

# Home Healthcare Agency Preparedness for the Coronavirus

By Lesley R. Arca

Home Healthcare Agencies (“HHAs”) should brace themselves to be at the forefront of treating those most vulnerable to serious complications of the coronavirus: elderly patients and those with serious, chronic medical conditions such as heart disease, diabetes, and lung disease. HHAs will be in a unique position to treat those at-risk of or who have contracted coronavirus since the Centers for Disease Control (“CDC”) has recommended that individuals should stay at home to minimize risk of contracting the virus, patients with coronavirus may be successfully treated at home without hospitalization, and those who are ultimately treated at hospitals for coronavirus may need to be discharged to their homes for further treatment from HHAs.

On March 10, 2020, the CDC released additional guidance effective immediately for all Medicare and Medicaid-participating HHAs, available [here](#). Specifically, the CDC addresses concerns such as how HHAs should:

- Report any suspected or confirmed cases of a staff member or patient having the coronavirus to their HHA clinical manager, and local and state public health official. Reporting to the state public health official is required by law;
- Continue to monitor the CDC website for updates;
- Require their health care staff to put on personal protective equipment (“PPE”) prior to entering the patient’s homes, screen the patient for coronavirus immediately upon arrival in the patient’s home, and discard PPE in an external trash source;
- Advise staff showing symptoms of the coronavirus to stay home from work or, if the health care staff show signs of the coronavirus while on the job, they should stop work, put on a facemask, self-isolate at home, inform the HHA clinical manager regarding with whom the personnel came in contact, and contact and follow local health department recommendations for next steps such as testing and locations for treatment;
- Consider the severity of a patient’s symptoms and whether they are able to follow self-isolation guidelines in considering whether to transfer the patient to a hospital; and
- Encourage staff to stay isolated from their own family members in a separate room and follow infection-prevention and control measures to not place their own families at risk of the coronavirus.

HHAs should also use the CDC’s guidance as an opportunity to review and update their Emergency Preparedness Plan that all Medicare and Medicaid-participating HHAs have been required to have since 2016. As a condition of participation in the Medicare and Medicaid programs, HHAs are required to review their Emergency Preparedness Plan at least annually.

HHAs should pay special attention to making sure the following information is current:

- The triage procedure for seeing and treating patients, especially if local authorities restrict travel;
- That the HHA has current staff contact information and guidance to its staff for receiving notices of an emergency;
- Education plans for patient families on supplies they should keep in the home during coronavirus isolation;
- The location of the HHA's Incident Command Center and alternative location if the HHA administrative team must work remotely;
- Location of emergency/backup supplies, including PPE, for health care staff;
- Assessment of emergency finances to ensure the HHA can continue to operate; and
- Current list of emergency contacts in each county where the HHA provides services, including hospital, fire departments, EMS, insurance companies, county highway departments, and the local and state departments of health.

HHAs should use this time to run at minimum, table-top exercises, to ensure that their Emergency Preparedness Plan can withstand the concerns the coronavirus pandemic raises.

Should you have any questions about your HHA Emergency Preparedness Plan, please contact Roetzel's health care team.

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