

Education

CDC Announces Guidance on Testing Persons Returning to University and College Campuses



By: [Laura E.B. Hulce](#), [Terri L. Mascherin](#) and [Samantha Smith](#)

In response to unrestrained growth in COVID-19 cases and testing limitations in March 2020, nearly all colleges and universities closed their physical campuses to students and transitioned to online learning. Many universities are eager to reopen their campuses to students and others for some limited in-person activities and classes this fall. In addition to social distancing, cloth masks, and symptom monitoring, the ability to and practice of testing persons for active COVID-19 infection will play an important role in containing the spread of COVID-19 on campus.

On June 30, the Centers for Disease Control and Prevention (CDC) issued guidance on how universities can use viral testing to guard against COVID-19 outbreaks on campus. [Interim Considerations for Institutions of Higher Education Administrators for SARS-CoV-2 Testing](#), CDC (June 30, 2020). The CDC's approach focuses on testing symptomatic students and their close contacts, while relying on other public health measures to minimize asymptomatic and pre-symptomatic transmission. The CDC recommends monitoring students, staff, and faculty for symptoms and referring all persons experiencing COVID-19 symptoms to medical providers who can then determine whether viral testing is necessary. In addition, the CDC recommends testing all close contacts of persons diagnosed with COVID-19 because of the high potential of transmission to those persons.^[1]

In contrast to the CDC's strong preference to test symptomatic persons and close contacts of infected persons, the CDC guidance does not recommend testing all asymptomatic persons or initial testing of persons when they return to campus. The CDC notes no studies have been conducted to show routine testing of asymptomatic persons reduces COVID-19 transmission beyond social distancing, hygiene practices, and cloth masks. The CDC also cautions that testing persons without symptoms or exposure to an infected person is not particularly helpful because the test may yield a false negative result when the virus is in the early stages.

Universities planning to perform broad-based testing of asymptomatic persons should consider the willingness of persons to participate in testing; the availability of tests, personal protective equipment, and health professionals to conduct the tests; the limited usefulness of single administration of tests; and the degree to which students interact with the surrounding community. For universities considering broader testing, the CDC has issued guidance on how to conduct broad testing of asymptomatic individuals in congregate settings. [Performing Broad-Based Testing for SARS-CoV-2 in Congregate Settings](#), CDC (June 27, 2020). In areas with moderate to significant COVID-19 transmission, universities may want to consider routine testing of asymptomatic persons.

The CDC encourages university officials to implement the guidelines in light of their university's needs, size, and location. These guidelines should complement advice from state and local health officials.

Some public health professionals have expressed concerns the Guidance does not provide effective solutions for containing the spread of the virus via asymptomatic carriers. This will be an ongoing concern for colleges and universities because COVID-19 can spread before a person develops symptoms, and published studies report that a significant percentage of people infected with COVID-19, especially those in their teens and twenties—the ages of most college and university students—

never develop symptoms. Monica Gandhi et al., Editorial, [Asymptomatic Transmission, the Achilles' Heel of Current Strategies to Control Covid-19](#), 382 New Eng. J. Med. 2158 (2020). Prior to the CDC issuing its testing guidance, Professor Carl Bergtrom, a professor of Biology at the University of Washington, and Professor Theodore Bergtrom, a professor of Economics at the University of California, Santa Barbara, argued that frequent testing of all students, staff, and faculty is necessary to prevent COVID-19 outbreaks on campus. Carl Bergtrom & Ted Bergtrom, [With Batch Testing, We Can Reopen Colleges and Universities](#).

Routine or reentry testing of asymptomatic persons is costly. Universities may be able to use federal funding from the CARES Act for expenses related to the COVID-19 pandemic, including routine or reentry testing of asymptomatic persons.^[2] However, insurance companies may not reimburse universities for regular testing of asymptomatic persons. Federal guidance interpreting the Families First Coronavirus Response Act states the Act does not require insurance companies to cover routine or reentry testing of asymptomatic persons, testing for public health surveillance, and any other purpose other than individualized diagnosis of COVID-19. [FAQs about Families First Coronavirus Response Act and Coronavirus Aid, Relief, and Economic Security Act Implementation Part 43](#) (June 23, 2020).

In addition to the CDC's guidance on reopening university and college campuses, the CDC has issued guidance on reopening K-12 schools. See [Interim Guidance for Administrators of US K-12 Schools and Child Care Programs](#), CDC (Apr. 10, 2020); [Interim Considerations for K-12 School Administrators for SARS-CoV-2 Testing](#), CDC (June 30, 2020). The Trump Administration has called the CDC's K-12 Guidance "impractical" and "expensive," and encouraged the CDC to alter the K-12 Guidance to facilitate in-person learning. [Remarks by President Trump on Safely Reopening America's Schools](#) (July 7, 2020). CDC Director Robert Redfield has clarified the agency will not alter its guidelines but will issue supplemental guidelines. Jeff Amy & Carole Feldman, [CDC Head Sticking to School-Opening Guides Trump Criticized](#), Associated Press (July 9, 2020). Universities should monitor the CDC's Guidance on reopening universities and colleges for similar changes.

Universities should not rely solely on the CDC's guidelines to develop their protocols for testing upon reopening campuses. The CDC acknowledges these guidelines are broad and leave discretion to individual universities. Universities should also look to local and state guidance for particularized advice on safely reopening campuses. Moreover, the CDC may update testing guidance further as it gains further understanding regarding transmission of the virus.

Conscious of the human, operational and financial strain that coronavirus is placing on businesses and organizations worldwide, Jenner & Block has assembled a multi-disciplinary Task Force to support clients as they navigate the legal and strategic challenges of the COVID-19 / Coronavirus situation.

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[1] The CDC defines a close contact as all persons who were within 6 feet of an infected person for 15 minutes or more beginning 48 hours prior to when the infected person began experiencing symptoms. [Contact Tracing: Frequently Asked Questions](#), CDC (July 3, 2020).

[2] Some state universities plan to use CARES Act funding for surveillance testing. Melissa Brown, [Alabama Allocates Cares Act Funds to Test Public College Students Ahead of Fall Semester](#), Montgomery Observer (June 30, 2020). Other universities, however, are concerned the Trump administration may take the position that universities cannot use CARES Act funds on routine or reentry testing of asymptomatic persons, testing for public health surveillance, or any other purpose

other than individualized diagnosis of COVID-19 because of the CDC's guidance discouraging extensive testing. Gregory S. Schneider & Nick Anderson, [Virginia Universities Propose \\$200 Million Plan for Coronavirus Testing during Upcoming School Year](#), Wash. Post (June 25, 2020).



Contact Us



Laura E.B. Hulce

lhulce@jenner.com | [Download V-Card](#)



Terri L. Mascherin

tmascherin@jenner.com | [Download V-Card](#)



Samantha Smith

samantha.smith@jenner.com | [Download V-Card](#)

[Meet Our Team](#)

Practice Leaders

Ishan K. Bhabha

Co-chair

ibhabha@jenner.com

[Download V-Card](#)

Terri L. Mascherin

Co-chair

tmascherin@jenner.com

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