)
[Hospitalizations](#)
[Community Characteristics](#)
[Data Downloads and Footnotes](#)

Scrolling down on the page, past the Community Level, there is a spot to select Data Type, as shown below:

The screenshot shows a "Data Type:" dropdown menu. The menu is open, showing a list of options: "Community Transmission", "COVID-19 Community Levels", "Cases", "Nucleic Acid Amplification Tests (NAATs)", "Deaths", "Hospital utilization", "Vaccinations", "CDC Social Vulnerability Index", and "Community Transmission". The "Community Transmission" option at the bottom is highlighted with a red rectangular box.

CDC has changed Community Transmission Levels to simply Community Transmission within this dropdown menu. Once you've selected "**Community Transmission**", the map refreshes to reflect the county selected.

COMMUNITY TRANSMISSION LEVEL:



This means that facilities that are listed to follow the [CMS QSO 20-38-NH \(revised\)](#) should be conducting routine testing of staff not Up-To-Date on C-19 vaccines twice a week. We've also attached a short document outlining the differences between Community Level vs Community Transmission Levels (they are often confused).