**Residential and Congregate Care Programs: 2019 Novel Coronavirus (COVID-19) Testing Guidance** 

*Effective July 1st, 2022*

**Section I: Overview**

**Effective July 1, 2022, weekly surveillance testing by Covered Programs is recommended but optional. Covered Programs will continue to have access to the three Testing Options listed in Section II at no cost to the Covered Program.**

This memorandum applies to organizations that operate residential congregate care programs, which includes but is not limited to: group homes and residential treatment programs funded, operated, licensed, and / or regulated by the Department of Children and Families (DCF), the Department of Youth Services (DYS), the Department of Mental Health (DMH), the Department of Public Health (DPH), the Department of Developmental Services (DDS), the Department of Veterans' Services (DVS), the Massachusetts Commission for the Blind (MCB), and the Massachusetts Rehabilitation Commission (MRC). Additionally, this guidance applies to certain Veteran’s Shelters and Approved Private Special Education Schools which offer residential services. See [**Appendix A**](#_Attachment_A:_Model) for a detailed list of the residential congregate care programs subject to this guidance (“Covered Programs”).

For the purposes of this guidance, “surveillance testing” is defined as the routine testing of asymptomatic individuals for the purposes of identifying individuals with asymptomatic or mildly symptomatic COVID-19 infections, in order to prevent viral transmission from these individuals.

For the purposes of this guidance, “staff” includes all persons, paid or unpaid, working or volunteering at each of the Contractor’s residential social service program physical locations, who have the potential for exposure to residents or to infectious materials, including body substances, contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air.

# **Section II: Testing Access Options**

EOHHS is offering three testing options (“testing access options”) to Covered Programs:

1. Enrolling to receive PCR tests from Color Genomics, Inc. (“Color”);
2. Enrolling to receive Abbott BinaxNOW Rapid point-of-care tests (“BinaxNOW tests”); or
3. Enroll to receive over-the-counter (“OTC”) rapid antigen tests. Under this option, provider-operated sites do not need to report results to DPH or to Color.

Details on each of these testing options are below. Please note that Covered Programs will only be able to access testing through **one of the three mechanisms outlined above for each Covered Program** (i.e., Covered Programs which received tests from Color Genomics will not be eligible to receive BinaxNOW tests or OTC rapid antigen tests, or vice versa). Once enrolled, organizations will **not be able to change the chosen testing access option** for at least 8 weeks after tests are received.

Organizations which operate **multiple Covered Programs which are funded by different EOHHS agencies** may choose different testing access options for the Covered Programs funded by each agency. For example, an organization which operates sites funded by DCF and group homes funded by DDS may request Color test kits for the DCF sites and BinaxNOW test kits for the DDS sites.

## Option #1: Color Genomics

EOHHS has entered into a contract with Color Genomics, Inc. (“Color”) to provide access to convenient, self-administered, highly sensitive molecular test at no cost to the Covered Program. Tests to be provided by Color are authorized for self-collection without the need for clinical supervision under FDA (Emergency Use Authorization). They are dry swabs which do not require refrigerated transport, and are analyzed at a Massachusetts-based laboratory, reducing turnaround time for results. The laboratory is responsible for reporting all results to DPH.

For more information, and to enroll with Color, please click on the following links:

* [Color / EOHHS Information Website](https://www.color.com/ma-eohhs-color-testing)
* [Color / EOHHS Enrollment Portal](https://www.color.com/ma-eohhs-color-getting-started)

Additional information about the Color testing option and directions about how to enroll can be found in the webinar posted to the Color / EOHHS Information website and through [this link](https://f.hubspotusercontent30.net/hubfs/3989189/MA%20EOHHS/Training%202020-12-29/color-eohhs-training-2020-12-29.mp4).

## Option #2: Abbott BinaxNOW Rapid Testing

BinaxNOW tests are rapid antigen tests that use a dry swab to collect anterior nares specimens and produce results in 15 minutes; the test can be administered by any trained staff member. More details can be found on the [Abbott BinaxNOW webpage](https://www.globalpointofcare.abbott/en/product-details/navica-binaxnow-covid-19-us.html) and in the [product documentation](https://ensur.invmed.com/ensur/contentAction.aspx?key=ensur.523747.S2R4E4A3.20200826.257.3955490).

