

## INTRODUCTION

Medicare is the nation's health insurance program for persons 65 years and over and for persons younger than 65 years who have a qualifying disability. The Medicare Current Beneficiary Survey (MCBS) is a continuous, multi-purpose longitudinal survey covering a representative national sample of the Medicare population. Interviews are usually conducted in-person using computer-assisted personal interviewing (CAPI); however, conducting interviews by phone is also permitted on the MCBS and has been since its origin. Sponsored by the Centers for Medicare & Medicaid Services (CMS), the MCBS primarily focuses on economic and beneficiary topics including health care use and health care access barriers, health care expenditures, and factors that affect health care utilization. As a part of this focus, the MCBS collects a variety of information about the beneficiary, including demographic characteristics, health status and functioning, access to care, insurance coverage and out of pocket expenses, financial resources, and potential family support. The MCBS collects this information in three data collection periods, or rounds, per year. Over the years, data from the MCBS have been used to inform many advancements, including the creation of new benefits such as Medicare's Part D prescription drug benefit.

On January 31, 2020, the Health and Human Services (HHS) Secretary determined that a Public Health Emergency existed for the United States to aid the nation's healthcare community in responding to the novel "severe acute respiratory syndrome coronavirus 2" ("SARS-CoV-2") virus and the disease it causes, "coronavirus disease 2019" ("COVID-19"); this determination was most recently renewed on January 21, 2021.<sup>1</sup> Older people and people of all ages with severe chronic medical conditions — like heart disease, lung disease and diabetes, for example — seem to be at higher risk of developing serious COVID-19 illness.<sup>2</sup> With the emergence of the COVID-19 pandemic in the U.S., CMS was uniquely positioned to collect timely and vital information on how the pandemic was impacting the Medicare population by utilizing the MCBS.

CMS took advantage of the MCBS panel design to assess and understand the COVID-19 pandemic by planning a series of rapid response surveys as a supplement to the main MCBS. The first supplement was administered during the regular production cycle of Summer 2020 (Round 87) to existing MCBS sampled beneficiaries who were living in the community as a test of the COVID-19 rapid response protocol. After a successful Summer 2020 Community Supplement, CMS administered the COVID-19 Fall 2020 Supplement during the regular production cycle of Fall 2020 (Round 88) and the COVID-19 Winter 2021 Supplement during the regular production cycle of Winter 2021 (Round 89); one questionnaire was administered to existing MCBS sampled beneficiaries who were living in the community and another, for the first

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<sup>1</sup> Public Health Emergency Declarations. U.S. Department of Health and Human Services. <https://www.phe.gov/emergency/news/healthactions/phe/Pages/default.aspx>.

<sup>2</sup> Garg S, Kim L, Whitaker M, et al. Hospitalization Rates and Characteristics of Patients Hospitalized with Laboratory-Confirmed Coronavirus Disease 2019 — COVID-NET, 14 States, March 1–30, 2020. *MMWR Morb Mortal Wkly Rep* 2020; 69:458–464. DOI: <http://dx.doi.org/10.15585/mmwr.mm6915e3>.

time in Fall 2020, to facility staff (i.e., Facility respondents) about beneficiaries living in a facility.

During Winter 2021, the COVID-19 Community Supplement questionnaire was also administered to a separate sample of Medicare beneficiaries aligned with a provider that participates in the Next Generation Accountable Care Organization (NGACO) Model.

After Winter 2021, a subset of the COVID-19 Community Supplement items will be integrated into the main MCBS questionnaire instrument starting in Summer 2021 (Round 90). The COVID-19 Facility Supplement will continue to be fielded within the main MCBS Facility instrument (see Questionnaires: Facility COVID-19 Supplement for additional details on this supplement).

Exhibit 1 shows the PDF specifications now available for the COVID-19 Winter 2021 Supplement on the MCBS website at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/MCBS/Questionnaires>.

