



Louisiana Department of Health Informational Bulletin 20-12

Revised May 12, 2020

Due to the COVID-19 emergency declaration, temporary changes in provider policy and managed care practices are reflected herein to respond to the emergency. All other non-COVID-19 related policy remains in effect and shall be followed.

Novel Coronavirus Disease (COVID-19) Update for Pediatric Day Health Care (PDHC) Facilities: Infection Control Guidance and Temporary Allowance of In-Home Services

Temporary PDHC Services Allowed in the Home

The Louisiana Department of Health is temporarily changing the Pediatric Day Health Care (PDHC) program policies to allow services to be provided in the home during the COVID-19 health emergency. Skilled staff of PDHC centers who are not exhibiting any signs or symptoms of COVID-19 may render PDHC services to those beneficiaries who require skilled nursing, when families are not able to provide such care in the home.

The following guidelines apply:

- PDHC centers must bill for in-home services using procedure code T1026 (hourly PDHC services – six hours or less per day) with place of service 12 (home). PDHCs may only bill an additional hour of skilled services if 30 or more minutes of care has been provided. The clinical record shall have the time documented; and
- Fee-for-service or managed care organization (MCO) approval for in-home PDHC services is required. Requests will be reviewed on a case-by-case basis.

For current updates on the status of COVID-19 in Louisiana, please see the Office of Public Health (OPH) COVID-19 website, located at: <http://ldh.la.gov/coronavirus>.

Guidance on Infection Control in PDHCs

At this time there is very limited evidence on how COVID-19 presents in children who are medically fragile or complex. However, it is believed that children who are medically fragile and

get very sick with colds will likely follow the same pattern if they become sick with COVID-19. Therefore, in recognition of potentially heightened risks to PDHC staff and beneficiaries during the COVID-19 pandemic, Louisiana Medicaid offers the following guidance on infection control measures.

Protection Outside of the Center

Handwashing is one of the most important ways people can protect themselves from COVID-19. While at home, staff and children are encouraged to wash their hands frequently for at least 20 seconds. Everyone residing in the staff member's or child's home should also be encouraged to wash their hands frequently. Plenty of hand soap, tissues, wipes, and hand sanitizer should be available for everyone in the staff's or child's home to use.

Social distancing, or physical distancing, should be practiced by all staff and children, their families, caregivers, and all household members, to the maximum extent possible. This means they should limit close contact with individuals outside their household in indoor and outdoor spaces. People can spread the virus before they know they are sick, so it is important to stay away from others when possible, even if you have no symptoms. When in public spaces they should also stay at least 6 feet away from other people, avoid gatherings, and stay out of crowded places.

Cloth face coverings should be worn over the mouth and nose by staff and children, their families, caregivers, and other household members when they have to go out in public, UNLESS they are under the age of 2 years, have trouble breathing, or are unconscious, incapacitated or otherwise unable to remove the cloth face covering without assistance.

Clean and disinfect frequently touched objects and surfaces (e.g., counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, bedside tables), and equipment such as wheelchairs, scooters, walkers, canes, oxygen tanks and tubing, communication boards and other assistive devices. Refer to [CDC's General Recommendations for Routine Cleaning and Disinfections of Households](#).

Clinic and Therapy Appointments

Providers should refer to Louisiana Department of Health directives about medical and surgical care during the COVID-19 emergency. These are located under "Information for Providers" at <http://ldh.la.gov/index.cfm/page/3880>.

In general, telemedicine/telehealth is encouraged for any medical or therapy evaluations and treatments that can be performed remotely, as long as the same standard of care can be met as

an in-person visit. Telemedicine/telehealth provided to children enrolled in PDHC must comply with Medicaid's overall telehealth policy as described in previous COVID-19 Informational Bulletins.

Infection Control within the PDHC Center

Arrival: The center should limit and monitor points of entry to the facility.

On arrival to the center, all staff, caregivers, and visitors should be wearing a cloth face covering (and children, if appropriate). If a caregiver or visitor arrives at the center without a cloth face covering, a facemask may be used for source control if supplies are available. If possible, PDHC staff should meet the caregivers and child outside the center on arrival. All staff, caregivers, visitors, and children entering the center should be screened for COVID-19 before they enter. If they have a temperature of 100 degrees Fahrenheit or greater, or symptoms such as cough or shortness of breath, they should not be allowed entry into the facility.

Staff, caregivers, visitors, and children should perform thorough handwashing after screening negative for fever or symptoms. Staff and beneficiary belongings brought from home should be disinfected and stored separately (see below for further guidance on disinfecting objects). Staff should wear gloves when handling belongings brought from a beneficiary's home. Staff, caregivers, visitors, and children served should all be given a visible sticker to wear after completing the screening procedure so that all individuals know who was screened.

