Senator McBroom and committee members,

I am Melissa Samuel, President and CEO of Health Care Association of Michigan. We represent over 350 nursing facilities across the state. Thank you for the opportunity to testify today on EO 2020-50 and the nursing facility regional hub program.

Michigan has been particularly hard hit by COVID-19, with over 52,000 reported cases and nearly 5,000 deaths. Nursing facility providers are now engaged in an outright, full-scale war with an unrelenting and merciless enemy that is most unsympathetic to the elderly we serve.

As the COVID-19 outbreak hit Michigan, the focus was on addressing concerns of hospital capacity. Many nursing facilities were hesitant to accept residents from hospitals because of the likelihood of introducing the virus to their existing resident population. Nursing facilities are on the second tier of priority for personal protective equipment and testing, and therefore some were not fully equipped to care for COVID-19 patients being discharged from the hospital.

Given the state's limited PPE resources, the regional hub approach was presented to identify facilities that can receive state support and apporpriately admit and care for patients from the hospital. This was a reasonable approach given the situation more than a month ago, especially in southeast Michigan.

The regional hub program was included, along with a number of other provisions regarding long-term care facilities, in Executive Order 2020-50, which was issued on April 15. HCAM shared its concerns with both the Michigan Department of Health and Human Services (MDHHS) and the Administration in a mark-up version of the EO and a corresponding memorandum offering further explanation.

Multiple ensuing conversations between the MDHHS, the

Administration and HCAM resulted in both verbal and written clarification
related to many of the major concerns expressed by HCAM with EO2020-50.

Facilities continue to follow CMS and CDC guidance on the establishment of
COVID units and the transfer of COVID-19-affected residents.

Facilities with COVID-19-affected residents are complying with CDC and CMS guidance requiring cohorting and isolating residents, adequate PPE, proper staff, and physical plant characteristics that provide for the protection of COVID-negative residents.

Outside of EO 2020-50, the Department of Licensing and Regulatory

Affairs has continued its robust oversight of facilities, with infection control protocols becoming the primary focus. Additionally, MDHHS established

Infection Control Prevention Assessment Teams (IPRAT) to assist facilities with infection control protocols. Prior to the pandemic, Michigan's nursing facilities staffed higher than the national average and exceeded the national average in key quality indicators as measured by CMS. This care has continued into this pandemic.

The regional hubs and other nursing facilities that have coordinated with hospital systems to admit COVID-19-affected residents have demonstrated that they can be successful in reducing the spread of this virus when given sufficient resources. With appropriate PPE and testing, Michigan's nursing facilities have successfully rehabilitated literally hundreds and hundreds of COVID-19-affected residents who have been able to return home

or to the COVID-free units in their nursing facilities. We have proven that we are a vital partner in the state's fight against the spread of this deadly virus.

Moving forward, data dictates that our fight against the virus must prioritize the protection of our seniors in nursing facilities and congregate care settings. In Michigan, 68% of documented COVID-19 cases have been individuals 70 years of age or older – the average age of a nursing facility resident is 82.

Up until recently, the lack of adequate and timely testing has forced providers to rely on a symptoms-based approach. We now know that this type of screening is ineffective to slow the spread of the virus. CDC data shows that asymptomatic seniors and staff can unknowingly spread the virus.

Testing is the answer to protecting residents and preventing the spread of COVID-19 - we must make nursing facilities the top priority for these resources. To this end, we have been working with the department to develop a strategy to operationalize ongoing testing of nursing facility staff and residents. Widespread testing will save lives – we have seen in Detroit how effective these efforts can be.

Let's look forward and focus on what needs to be done right now to protect residents and staff, which is ongoing testing until we have a vaccine. We look forward to our continued work with MDHHS, and welcome your support in these efforts.

Thank you for the opportunity to testify. I will do my best to answer any questions you may have.