The MCBS COVID-19 Winter 2021 Supplement Questionnaire User's Guide is intended to accompany the questionnaire specifications. This document offers a publically available resource, which explains the COVID-19 Winter 2021 Supplement. For resources about MCBS data products, including data from the COVID-19 Winter 2021 Supplement, users can view documentation for each data year on the MCBS website at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/MCBS/Codebooks>.

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**Exhibit 1:** COVID-19 Winter 2021 Supplement Specifications

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<b>Component</b>	<b>Supplement Name</b>	<b>PDF Section File Name</b>
Community	COVID-19 Winter 2021 Community Supplement	MCBS_COVID_Com_Supp_Winter2021
Facility	COVID-19 Winter 2021 Facility Supplement	MCBS_COVID_Fac_Supp_Winter2021

MCBS Questionnaire specifications for the main MCBS Community and Facility instruments are publically available on the MCBS website at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/MCBS/Questionnaires>.

## WHAT'S NEW FOR THE QUESTIONNAIRE IN WINTER 2021?

Below, we highlight updates made to the COVID-19 Supplement in Winter 2021 when comparing to the Fall 2020 COVID-19 Supplement.

### Community Questionnaire

Changes implemented for Winter 2021 included updates to the survey's reference period, modifications to question text, and the removal and addition of items to align with other federal surveys as well as changes in the COVID-19 pandemic.

#### *General*

- The reference period throughout the survey was updated from "Since July 1, 2020..." to "Since November 1, 2020..."

#### *Section-Specific Changes*

##### **Forgone Health Care as a Result of the Pandemic**

The series on forgone care was updated to include "Mental Health Care" at screen NOCARTY2 as a type of care that beneficiaries may have deferred as a result of the pandemic.

##### **COVID-19 Vaccination**

Working with the Centers for Disease Control and Prevention (CDC), questions about presumptive and actual COVID-19 vaccine uptake were added to the COVID-19 Community Supplement in Fall 2020, but questions about vaccine uptake were not administered because a vaccine was not yet available. The original intent was that the items on presumptive vaccine uptake (GETVAC and NOGETVAC) would be asked in lieu of a publically available vaccine whereas the series on vaccine utilization (CVDVAC, VACNUM, VACDAT1, VACDAT2, NOVACRSN) would be asked once a vaccine was released for public use.

The U.S. Food and Drug Administration (FDA) issued an Emergency Use Authorization (EUA) for the use of a COVID-19 vaccine in December 2020.<sup>3</sup> Given that the U.S. supply of COVID-19 vaccines will be limited at first, the CDC recommends a phased distribution approach based on age, place of residence, employment, and risk factors.<sup>4</sup> For this reason, the Winter 2021 Supplement asked about both vaccination utilization (CVDVAC) and presumptive vaccine uptake (PRSUMVAC).

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<sup>3</sup> "FDA Takes Key Action to Fight Against COVID-19 by Issuing Emergency Use Authorization for First COVID-19 Vaccine". U.S. Food and Drug Administration. December 11, 2020. <https://www.fda.gov/news-events/press-announcements/fda-takes-key-action-fight-against-covid-19-issuing-emergency-use-authorization-first-covid-19>.

<sup>4</sup> "Vaccine Rollout Recommendations". U.S. Centers for Disease Control and Prevention. February 3, 2021. <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations.html>.

The vaccination series underwent minor question text and help text revisions to reflect the dosage requirements available to the public. In addition, NOVCRNOS was added to the series to collect other, specify responses to NOVACRSN.

## Facility Instrument

Changes implemented for Winter 2021 included updates to the reference period, modifications to question text, and the addition of items to align with changes in the COVID-19 pandemic.

### *General*

- On-screen interviewer help text was added throughout the series which ask about suspension of in-person health services and availability of telehealth services, to help interviewers and respondents distinguish between services offered inside and outside the facility.
- The reference period for items on utilization of COVID-19 testing and COVID-19 care was updated from "Since July 1, 2020..." to Date of Last Interview (DOI) for beneficiaries residing in the same facility as the previous interview and Date of Admission (DOA) for beneficiaries residing in a new facility since the time of the previous interview. This change aligns the reference period for the COVID-19 utilization items with the reference period of similar utilization items within the main MCBS Facility instrument.