Organizations that elect to receive BinaxNOW tests for surveillance testing will receive the supply of BinaxNOW tests centrally, at one location, and will be responsible for distributing kits to the Covered Programs they operate. The number of tests delivered will be based on the organization’s total number of staff and residents, with ratios to be determined by EOHHS.

For detailed information, and for information on how to enroll to receive BinaxNOW tests, organizations should review the document [Abbott BinaxNOW Rapid Point Care COVID-19 Testing for Congregate Care](https://www.mass.gov/doc/guidance-for-abbott-binaxnow-in-congregate-care). Organizations should note that they are responsible for reporting any positive test results to DPH.

## Option #3: OTC Rapid Antigen Testing

EOHHS will distribute rapid COVID-19 self-tests to congregate care providers who choose this option. These rapid tests are over the counter (OTC) tests **which do** **not** **need to be reported to DPH**. The number of tests delivered will be based on the organization’s total number of staff and residents to continue testing on a weekly basis.

Test results are available in 15 minutes and samples do not need to go to a laboratory.  People do not need a cell phone or computer for any part of the test.  The tests are for any individual 2 years of age and up, regardless of vaccination status or whether they have symptoms.

**Note that iHealth COVID-19 Antigen Rapid Tests stamped with an expiration date on or before 9/29/22 may be used for an additional 3 months, per the U.S. Food and Drug Administration. Look up new expirations dates and check for possible additional extensions at** [**ihealthlabs.com/pages/news**](https://ihealthlabs.com/pages/news) **.**

For more information on self-tests, please visit <https://www.mass.gov/info-details/using-a-covid-19-self-test> and <https://www.cdc.gov/coronavirus/2019-ncov/testing/self-testing.html>

You may direct people who test positive to <https://www.mass.gov/info-details/treatments-for-covid-19> and <http://mass.gov/covidtelehealth> to see if they qualify for treatment.

# **Section III: Testing Protocol**

Below is the **recommended but optional** rapid testing regimen for all Covered Programs.

## Testing Regimen

The Program site should conduct once weekly testing on all of its staff, regardless of vaccination status If the ongoing surveillance testing indicates there are positive COVID-19 staff member(s), the provider should follow the outbreak testing program outlined below for “New Positive COVID-19 Cases in Residents or Staff” as soon as possible.

## New Positive COVID-19 Cases in Residents or Staff

If the testing results indicate a positive COVID-19 individual(s), then in addition to surveillance testing, the provider must conduct outbreak testing of **all close contacts** of the positive COVID-19 individual**, including any staff and residents, regardless of vaccination status,** as soon as possible and every three days until the testing results in no new positive COVID-19 individuals for 14 days. If the program site identifies that the resident or staff member’s first exposure occurred less than 2 days ago, then they should wait to test until 2 days after any exposure if the exposure date is known.

“Close contact” is defined as being less than 6 feet from a person who has tested positive for COVID-19 for about 15 minutes **while that person was either symptomatic in the 48 hours prior to illness onset or specimen collection, or, if the close contact is within 10 days of being symptomatic or within 10 days of when the positive sample was collected.** Close contact also includes having direct contact with infectious secretions of a confirmed or clinically diagnosed COVID-19 case (e.g., being coughed on) while not wearing recommended personal protective equipment or PPE (e.g., gown, gloves, facemask, eye protection).

For additional guidance on staff and residents who had close contact and require testing, please consult the DPH Epidemiology line at 617-983-6800.

## Previously Positive Staff and Residents

Individuals previously diagnosed with COVID-19 infection confirmed by diagnostic testing may continue to have PCR detection of viral RNA for many weeks. This does not correlate with the presence or transmissibility of live virus. Due to recent evidence of local transmission of variants of concern, and limited data of the effectiveness of natural immunity from a prior infection, individuals more than 3 months from the date of original infection should now be included in surveillance testing.

Accordingly, for the purposes of the surveillance testing program, recovered or previously COVID-19 positive staff less than 3 months from the date of original infection do not need to be re-tested and will not be included as part of total staff. Additionally, it is clinically recommended for individuals previously diagnosed with COVID-19 to be retested under the following circumstances:

* Individuals who were previously diagnosed with COVID-19, and who develop clinically compatible symptoms, should be retested if they are more than 3 months past the date of original infection. If testing is positive, the patient must be isolated and considered to be possibly re-infected. Consult the DPH epidemiologist for guidance.
* Individuals who were previously diagnosed with COVID-19 and who are identified as a close contact of a confirmed case should be retested and subject to quarantine (if not up to date with COVID-19 vaccines) if they are more than 3 months from their date of original infection. It may be appropriate to allow these individuals to quarantine in place.

