Emergency Preparedness Protocol



South Carolina's Contract Management Team (CMT) recognizes the increased health risks of Healthy Connections Prime members and the crucial role that Medicare-Medicaid Plans (MMPs) have in supporting members in the event of a disaster or emergency. This document outlines Emergency Preparedness guidance for MMPs to be applied during times when there is potential for a significant disruption in care that can impact the delivery of health care services and access to prescription drugs. This document is inclusive of all requirements for Medicare Advantage organizations, Part D Sponsors as well as Community Long Term Care (CLTC). The Centers for Medicare & Medicaid Service (CMS) and South Carolina's CMT still reserve the right to assess each disaster or emergency on a case-by-case basis and issue further guidance supplementing or modifying the information outlined below.

Service Coverage in an Emergency

Each MMP must have an established emergency protocol to be reviewed annually by the External Quality Review Organization beginning in 2017. In any declared emergency or disaster in the service coverage area, the MMP's protocol must cover the following CMS requirements:

Access to Part C Provider Network

- 1. Allow Part A/B and supplemental Part C plan benefits to be furnished at specified non-contracted facilities (note that Part A/B benefits must, per 42 CFR 422.204(b)(3), be furnished at Medicare certified facilities);
- 2. Waive in full, requirements for gatekeeper referrals where applicable;
- 3. Temporarily reduce plan approved out-of-network cost sharing amounts;
- 4. Waive the 30-day notification requirement to enrollees provided all the changes (such as reduction of cost sharing and waiving authorization) benefit the enrollee.

Access under Part D

1. Lift "refill-too-soon" edits and allow access to Part D drugs at the point-of-sale, if circumstances create a disruption in access to covered prescription drugs. MMPs must also allow affected members to obtain the maximum extended day supply, if requested and available at the time of refill.

Emergencies or disasters may be declared by the Governor, FEMA (http://www.fema.gov), the President or the Secretary of Health and Human Services.

Policies and Procedures Specific to Members Who Are Waiver Participants

As part of the initial visit to a member who is a waiver participant, the Waiver Case Manager will conduct the following activities pertaining to emergency preparedness:

- Review, complete and update as needed Emergency Disaster Priority Section and the Emergency Disaster
 Preparedness Section in the Home Assessment section of Phoenix (see Appendix 1 of this document). In the
 Disaster Plan Box (see Appendix 1 of this document), record the name and contact information of the individual
 responsible for assisting the participant in the event of an emergency/disaster. Review and update the
 information in each quarterly visit and re-evaluation visit
- Complete the checklist for goods and services if the member plans to remain in the home during an emergency/disaster

- Provide the member the CLTC Information Folder with the Emergency Preparedness Information, Emergency
 Telephone Numbers Form, Evacuation Information, Emergency Checklist (if applicable), and Helpful Reminders
 in an Emergency Brochure (see Appendix 2 of this document for sample forms). Review and update the
 aforementioned portions in Home the Assessment section in each quarterly visit and re-evaluation visit.
- Coordinate with formal and informal services for members whose needs and/or informal supports are such that an emergency/disaster would have a substantial impact on the member's health and safety

In case of an emergency/disaster, Waiver Case Managers are expected to:

- Contact all of their members, beginning with those identified as being "at risk" in Phoenix, both pre-disaster and post-disaster.
- Use a Pre-Disaster Checklist and Post-Disaster Checklist (see Appendix 3 of this document) to document and report efforts when an emergency or disaster is imminent and the Emergency/Disaster Plan has been implemented by Central Office or the Area Office. The checklists will be monitored by CLTC Central Office.

MMPs can use their discretion regarding contacting members in the waiver. If the MMPs need to monitor the checklists or contact members before, during, or after an emergency or disaster (as part of their protocol for example), they can access the checklists in Phoenix.

A copy of CLTC's emergency preparedness protocol will soon be posted in the policy area of the Phoenix Help section. Please check for this protocol for further details on CLTC's emergency preparedness protocols that pertain to MMPs and providers.

Activating and Ending the Protocol

MMPs may voluntarily implement all, or portions, of this guidance without explicit guidance from CMS or South Carolina's Contract Management Team (CMT). The MMP should notify the CMT of its voluntary actions.