### *Section-Specific Changes*

#### **Availability of Telemedicine Services Inside and Outside of the Facility**

Introductory text and on-screen interviewer help text were added to provide additional guidance to interviewers at items asking about telehealth services offered before and due to the COVID-19 pandemic (TELINTRO and TELCOVID).

#### **Mental Health Series**

Two items in the series asking about mental health services offered by the facility had question text updates to clarify the reference period (MENTFAC) and question intent (FACMHOTH).

Additionally, on-screen interviewer help text was added to items SUSPCOV and MTELESER to remind interviewers that these items were referencing the suspension of, and the shift to an online platform for, mental health services collected at MENTFAC.

#### **COVID-19 Vaccination**

Working with the CDC, a series of questions on COVID-19 vaccine utilization were added to the Fall 2020 Supplement specifications (CVDVAC1, CDVACNUM, VAC1MM, VAC1YY, VAC2MM, and VAC2YY) but were not administered during the COVID-19 Fall 2020 Facility Supplement because a vaccine was not yet available. For the COVID-19 Winter 2021 Facility Supplement, the series

on vaccine utilization was asked because the FDA issued a EUA for the use of a COVID-19 vaccine in December 2020.

The vaccination items underwent minor question text and help text revisions to reflect the dosage requirements available to the public.

## QUESTIONNAIRES

The MCBS COVID-19 Winter 2021 Supplement features two sets of items (Community and Facility), administered by telephone to current MCBS respondents. The questions in the COVID-19 Winter 2021 Supplement closely align with those used in the COVID-19 Fall 2020 Supplement. They were adapted from a range of sources and were intended to align with other federal surveys on similar topics. The beneficiary's residence status determined which supplement was used and how it was administered.

- COVID-19 Community Supplement: Survey of beneficiaries living in the community at the time of the interview (i.e., their residence or a household). The 15-minute survey collected data on the impact of the COVID-19 pandemic on Medicare beneficiaries' lives. The Community COVID-19 Supplement was administered as a standalone instrument by telephone from March to April 2021.
- COVID-19 Facility Supplement: Survey of beneficiaries living in facilities such as long-term care nursing homes or other institutions at the time of the interview. The Facility COVID-19 Supplement was administered as part of the Winter 2021 Round 89 Facility instrument. Interviewers conducted the Facility interview with staff members located at the facility (i.e., Facility respondents) who are knowledgeable about the beneficiary's health status and health care utilization; beneficiaries were not interviewed. The Facility COVID-19 Supplement collected data on the impact of the COVID-19 pandemic on long-term care facilities and Medicare beneficiaries.

The sections that follow provides an overview of the COVID-19 Winter 2021 Community and Facility Supplements.

### Community COVID-19 Supplement

The next section provides an overview of the COVID-19 Winter 2021 Community Supplement eligibility criteria and questionnaire content.

#### *Eligibility*

To be eligible for the COVID-19 Winter 2021 Community Supplement, a beneficiary must have been enrolled in Medicare in 2020 and still be alive, living in the community, and eligible and enrolled in Medicare at the time of their COVID-19 Winter 2021 Community Supplement interview.

For more information on the main MCBS eligibility criteria, please see the *Survey File Data User's Guide* at: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/MCBS/Codebooks>.

