MEMORANDUM
OCDD-P-20-025
OAAS-P-20-022

TO: ICF/IID Providers
    Nursing Facilities Providers

FROM: Julie Foster Hagan, OCDD Assistant Secretary
      Sherlyn Sullivan, OAAS Assistant Secretary
      Cecile Castillo, HSS Assistant Secretary
      Andrew Perilloux, Medicaid Rate and Audit

DATE: May 5, 2020

SUBJECT: ICF/IID and Nursing Facility Guidance

As the current COVID-19 emergency continues, new guidance is being released frequently. Please be aware that all Nursing Facilities, and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs) are responsible for monitoring and reviewing all state and federal guidance that applies to congregate residential settings. In addition to our LDH Coronavirus page and the CDC webpage, you can find guidance relative to the COVID-19 emergency on the Health Alert Network page at [http://ldh.la.gov/index.cfm/page/3865](http://ldh.la.gov/index.cfm/page/3865). Emergency Declarations have been made by Centers for Medicare and Medicaid Services (CMS) that pertain to Nursing Facilities and ICF/IID facilities. (Please see attached COVID-19 Emergency Declaration Blanket Waivers for Health Care Providers.)

As the State of Louisiana transitions back to regular operations, each facility is responsible for not only reviewing the guidance that has been released, but also for reviewing and modifying, where necessary, the facilities’ policies and processes in response to any changes in the guidance. Each facility must develop a way to communicate the necessary process or policy changes to residents and legal guardians/family members. At a minimum, policies related to the following should be reviewed, revised, and communicated with residents and legal guardians/family members:

- Visitor policies;
• Notification to residents/families if residents or staff test positive for COVID-19
  (PLEASE NOTE: You must NOT share personal or health information, but there must be a notification of possible exposure);

• Process for residents to use leave days if family wishes to take the resident home for self-isolation, as well as criteria for the person to safely return to the facility; and

• Criteria for discharge and readmission.

In addition to policy changes for the above guidance, each facility must consider the possible need to allow for a person to be moved to another facility to allow for segregation of those who are COVID-19 positive from those who are not. If segregation occurs, the facility must:

• Notify the resident’s family or responsible person that the segregation must occur;

• Notify the LDH Health Standards Section of the location of the resident; and

• Billing should be done based on the resident’s original facility location. If a transfer across facilities is necessary, an agreement regarding billing should be put into place.

Thank you for your continued hard work during the COVID-19 emergency.

Attachment