From: Licensing [mailto:DSS_LICENSING@LISTSERV.COV.VIRGINIA.GOV] **On Behalf Of** Williams, Edwina (VDSS)
Sent: Monday, November 17, 2014 3:23 PM
To: DSS_Licensing
Subject: BLOOD GLUCOSE MONITORING UPDATE FOR PROVIDERS

This file is being sent to providers of assisted living facilities from the Virginia Department of Social Services Email Distribution Service.

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BLOOD GLUCOSE MONITORING UPDATE FOR PROVIDERS

The Division continues to identify infection control breaches during blood glucose monitoring while performing inspections. When this occurs, the Division must contact the Healthcare Acquired Infection team within the Virginia Department of Health for assessment, guidance and training, and possible testing of residents and staff. This process can be emotionally distressing for all involved and can result in extra expense for the resident and potentially the facility, in addition to the risk of infection from exposure to disease.

In our continued efforts to improve practice in the state to protect vulnerable residents and staff in our facilities, we are issuing this guidance for providers. Please ensure that you are compliant with these practices immediately if you have not already done so. Your infection control policies and procedures should be updated to incorporate these guidelines. Inspectors will be citing violations identified during inspections for non-compliance in any of these areas beginning January 1, 2015.

- To ensure that everyone is clear on current acceptable practice, we are re-issuing the guidance from the CDC. In summary, ***the only time multiuse fingerstick devices may be used is if the resident is totally independent in all aspects of BGM and no assistance is provided by staff. In all other situations single use, auto-retractable disposable fingerstick devices must be used.*** The current CDC recommendations were incorporated verbatim into the registered medication aide curriculum in May 2013.

- Any multi-use fingerstick device (penlet) used by ***independent*** residents should be clearly labeled with the resident's name. All glucometers in the facility should be labeled with resident names in addition to the name labels on the outside of the kits. In other words, each piece of resident equipment including the storage case must be labeled with a resident name.

- "Whenever possible, blood glucose meters should **not** be shared. If they must be shared, the device should be cleaned and disinfected after every use, per manufacturer's instructions. If the manufacturer does not specify how the device should be cleaned and disinfected then it should not be shared." (Copied from http://www.cdc.gov/injectionsafety/blood-glucose-monitoring.html, 10/10/14) It is important to note that soap and water do not disinfect; either an approved EPA disinfectant or a 1:10 bleach solution prepared daily may be used to disinfect glucometers.

Additionally, OSHA regulations require employers to have a bloodborne pathogen exposure control plan (all ALFs fall under this federal regulation) which includes safety controls for equipment such as needles and sharps. Every ALF administrator should review this regulation to ensure current compliance. OSHA regulations and related material can be found on the government website at the following address: www.osha.gov/SLTC/bloodbornepathogens/index.html

We have attached the original CDC guidance and the information for obtaining single use, auto-retractable disposable fingerstick devices for Medicaid recipients and residents with other insurance for your convenience. Please visit the public website for additional information that we've posted for your reference. You may contact your inspector or our medical health consultants for any questions and concerns you might have.

Thank you for your prompt attention to this matter.

Lynne Williams, Division Director
Division of Licensing Programs
Virginia Department of Social Services

CDC CLINICAL REMINDER

Use of Fingerstick Devices on More than One Person Poses Risk for Transmitting Bloodborne Pathogens

Summary: The Centers for Disease Control and Prevention (CDC) has become increasingly concerned about the risks for transmitting hepatitis B virus (HBV) and other bloodborne pathogens to persons undergoing fingerstick procedures for blood sampling -- for instance, persons with diabetes who require assistance monitoring their blood glucose levels. Reports of HBV infection outbreaks linked to diabetes care have been increasing[1,2,3]. This notice serves as a reminder that fingerstick devices should never be used for more than one person.

Background

Fingerstick devices are devices that are used to prick the skin and obtain drops of blood for testing. There are two main types of fingerstick devices: those that are designed for reuse on a single person and those that are disposable and for single-use.

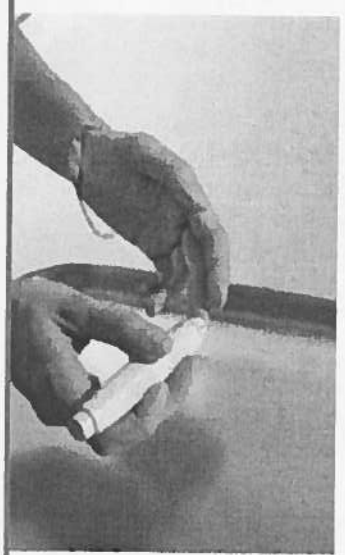

Figure 1: Reusable fingerstick devices*

- **Reusable Devices:** These devices often resemble a pen and have the means to remove and replace the lancet after each use, allowing the device to be used more than once (see **Figure 1**). Due to difficulties with cleaning and disinfection after use and their link to numerous outbreaks, CDC recommends that these devices never be used for more than one person. If these devices are used, it should only be by individual persons using these devices for self-monitoring of blood glucose.