## *Questionnaire Content*

The topics measured by the COVID-19 Winter 2021 Community Supplement were:

- Availability and Use of Telemedicine
- Access to Computers and Internet
- Forgone Health Care as a Result of the Pandemic
- Autoimmune Disease Prevalence
- Utilization of COVID-19 Testing
- COVID-19 Care
- COVID-19 Vaccination
- Preventive Measures
- Sources of COVID-19 Information
- Knowledge and Perceptions of COVID-19
- Ability to Access Basic Needs During the Pandemic
- Impact to Financial and Mental Health

### **Availability and Use of Telemedicine**

During the COVID-19 pandemic, Medicare temporarily expanded coverage of telemedicine to help beneficiaries access a wider range of services from providers without having to travel to a healthcare office.<sup>5</sup> To measure the impacts of this change in policy, the COVID-19 Winter 2021 Community Supplement included questions on availability of telemedicine services before and during the pandemic and the utilization of telemedicine services during the pandemic. These questions were adapted from items on the National Center for Health Statistics (NCHS) COVID-19 Research and Development Survey (RANDS).<sup>6</sup>

### **Access to Computers and Internet**

To inform research questions pertaining to access to telemedicine services, the COVID-19 Winter 2021 Community Supplement also contained a series of items on the use of computers, smartphones, tablets, videoconferencing, and access to the internet. These items were sourced

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<sup>5</sup> "Medicare & Coronavirus" U.S. Centers for Medicare & Medicaid Services. Accessed on August 5, 2020. <https://www.medicare.gov/medicare-coronavirus>

<sup>6</sup> "COVID-19 Research and Development Survey (RANDS)" National Center for Health Statistics. 2020. <https://www.cdc.gov/nchs/covid19/rands.htm>

from the Census Bureau's American Community Survey (ACS)<sup>7</sup> and November 2019 Current Population Survey (CPS) Computer and Internet Use Supplement.<sup>8</sup>

### **Forgone Health Care as a Result of the Pandemic**

The COVID-19 Winter 2021 Community Supplement contained a series of items about medical care that was needed for something other than COVID-19 but was not obtained because of the pandemic. The Community Supplement asked if any care was forgone, what type of care it was, and for each type of care forgone, the Community Supplement asked whether it was the beneficiary or provider who made the decision to forgo care, and why the decision to forgo care was made. These items were adapted from the NCHS RANDS survey.

### **Autoimmune Disease Prevalence**

Early findings show that certain preexisting medical conditions and autoimmune diseases make a person more vulnerable to contracting COVID-19.<sup>9</sup> The main MCBS questionnaire already collects information on prevalence of chronic conditions but does not ask about diagnosis of autoimmune diseases. Therefore, the COVID-19 Winter 2021 Community Supplement asked two questions about autoimmune diseases sourced from the NCHS RANDS survey.

### **Utilization of COVID-19 Testing**

The COVID-19 Winter 2021 Community Supplement included two sets of items pertaining to the utilization of COVID-19 testing, one on the utilization of viral testing and one on the utilization of antibody testing. For each type of test, respondents were asked about utilization of testing, and if a test was received are asked about the result of the test, wait time for results, and portion of the cost that was paid out-of-pocket for the test. These items were also included as a part of the COVID-19 Winter 2021 Facility Supplement. These items were sourced from the NCHS RANDS survey and National Health Interview Survey (NHIS).<sup>10</sup>

### **COVID-19 Care**

For those who had a probable or confirmed diagnosis of COVID-19, the Winter 2021 Community Supplement included items related to utilization of medical care and hospitalization for COVID-19, severity of coronavirus symptoms, and persistent health effects of the virus. These items were adapted from the NCHS RANDS survey.

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<sup>7</sup> "2020 American Community Survey" U.S. Census Bureau. Accessed May, 2020.

