

FACT SHEET

CMS Releases Updated Emergency Preparedness Guidance

Overview

Today, March 26, 2021, the Centers for Medicare & Medicaid Services (CMS) is releasing revised guidance to surveyors related to the emergency preparedness Medicare-condition. The Burden Reduction rule (84 FR 51732) released on September 30, 2019, in part, made revisions to the emergency preparedness requirements to reduce the frequency of certain required activities and, where appropriate, revised timelines for certain requirements for providers and suppliers.

In general, the regulatory requirement revisions are as follows:

- *Emergency program*: Decreasing the requirements for facilities to conduct an annual review of their emergency program to a biennial review. However, based on industry feedback, long term care (LTC) facilities will continue to review their emergency program annually.
- *Emergency plan*: Eliminating the requirement that the emergency plan include documentation of efforts to contact local, tribal, regional, state, and federal emergency preparedness officials and a facility's participation in collaborative and cooperative planning efforts.
- *Training*: Decreasing the training requirement from annually to every two years. Nursing homes will still be required to provide annual training.
- *Testing (for inpatient providers/suppliers)*: Increasing the flexibility for the testing requirement so that one of the two annually-required testing exercises may be an exercise of the facility's choice; and
- *Testing (for outpatient providers/suppliers)*: Decreasing the requirement for facilities to conduct two testing exercises to one testing exercise annually.

Additionally, since CMS had revised Appendix Z in February 2019 to add "emerging infectious diseases" (EIDs) to the definition of all-hazards approach, we are taking the opportunity to further expand upon the interpretive guidelines where applicable to include best practices and planning considerations for preventing and managing EIDs in light of lessons learned during the onset of the COVID-19 public health emergency (PHE). Several of the expanded guidance surrounding EIDs is considered recommendations and best practices, not requirements, and includes the below:

- Clarified expectations surrounding documentation of the emergency program.
- Added additional guidance/considerations for EID planning to include personal protective equipment (PPE).
- Added additional guidance on risk assessment considerations, to include EIDs.
- Included planning considerations for potential patient surges and staffing needs.
- Expanded guidance for surge planning due to natural disasters and EIDs.

- Included recommendations during PHE's for facilities to monitor Centers for Disease Control and Prevention (CDC) and other public health agencies, which may issue event-specific guidance and recommendations to healthcare workers.
- Added additional planning considerations for hospices during EIDs outbreaks.
- Expanded guidance and added clarifications related to alternate care sites and 1135 Waivers.
- Expanded guidance on the identification and use of best practices related to reporting of facility needs, the facility's ability to provide assistance and occupancy reporting.
- Revised guidance related to training and testing program as the Burden Reduction Rule extensively changed these requirements, especially for outpatient providers.
- Provided clarifications related to testing exercise exemptions when a provider/supplier experiences an actual emergency event.

Training Resources:

CMS is working on revisions to the current Emergency Preparedness Online Basic Surveyor Training Course which can be accessed 24/7 by the public, free of charge on the CMS [Quality, Safety and Education Portal](#).

Additionally in 2017, CMS released training for surveyors and health care professionals related to infection prevention. This free course also contains a module relevant to EIDs. You may access the *Universal Infection Prevention Training* course here:

https://qsep.cms.gov/pubs/CourseMenu.aspx?cid=0CMSUIPC_ONL. While the course does not incorporate COVID-19 specific information, it does speak to infections with high mortality rates (Ebola, Flu, C-diff and MRSA), which can be found under module 2.

CMS also refers all provider types to the Assistant Secretary for Preparedness and Response's (ASPR's) Technical Resources Assistance Center & Information Exchange (TRACIE) for additional resources, how-to guides and tools. ASPR TRACIE is a public resource for all healthcare preparedness and contains current tools and resources relevant for infectious diseases. See: <https://asprtracie.hhs.gov/infectious-disease>.

The revised guidance (Appendix Z) is available at: <https://www.cms.gov/files/document/qso-21-15-all.pdf>