

Washington State Board of Health

Emergency Rule: WAC 246-101-017, COVID-19 Reporting

April 13, 2022

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Overview

- Background
- Prior Emergency Rules
- Updated HHS Guidance
- Proposed Seventh Emergency Rule
- Next Steps

Background: CARES Act Requirements, HHS Guidance

- March 2020: the Coronavirus Aid, Relief, and Economic Security (CARES) Act requires laboratories to report COVID-19 test results to the Secretary of the U.S. Department of Health and Human Services (HHS) in a manner prescribed by the Secretary
- June 2020 (updated January 2021, March 2022): HHS releases COVID-19 laboratory data reporting guidance specifying standards for reporting testing and demographic data
- September 2020: Centers for Medicare and Medicaid Services (CMS) publish an interim final rule stipulating all laboratories conducting COVID-19 testing and reporting patient-specific results who fail to report information required under the CARES Act will be subject to monetary penalties

Prior Emergency Rules

July 30, 2020

- Required reporters: health care providers & facilities, laboratories, LHJs
- All data components required by HHS
- Additional data reporting (e.g., patient emergency contact, preferred language)
- Disaggregated race and ethnicity

November 9, 2020

- Dept. of Agriculture added to the list of required reporters
- More closely aligned with HHS guidance; additional data components not required by HHS removed

March 10, 2021

 No changes; rule language identical to November 9, 2020, emergency rule

June 9, 2021

 No changes; rule language identical to November and March, emergency rules

August 11, 2021

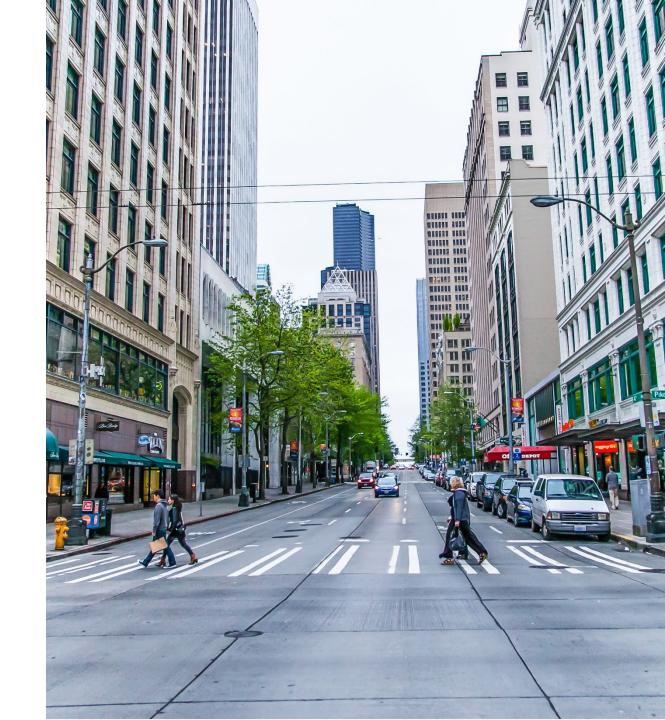
- Adjusted reporting requirements for LHJs to report to the Dept. of Health to better reflect the capacity of the Dept. of Health and LHJs to receive and send these data
- All other requirements unchanged

November 10, 2021

 No changes; rule language identical to August emergency rule

Updated HHS Guidance

- Specifies reporting requirements by testing entity and test type
- Removes reporting requirements for antibody and self-administered tests
- Removes reporting for ask-on-order entry questions (previously voluntary reporting)
- Refines list of reportable data components that accompany test results



Updated HHS Guidance

- Specifies reporting requirements by testing entity and test type:
 - Nucleic Acid Amplification Test (NAAT)
 testing conducted in a facility certified to
 perform high- or moderate-complexity
 tests: positive, negative, and
 inconclusive results
 - All other testing: positive results
 - No antibody or self-administered tests



Proposed Seventh Emergency Rule

- New definitions: antigen test, nucleic acid amplification test, reference laboratory, waived test
- Removed voluntary reporting for ask-on-order entry questions
- Labs licensed to conduct moderate or high complexity testing must report positive, negative, and inconclusive results for all NAAT <u>and antigen tests</u>
- Labs licensed to conduct waived test under a certificate must report positive results for all waived tests, excluding antibody testing

Proposed Seventh Emergency Rule

- Local health officers must notify DOH of all positive results within one business day
- Local health officers must notify DOH of negative and inconclusive results within five business days
- Aligned required reportable data components with updated HHS guidance
- Editorial edits for clarity and useability

Permanent Rulemaking

- Per the Administrative Procedures Act, the Board filed a CR-101 on July 20, 2021 to integrate emergency rule requirements and provisions into permanent rule
- Permanent revisions to the Notifiable Conditions chapter may not go into effect until January 2, 2023 at the earliest



Next Steps

- Current emergency rule expires April 20, 2022.
- If the Board elects to adopt a seventh emergency rule, staff will file a CR-103E with the code reviser to extend WAC 246-101-017 without lapse.
- Emergency rule will be in effect for 120 days.

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THANK YOU