- **Single-use, auto-disabling fingerstick devices:** These are devices that are disposable and prevent reuse through an auto-disabling feature (see **Figure 2**). In settings where assisted monitoring of blood glucose is performed, single-use, auto-disabling fingerstick devices should be used.

Figure 2: Single-use, disposable fingerstick devices*

The shared use of fingerstick devices is one of the common root causes of exposure and infection in settings such as long-term care (LTC) facilities, where multiple persons require assistance with blood glucose monitoring. Risk for transmission of bloodborne pathogens is not limited to LTC settings but can exist anywhere multiple persons are undergoing fingerstick procedures for blood sampling. For example, at a health fair in New Mexico earlier this year, dozens of attendees were potentially exposed to bloodborne pathogens when fingerstick devices were reused to conduct diabetes screening.

Recommendations

Anyone performing fingerstick procedures should review the following recommendations to ensure that they are not placing persons in their care at risk for infection.

- Fingerstick devices should **never** be used for more than one person.
- Auto-disabling **single-use** fingerstick devices should be used for assisted monitoring of blood glucose.

These recommendations apply not only to licensed healthcare facilities but also to any setting where fingerstick procedures are performed, including assisted living or residential care facilities, skilled nursing facilities, clinics, health fairs, shelters, detention facilities, senior centers, schools, and camps. Protection from infections, including bloodborne pathogens, is a basic requirement and expectation anywhere healthcare is provided.

Additional information is available at:

http://www.cdc.gov/injectionsafety/blood-glucose-monitoring.html

http://www.cdc.gov/hepatitis/Settings/GlucoseMonitoring.htm

http://www.fda.gov/MedicalDevices/Safety/AlertsandNotices/ucm224025.htm

References

1. Centers for Disease Control and Prevention. Transmission of hepatitis B virus among persons undergoing blood glucose monitoring in long-term-care facilities -- Mississippi, North Carolina, and Los Angeles County, California, 2003-2004. MMWR 2005;54:220-223.
2. Patel AS, White-Comstock MB, Woolard D, Perz JF. Infection Control Practices in Assisted Living Facilities: A Response to Hepatitis B Virus Infection Outbreaks. ICHE 2009;30(3):209-214.
3. Thompson ND, Perz JF. Eliminating the Blood: Ongoing Outbreaks of Hepatitis B Virus Infection and the Need for Innovative Glucose Monitoring Technologies. J Diabetes Sci Technol 2009;3(2):283-288

PAYMENT INFORMATION FOR BGM

In consultation with Department of Medical Assistance Services staff, we are able to provide the following guidance related to Medicaid coverage criteria for the auto-retractable safety lancets:

All Medicaid recipients residing in assisted living facilities (ALF) should have their own supplies ordered through a durable medical equipment (DME) company, as they would if living at home. If an ALF is assisting the resident to obtain supplies and wants to use the same DME company for all their recipients that is ok as long as the resident has no objections. However, each recipient should have his own supplies based on his individual needs.

The ALF should let the DME company know what supplies are needed and what quantities based on frequency of use. For example, the ALF should notify the DME that the recipient's blood sugar is tested 4 x per day. That way the DME provider can take that number and determine how many will be supplied per month.

The DME company will need to get a certificate of medical necessity (CMN) which the doctor will sign. The DME company should know how to take care of all of the paper work and documentation requirements.

If the recipient has a primary insurance, the DME will bill the primary insurance first. If the primary insurance does not cover an item but Medicaid does, in this case single use lancets, the DME company will then bill Medicaid. If the DME company is not sure how to do this or has questions they can contact the Department of Medical Assistance Services (DMAS).

For Medicare, since we know that Medicare does not currently cover single use lancets, the DME provider does not have to bill Medicare for the denial they can attached a short letter to the claim stating they know this item is non-covered by Medicare.

If anyone needs additional assistance with this process, please contact the one of the following DMAS staff members:

Elizabeth Flaherty, RN, Healthcare Compliance Specialist II, Long-Term Care Division at 804-786-7953

Barbara Seymour, Healthcare Compliance Specialist II, Long-Term Care Division at 804-786-1835

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Several of the distribution companies who were providing auto-retractable safety lancets to private pay individuals exhausted their supplies, raised prices significantly in response to increasing demand or simply no longer deal directly with the consumers. Families in one locality did the legwork to locate a supplier who had adequate/acceptable stock and good prices. While we are not endorsing this, or any other specific provider, we are supplying the company information for individuals and/or facilities who may wish to follow-up for themselves:

Diabetic Health and Wellness

Website link http://diabetichealthandwellness.com/

phone # 1-800-683-9568

We sincerely hope that this information helps to alleviate the difficulties some of you have had in transitioning to the latest infection control safety guidelines for blood glucose monitoring (copy attached).