<https://www2.census.gov/programs-surveys/acs/methodology/questionnaires/2020/quest20.pdf>

<sup>8</sup> "November 2019 Current Population Survey Computer and Internet Use Supplement" U.S. Census Bureau. Accessed May, 2020. <https://www2.census.gov/programs-surveys/cps/techdocs/cpsnov19.pdf>

<sup>9</sup> "Certain Medical Conditions and Risk for Severe COVID-19 Illness" U.S. Centers for Disease Control and Prevention. Last modified July 30, 2020. [https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html)

<sup>10</sup> "National Health Interview Survey" U.S. Centers for Disease Control and Prevention. <https://www.cdc.gov/nchs/nhis/data-questionnaires-documentation.htm>

## COVID-19 Vaccination

The COVID-19 Winter 2021 Community Supplement included a series on COVID-19 vaccine utilization and, for those who hadn't received a vaccine dose yet, presumptive vaccine uptake. The series asked if a vaccination had been received, how many doses had been received, the month and year of the vaccination doses received. If no vaccination has been received, the respondent was asked how likely they would be to get a COVID-19 vaccination once it were available to them and the reasons why they haven't received a vaccination to date. These questions used a reference period of "Since December 2020..." to align with the date the first COVID-19 vaccinations were authorized for emergency use by the U.S. Food and Drug Administration.<sup>11</sup> These items were also included as a part of the COVID-19 Winter 2021 Facility Supplement.

## Preventive Measures

The COVID-19 Winter 2021 Community Supplement included items on which preventive measures were taken to avoid exposure to the virus. The survey asked about 16 different measures that were recommended by the CDC and public health community during the pandemic, including washing hands, coughing or sneezing into a tissue, avoiding large groups of people, wearing facemasks, and purchasing extra supplies such as food, cleaning supplies, and prescriptions. These items were adapted from the NCHS RANDS survey and other sources.<sup>12</sup>

## Sources of COVID-19 Information

The COVID-19 Winter 2021 Community Supplement included items relating to the media or other types of sources the beneficiary relies on for information about the pandemic. These items were sourced from the March 2020 AP-NORC Center Poll.<sup>13</sup>

## Knowledge and Perceptions of COVID-19

The COVID-19 Winter 2021 Community Supplement included a series measuring knowledge of public health messaging about the virus. The survey asked about knowledge of guidance related to frequent hand washing, healthy people wearing facemasks in public, avoiding gatherings with large numbers of people, sheltering in place, and seeking medical attention for trouble breathing. These items were sourced from the March 2020 AP-NORC Center Poll.

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<sup>11</sup> "FDA Takes Key Action to Fight Against COVID-19 by Issuing Emergency Use Authorization for First COVID-19 Vaccine". U.S. Food and Drug Administration. December 11, 2020. <https://www.fda.gov/news-events/press-announcements/fda-takes-key-action-fight-against-covid-19-issuing-emergency-use-authorization-first-covid-19>.

<sup>12</sup> "How to Protect Yourself & Others" U.S. Centers for Disease Control and Prevention. Accessed May, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

<sup>13</sup> "March 2020 Poll AP-NORC Center Poll" The Associated Press-NORC Center for Public Affairs Research. Accessed May, 2020. [https://apnorc.org/wp-content/uploads/2020/04/march2020\\_topline.pdf](https://apnorc.org/wp-content/uploads/2020/04/march2020_topline.pdf)

The Supplement also included a series on the perceived severity of the coronavirus—both generally and as compared to the flu. These items were sourced from the University of California Irvine’s COVID-19 Outbreak Study.<sup>14</sup>

### **Ability to Access Basic Needs During the Pandemic**

The COVID-19 Winter 2021 Community Supplement included a series of items measuring disruption to basic needs caused by the pandemic, including ability to pay rent or mortgage and access to medication, health care, food, household supplies, and face masks. These items were adapted from the NCHS RANDS survey.

### **Impact to Financial and Mental Health**

The COVID-19 Winter 2021 Community Supplement included a series on impacts of the outbreak, including financial security, and feelings of stress or anxiety, loneliness or sadness, and social connection. These items were adapted from the NCHS RANDS survey.

## **Facility COVID-19 Supplement**

The COVID-19 Winter 2021 Facility Supplement was administered as part of the Winter 2021 Round 89 Facility instrument. The COVID-19 Winter 2021 Facility Supplement included several facility-level measures to assess key ways in which COVID-19 has impacted facilities that serve Medicare beneficiaries. There were also several beneficiary-level topics, similar to the COVID-19 Winter 2021 Community Supplement. Facility data collection was conducted with facility staff knowledgeable about the facility’s protocols and the beneficiary’s health status.