# **Appendix A**

Definition of Covered Programs

For the purposes of this guidance, “Covered Programs” include programs that meet the criteria established in one or more of the following three (3) categories:

1. Social service programs, as defined under MGL Chapter 118E Section 8A, that provide residential services at rates established under one or more of the following regulations:

* **101 CMR 346:00**: Rates for Certain Substance-Related and Addictive Disorders Programs
  + Inpatient Services, Residential Services and Triage, Engagement and Assessment Services only
* **101 CMR 411:00**: Rates for Certain Placement, Support, and Shared Living Services
* **101 CMR 412:00**: Rates for Family Transitional Support Services
* **101 CMR 413:00**: Payments for Youth Intermediate-Term Stabilization Services
  + Staff Secure Residential Detention Programs, Staff Secure Residential Treatment Programs, Staff Secure Residential Revocation Programs, and Independent Living Residential Programs with clinical services
  + Caring Together Residential Placement Services, Child Specific Residential Placement Contracts, and Alternative to Lockup Residential Placement Services
* **101 CMR 414:00**: Rates for Family Stabilization Services
  + Site-based Respite only
* **101 CMR 418:00**: Payments for Youth Short-Term Stabilization and Emergency Placement Services
* **101 CMR 420.00**: Rates for Adult Long-Term Residential Services
* **101 CMR 421.00**: Rates for Adult Housing and Community Support Services
  + Safe Haven and Dual Diagnosis Shelter rates only
* **101 CMR 426.00**: Rates for Certain Adult Community Mental Health Services
  + Supervised Group Living Environments, Supported Independent Environments and Intensive Group Living Environment Services only
* **101 CMR 430.00**: Rates for Program of Assertive Community Treatment Services
  + Forensic GLE rate only
* **101 CMR 431.00**: Rates for Certain Respite Services

1. The following Veteran’s shelters (parentheses list the provider’s associate vendor code):

* Soldier On (VC6000180388)
* Veterans Homestead Inc (VC6000179167)
* Vets Inc (VC6000175956)
* Vietnam Veterans Workshop (VC6000173601)
* Montachusetts Veterans Outreach Center (VC6000169663)
* Habitat Plus, Inc (VC6000227615)
* Veterans Northeast Outreach Center, Inc (VC6000170820)
* Southeastern Mass Veterans Housing Program (VC6000210291)
* Cape & Islands Veterans Outreach Center (VC6000227372)
* Pine Street Inn (VC6000162415 )
* Billingual Veterans Outreach Center (VC6000227405)

1. MA Approved Private Special Education Schools that provide residential services to students and are approved by the Department of Elementary and Secondary Education (DESE) under 603 CMR 28.09. Eligible organizations that operate one or more of these programs are listed below.

* Amego
* Archway, Inc.
* Boston Higashi School
* Brandon Residential Treatment Center
* Cardinal Cushing School & Training Ctr.
* Cotting School, Inc.
* Crystal Springs, Inc.
* Devereux Foundation of Mass., Inc.
* Dr. Franklin Perkins School, Inc.
* Evergreen Center, Inc. - Milford
* F. L. Chamberlain School, Inc.
* Fall River Deaconess, Inc.
* Hillcrest Educational Centers, Inc. - Pittsfield
* Home for Little Wanderers
* Italian Home for Children, Inc.
* Judge Rotenberg Educational Center
* Justice Resource Institute
* Landmark Foundation
* Latham Centers, Inc.
* League School of Boston
* Learning Ctr. for the Deaf - Framingham
* MAB Community Services
* May Institute
* McAuley Nazareth Home for Boys
* Melmark Home, Inc.
* New England Center for Children - Southborough
* Perkins School for the Blind
* Protestant Guild for Human Services/DBA The Guild for Human Services
* Riverview School
* Saint Ann's Home, Inc.
* Seven Hills Foundation, Inc.
* Stevens Children's Home
* Walker, Inc.
* Wayside Youth and Family Support Network
* Whitney Academy, Inc

If you believe you are an eligible MA Approved Private Special Education School that providers residential services approved by DESE that is not on the list above, contact [Jannelle.L.Roberts@mass.gov](mailto:Jannelle.L.Roberts@mass.gov) to inquire about your eligibility status.