

# CMS Issues Guidance on Reopening Health Care Facilities

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On June 8, 2020, the Centers for Medicare & Medicaid Services (CMS) issued separate [guidance for reopening facilities for non-emergency care](#) and for patients considering [non-emergency, in-person care](#). These guidance documents are in keeping with CMS's effort to move toward Phase II of the "Guidelines for Opening Up America Again" issued by the White House in April 2020.

## Reopening Non-Emergency Health Care Facilities

CMS published the following guidance for those locations in Phase II of reopening:

- A. Facility Considerations. Health care providers should implement the following with respect to the physical location where non-emergency health care services will be provided:
  - Providers should make available separate areas, waiting rooms, entrances and exits for non-COVID-19 care (NCC) and COVID-19 related care.
  - Implement social distancing that allows for minimum contact between NCC and COVID-19 patients.
  - Maintain low patient volumes.
  - Minimize non-patient visitors and assess all visitors for COVID-19 symptoms. If symptoms are present, prohibit the visitor from entering the facility.
- B. COVID-19 Testing. Facilities reopening to non-emergency care should implement robust testing protocols in keeping with the following:
  - Patients should receive COVID-19 testing 24 hours before a hospital stay or procedure. If not feasible, patients should quarantine for 14 days prior to any hospitalization or procedure.
  - Health care providers should consider the risks vs. benefits of providing non-emergency care to persons testing positive for COVID-19.
  - All staff who work in the NCC care area should be assessed for COVID-19 on a daily basis.
  - Non-patient visitors who exhibit COVID-19 symptoms should be denied entry into the facility and told to quarantine and contact their health care provider.
  - Testing results should be disclosed to the public health authorities in accordance with state requirements.
- C. PPE and Supplies. Facilities are encouraged to follow CDC guidelines regarding PPE protocols, as well as implement the following:
  - Health care providers should wear surgical masks at all times unless the services they provide require use of a N95 respirator.
  - Procedures on the mucous membranes, including the respiratory tract, with a higher risk of aerosol transmission, should be done with great caution, and staff should utilize appropriate respiratory protection such as N95 respirators and face shields. If N95 respirators are needed, they must be used in compliance with protocols that meet provisions of related OSHA standards.

- Patients and visitors should wear cloth face masks at all times, and facilities should make these masks available.
  - Providers should take efforts to preserve PPE, including following guidelines for sanitization and reuse.
- D. Workforce. Providers should provide direct patient services in accordance with the following:
- Facilities should have enough staff available to augment COVID-19 related services as needed, and staffing levels in the community must remain adequate to cover a potential surge in COVID-19 cases.
  - Facilities should screen personnel in accordance with CDC guidelines.
  - Personnel should be screened for COVID-19 on a daily basis. Symptomatic staff should be tested for COVID-19, prohibited from entering the health care facility and follow quarantine protocols.
  - Staff working in NCC areas should not rotate into COVID-19 care areas unless absolutely necessary.
  - Any staff diagnosed with, or suspected of having, COVID-19 should follow the CDC guidance on returning to work.
- E. Sanitation. Facilities should adopt sanitation protocols and standards as follows:
- Maintain an established plan for thorough cleaning and disinfecting prior to using spaces for NCC services.
  - Ensure that equipment used for patients diagnosed positive for COVID-19 are thoroughly decontaminated per CDC recommendations.
  - For management of higher risk patients, the CDC recommends that clinicians take these precautions:
    - Develop a care plan with each patient and patient-specific plans for how to receive unscheduled, urgent care if the need arises, including how to contact the provider 24/7.
    - If possible, provide care remotely (e.g., by telemedicine).
    - Limit major surgical procedures as much as clinically possible.
    - When in-person care is necessary, arrange for patients to minimize exposure through practices such as:
      - limiting entrances with screening protocols;
      - avoiding waiting areas with other patients;
      - waiting in the car until the visit starts;
      - maintaining social distancing;
      - wearing a face mask; and
      - Providers entering areas where at-risk populations are should practice social distancing and follow appropriate CDC guidelines to minimize the risk of infection.

### **Patients Considering Non-Emergency, In-Person Care**

CMS has provided the following guidance for persons seeking NCC services to help balance the risk of contracting COVID-19 with the need to receive non-emergency services:

- Do not postpone necessary preventative care or assessment of ongoing health issues.

- Talk with healthcare providers regarding steps to minimize transmission of COVID-19, as well as any particular health conditions that may make someone at higher risk for contracting COVID-19 or more severe outcomes.
- Consider “virtual” or “telehealth” services where appropriate.
- Discuss with health care providers whether to be tested for COVID-19 prior to an in-person visit and follow all testing and quarantine recommendations prior to receiving services.
- During an in-person appointment, engage in the following:
  - Wear a face mask;
  - Limit the number of people who come to the appointment;
  - Avoid crowded waiting rooms and implement social distancing;
  - Wash hands and use sanitizer frequently; and
  - Participate in all facility health screening.
- High-risk and vulnerable populations should, to the extent possible, stay home, avoid crowds, and self-isolate. If such persons need to be in public, they should practice social distancing by staying a minimum of six feet away from others.

Roetzel’s health care attorneys have established a series of policies and procedures for the reopening of all types of health care facilities. Please contact a Roetzel attorney below for more information on how we can assist you in establishing reopening protocols that meet the specific needs of your unique practice and conform to industry and government guidelines.

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