

Nursing Home COVID-19 Protection and Prevention Act (S.3768)

Sponsored by: Senator Bob Casey (D-PA) and Senator Sheldon Whitehouse (D-RI)

Why do we need the Nursing Home COVID-19 Protection and Prevention Act?

The novel coronavirus (COVID-19) poses an unprecedented threat to more than one million Americans who reside in a nursing home, intermediate care facility or psychiatric hospital. Older adults, people with disabilities and those with underlying health conditions are at a disproportionate risk of succumbing to COVID-19. While accurate counts remain unavailable, according to the latest reports, more than [32,000](#) residents and workers in congregate facilities have lost their lives to COVID-19. Extraordinary, immediate solutions are needed to protect residents and the heroic workforce putting their lives on the line in nursing homes and other facilities.

States are implementing innovative strategies to mitigate the spread of COVID-19 in congregate settings. Many states and facilities are turning to a practice recommended by the [National Governors Association](#) and the [Centers for Medicare and Medicaid Services](#) known as “cohorting”—effectively separating residents with COVID-19 from those who have not been exposed to the virus. Other states are utilizing “strike” or “surge” teams to ensure a sufficient number of aides, nurses and other providers are available to care for residents, while others are offering real-time technical assistance to facilities on infection control practices. To contain the spread of COVID-19, through strategies like cohorting and surge teams, states, nursing homes, intermediate care facilities and psychiatric hospitals need an adequate supply of testing and personal protective equipment (PPE) and increased funding to support workers with premium, hazard and overtime pay as well as paid family and sick leave benefits.

What would the Nursing Home COVID-19 Protection and Prevention Act do? To contain the devastating spread of COVID-19 in nursing homes and intermediate care facilities, Congress must:

- **Invest in promising practices to save lives:** The bill would provide \$20 billion in emergency funding to States, Territories and Indian Tribes to support nursing homes, intermediate care facilities and psychiatric hospitals with cohorting based on COVID-19 status, namely to support costs related to staffing, testing, PPE and other essential needs. States would provide nursing homes with technical assistance on implementing infection control protocols, minimizing transfers, facilitating discharges to home and community-based settings and adequate staffing, among other topics.
- **Safeguard residents:** Require the U.S. Department of Health and Human Services (HHS) to develop guidance to permit cohorting based on a facility’s history of compliance. HHS would also be required to issue guidance on strategies to effectively cohort based on COVID-19 status, such as on the utilization of non-traditional settings, like hotels and dormitories, and on consumer protections related to discharges and transfers, resident rights and family notification.
- **Collect COVID-19 data and require disclosure:** The bill would require HHS to collect and publish data on COVID-19 cases and deaths in nursing homes, intermediate care facilities and psychiatric hospitals and to issue a report analyzing the characteristics of facilities with COVID-19 outbreaks and deaths. The bill also establishes essential and ongoing oversight, including monthly briefings for Congress and an Office of the Inspector General (OIG) report on the Administration’s response to the spread of COVID-19 in nursing homes, intermediate care facilities and psychiatric hospitals nationwide.

Cosponsors: Senators Schumer (D-NY), Jones (D-AL), Warren (D-MA), Baldwin (D-WI), Markey (D-MA), Shaheen (D-NH), Menendez (D-NJ), Reed (D-RI), Van Hollen (D-MD), Blumenthal (D-CT), Hirono (D-HI), Cortez Masto (D-NV), Rosen (D-NV), Peters (D-MI), Smith (D-MN), Brown (D-OH), Klobuchar (D-MN), Hassan (D-NH), Harris (D-CA), Stabenow (D-MI) and Carper (D-DE).

Supporters: More than **35 national and state organizations** representing older adults, people with disabilities, workers and health care providers, among others, support the bill, including:

1. AARP
2. Alliance for Aging Research
3. Alliance for Retired Americans
4. American Geriatrics Society
5. Alzheimer's Association
6. Alzheimer's Impact Movement
7. American Association on Health and Disability
8. American Health Care Association (AHCA)
9. American Society on Aging
10. American Psychological Association
11. American Society on Aging
12. AMDA: The Society for Post-Acute and Long-Term Care Medicine
13. Arc of Greater Pittsburgh
14. Caring Across Generations
15. Center for Advocacy for the Rights & Interests of the Elderly (CARIE)
16. Center for Public Representation
17. Disability Pride Philadelphia Inc.
18. Disability Rights Education & Defense Fund
19. Elder Justice Coalition
20. Justice in Aging
21. Lakeshore Foundation
22. LeadingAge
23. National Association for the Support of Long Term Care (NASL)
24. National Association of Councils on Developmental Disabilities
25. National Academy of Elder Law Attorneys
26. National Association of RSVP Directors
27. National Association of State Head Injury Administrators
28. National Commodity Supplemental Food Program Association
29. National Consumer Voice for Quality Long-Term Care
30. National Down Syndrome Congress
31. SEIU
32. Social Security Works
33. The Catholic Health Association
34. The Gerontological Society
35. The Society of General Internal Medicine
36. United Cerebral Palsy
37. University of Pittsburgh Medical Center (UPMC)