During the Day: The center should limit entry to only those essential for the child's physical or emotional well-being and care (e.g., medical staff and teachers).

PDHC centers should also adhere to Louisiana Department of Health recommendations on daycare and early learning centers, which is available at: <http://ldh.la.gov/index.cfm/page/3878>

- Child and staff group sizes should be limited to 10 or less. Group sizes for infants should be limited to 5 or less.
- Outdoor groups should be separated from each other, and also follow the 10 or less staff/children guidance.
- Practice frequent environmental cleaning (cleaning high-touch surfaces hourly) and wash hands frequently with soap and water for 20 seconds. Alcohol-based sanitizers are appropriate when soap and water are not readily available.
- Actively monitor children and staff for any symptoms of fever, cough, shortness of breath, or sore throat throughout the day. Any child with these symptoms should not participate in these programs for the duration of the illness. Only well children should attend.

- Staff members who are high-risk (elderly, those with medical conditions) should be encouraged to stay home, according to workplace policies.

In addition, all non-dedicated, non-disposable medical equipment used for beneficiaries' care should be cleaned and disinfected according to manufacturer's instructions and facility policies. Routine cleaning and disinfection procedures (e.g., using cleaners and water to pre-clean surfaces prior to applying an EPA-registered, hospital-grade disinfectant to frequently touched surfaces or objects for appropriate contact times as indicated on the product's label) are appropriate, including those beneficiary-care areas in which aerosol-generating procedures are performed (more detail below). Refer to List Nexternal icon on the EPA website for EPA-registered disinfectants that have qualified under EPA's emerging viral pathogens program for use against COVID-19: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>. Management of laundry, food service utensils and medical waste should also be performed in accordance with routine procedures.

Departure: When entering the center to pick up their child, caregivers should be wearing a cloth face covering. The caregiver should perform thorough handwashing prior to touching their child or their belongings. Prior to leaving for the day, staff should once again ensure that all surfaces have been cleaned and personal protective equipment (PPE) appropriately discarded.

Precautions for Nebulizer, Tracheostomy, Ventilator, and Suctioning Care

Children who use nebulizers, have tracheostomies, use ventilators, or are suctioned are not necessarily at higher risk of contracting COVID-19 simply by using those devices. However, these devices, if used by someone who IS infected, may spread the infection to others nearby due to their potential for creating aerosolized viral particles. It is not always easy to know when a child is infected since children may be infected and contagious even without symptoms, therefore, precautions should be used with every patient. For example, staff should wear an N95 mask and gloves when closely interacting with children who use a ventilator or have a tracheostomy.

Some common **aerosol-generating procedures and devices** used in PDHC may include: ventilator use with a tracheostomy, especially with a significant leak; changes to or close contact with unfiltered ventilator exhalation limbs, valves, or ports; other ventilator circuit changes; non-invasive ventilator use with a mask, including CPAP and BiPAP; high-flow oxygen use; tracheostomy procedures such as replacing the trach; open suctioning; cough assist device use; and nebulizer use, especially via mask.

When performing procedures or care involving the above aerosol-generating procedures or devices, PDHC staff should adhere to the following infection control measures, as recommended by CDC and in accordance with home-based ventilation and tracheostomy standards of care:

- Use a separate room with the door closed whenever possible.
- Minimize the number of people in the room during the procedure to as few as possible.
- Wear full PPE, including an N95 mask or other higher-level respirator, eye protection, gown, and gloves, during procedures. Refer to the [CDC Sequence for Donning and Removing PPE](#). If the availability of PPE is not adequate to allow compliance with all of these guidelines, please contact the Office of Public Health for assistance acquiring additional PPE: <http://ldh.la.gov/index.cfm/page/3884>.
- Clean and disinfect procedure room surfaces promptly.
- Regarding ventilators: avoid opening or disconnecting ventilator circuits as much as possible.
- Regarding suctioning:
 - Use a closed suctioning system if possible.
 - Make sure all filters on suction machines are in place and in good condition.
 - Keep the suction system clean and disinfect the canister and tubing with 50% hydrogen peroxide/water or equivalent daily.
 - Do not reuse sterile suction catheters.
- Regarding cough assist:
 - Use a well-fitting mask to reduce leaks for cough assist.
 - Clean the mask daily.
- Regarding nebulizers:
 - Consider using an inhaler (MDI) instead of a nebulizer to administer inhaled medications.
 - Administer nebulizers inline if the beneficiary is on a ventilator.
 - Clean all disposable nebulizer parts daily.

Questions regarding approval for managed care beneficiaries should be directed to the appropriate MCO. Questions regarding approval for fee-for-service beneficiaries should be directed to Norma.Seguin@la.gov.