### *Eligibility*

To be eligible for the COVID-19 Winter 2021 Facility Supplement, a beneficiary must have been eligible for the Winter 2021 Round 89 Facility interview. Facility-level measures were collected for persons alive or deceased, while beneficiary-level measures were collected only for persons who were alive at the time of interview.

For more information on the main MCBS eligibility criteria, please see the *Survey File Data User’s Guide* at: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/MCBS/Codebooks>.

### *Instrument Content*

The topics measured by the COVID-19 Winter 2021 Facility Supplement included:

- Facility-level COVID-19 topics:
  - ▶ Suspension of In-Person Health Services Inside and Outside of the Facility
  - ▶ Availability of Telemedicine Services Inside and Outside of the Facility

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<sup>14</sup> Roxanne Cohen Silver and Alison Holman. “COVID-19 Outbreak Study”. March-April 2020. University of California Irvine.

- ▶ Facility Measures to Prevent and Control the Spread of COVID-19
- ▶ Facility Staffing Impact due to COVID-19
- ▶ Mental Health Services
- ▶ Social and Recreational Activities
- Beneficiary-level COVID-19 topics:
  - ▶ Utilization of COVID-19 Testing
  - ▶ COVID-19 Care
  - ▶ COVID-19 Vaccination
  - ▶ Recent Mood

### **Suspension of In-Person Health Services Inside and Outside of the Facility**

The COVID-19 Winter 2021 Facility Supplement contained a series of items about suspension of health care services, both inside and outside the facility, due to the COVID-19 pandemic. To align with services asked about in the Use of Health Services (US) section in the main MCBS Facility instrument, the Facility Supplement asked if primary care visits, specialty care visits, dental visits, mental health visits, podiatry visits, educational or habilitational services, or any other types of visits were suspended due to the COVID-19 pandemic.

### **Availability of Telemedicine Services Inside and Outside of the Facility**

During the COVID-19 pandemic, Medicare temporarily expanded coverage of telemedicine to help beneficiaries access a wider range of services from providers without having to travel to a healthcare office; this expansion of coverage included beneficiaries residing in any healthcare facility.<sup>15</sup> To measure the impacts of this change in policy, the COVID-19 Winter 2021 Facility Supplement included questions on the availability of telemedicine services offered inside and outside the facility before and during the pandemic.

### **Facility Measures to Prevent and Control the Spread of COVID-19**

The COVID-19 Winter 2021 Facility Supplement included items on prevention protocols used within the facility to prevent the spread of coronavirus. The survey asked about required prevention measures for visitors, the facility's monitoring of health care personnel adherence to prevention measures, and coronavirus prevention education to residents. These items were adapted from the CDC's Prevention and Control Assessment Tool for Nursing Homes Preparing for COVID-19.<sup>16</sup> The Facility Supplement also asked about the facility's current policy on the flu and COVID-19 vaccines, for residents and health care personnel. These items were adapted

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<sup>15</sup> "Medicare & Coronavirus" U.S. Centers for Medicare & Medicaid Services. Accessed on August 5, 2020. <https://www.medicare.gov/medicare-coronavirus>

<sup>16</sup> "Infection Prevention and Control Assessment Tool for Nursing Homes Preparing for COVID-19" Centers for Disease Control and Prevention. Accessed on June 25, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/downloads/hcp/assessment-tool-nursing-homes.pdf>

from an internet panel survey for the CDC during the 2017-18 influenza season to provide estimates of influenza vaccination among health care personnel.<sup>17</sup>

### **Facility Staffing Impact due to COVID-19**

The COVID-19 Winter 2021 Facility Supplement included items on how facility staffing was impacted by the COVID-19 pandemic at the time of the interview. The survey asked about whether there was a laboratory-confirmed COVID-19 case within the facility, as well as whether additional health care personnel had been recruited in response to the pandemic.

### **Mental Health Services**

The COVID-19 Winter 2021 Facility Supplement included items asking about mental health services that are offered by the facility, whether these services were suspended due to the pandemic, and whether they had been migrated to an online platform due to the pandemic. These questions were adapted from the 2018 National Survey of Long Term Care Providers.<sup>18</sup>

### **Social and Recreational Activities**

Social isolation among older adults is of heightened concern during the COVID-19 pandemic.<sup>19</sup> For this reason the Facility supplement asked if social and recreational services were offered inside and outside the facility, if these services were suspended due to the pandemic, and whether they had been migrated to an online platform due to the pandemic. These questions were adapted from the 2010 National Survey of Residential Care Facilities Facility Questionnaire.<sup>20</sup>

### **Utilization of COVID-19 Testing**

The COVID-19 Winter 2021 Facility Supplement included items relating to utilization of COVID-19 viral and antibody testing and respective test results (if applicable). The items on utilization of a test and results of the test were sourced from the NCHS RANDS survey and NHIS. These items were also included as a part of the COVID-19 Winter 2021 Community Supplement.

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<sup>17</sup> Clara L. Black et al. "Influenza Vaccination Coverage Among Health Care Personnel — United States, 2017–18 Influenza Season," *MMWR Morb Mortal Wkly Rep*;67 (2018):1050–1054, doi: <http://dx.doi.org/10.15585/mmwr.mm6738a2>.

<sup>18</sup> "National Study of Long-Term Care Providers: 2018 Adult Day Services Center Provider Questionnaire," U.S. Centers for Disease Control and Prevention. <https://www.cdc.gov/nchs/data/nsltcp/2018-NSLTCP-ADSC-Questionnaire-Center.pdf>

<sup>19</sup> Julianne Holt-Lunstad, "The Double Pandemic Of Social Isolation And COVID-19: Cross-Sector Policy Must Address Both," *Health Affairs* (blog), June 22, 2020, <https://www.healthaffairs.org/doi/10.1377/hblog20200609.53823/full/>

<sup>20</sup> "2010 National Survey of Residential Care Facilities (NSRCF) Facility Questionnaire," U.S. Centers for Disease Control and Prevention. [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Questionnaires/nsrcf/2010/2010\\_NSRCF\\_Facility\\_Questionnaire.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Questionnaires/nsrcf/2010/2010_NSRCF_Facility_Questionnaire.pdf)

## COVID-19 Care

The COVID-19 Winter 2021 Facility Supplement included items that asked if the beneficiary received care inside or outside of the facility for COVID-19 and, if so, the type of provider they received care from.

## COVID-19 Vaccination

The COVID-19 Winter 2021 Facility Supplement included a series on COVID-19 vaccine utilization. The series asked if a vaccination had been received, how many doses had been received, and the month and year of the vaccination doses. These questions used a reference period of "Since December 2020..." to align with the date the first COVID-19 vaccinations were authorized for emergency use by the FDA. These items were also included as a part of the COVID-19 Winter 2021 Community Supplement.

## Recent Mood

The Patient Health Questionnaire (PHQ-9), also known as the Resident Mood Interview, was included in the COVID-19 Winter 2021 Facility Supplement which collects information about the beneficiary's mood over the last two weeks, such as whether they felt tired, had a poor appetite or overate, or were easily annoyed. These items were sourced from the Minimum Data Set Resident Assessment and Care Screenings (MDS) form.<sup>21</sup> The PHQ-9 is also collected as part of the Health Status and Functioning Questionnaire (HFQ) in the main MCBS Community questionnaire.

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<sup>21</sup> "Minimum Data Set (MDS) 3.0 for Nursing Homes and Swing Bed Providers," Centers for Medicare & Medicaid Services. <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/NHQIMDS30>