The protocol is activated in the event of a Presidential emergency declaration, a Presidential (major) disaster declaration, a declaration of emergency or disaster by the Governor, or an announcement of a public health emergency by the Secretary of Health and Human Services. Typically, the source that declared the disaster will clarify when the disaster or emergency is over or upon the expiration of the 30-day period beginning from the initial declaration, whichever occurs first. For access to prescription drugs, the lift of "refill-too-soon" edits terminates when the disaster or emergency is declared over or upon the expiration of the 90-day period beginning from the initial declaration, whichever occurs first. Note: even without an emergency or disaster declaration – for instance, in advance of an impending disaster, MMPs may consider lifting edits if they determine it is appropriate to do so to ensure pharmacy access and in these instances can terminate them as they see fit.

If the Secretary of Health and Human Services declares a public health emergency under Section 319 of the Public Health Service Act, the Secretary has the right to exercise waiver authority under Section 1135 of the Social Security Act. If the Secretary exercises this waiver authority, detailed guidance and requirements will be made available.

When the emergency protocol is activated, the CMT will notify the MMPs, while provider agencies and independent Waiver Case Managers will receive an email from CLTC. Provider agencies must then share the communications with their case managers. The Area Offices may also communicate with Waiver Case Managers.

Developing and Testing the Protocol

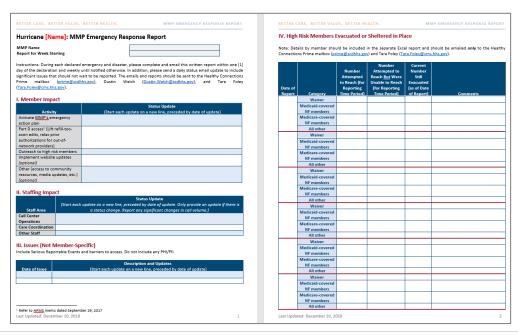
Plans should develop and implement the following four items, modeled after the CMS rule (link) to establish emergency preparedness requirements for Medicare and Medicaid health care providers to increase patient safety during emergencies and establish a more coordinated response to disasters:

- 1. **Emergency plan:** Based on a risk assessment, develop an emergency plan using an all-hazards approach focusing on capacities and capabilities that are critical to preparedness for a full spectrum of emergencies or disasters that can impact members.
- 2. **Protocol:** Develop and implement policies and procedures based on the plan and risk assessment.
- 3. **Communication plan:** Develop and maintain a communication plan that complies with both Federal and State law. Member care should be well-coordinated within the plan, its care coordinators, and key health care providers and community resources.
- 4. Training and testing: Develop and maintain training and testing programs, including initial and annual trainings.

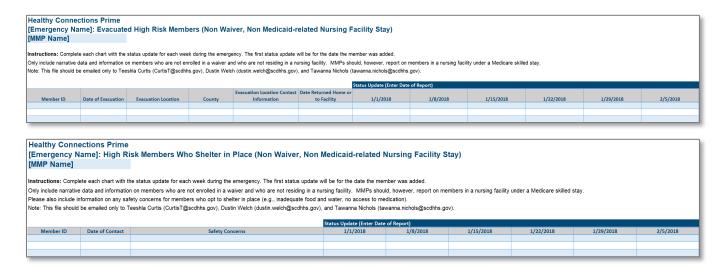
Reporting

During each emergency and disaster, the MMP must update the CMT via the CMT's preferred method of communication (for example, a conference call, email, or both). The frequency of the updates will be determined by the CMT, and may be changed based on need. In terms of written reports, there are two files that MMPs need to update and submit weekly during each emergency and disaster:

1. Weekly MS Word emergency response report: Summarize MMP response actions and the impact on members, staff, and operations. Serious Reportable Events should be included in the "Issues (Not Member Specific)" section. The High-Risk members section must include all High Risk members. During each declared emergency and disaster, please complete and email this written report within one (1) day of the declaration and weekly until notified otherwise. No member-specific details should be included. In addition, please send a daily status email update to include significant issues that should not wait to be reported. The emails and reports should be sent to the Healthy Connections Prime mailbox (prime@scdhhs.gov), Dustin Welch (Dustin.Welch@scdhhs.gov), and Nicole Ball (Nicole.Ball@cms.hhs.gov). A snapshot of this template is shown below.



2. Weekly MS Excel detailed member report: MMPs must complete the two worksheets that capture the status update on all high-risk non-waiver and non-nursing facility members who are evacuated or shelter in place for each week of the emergency. This report with member-specific information should be emailed weekly only to the Healthy Connections Prime mailbox (prime@scdhhs.gov). A snapshot of these two worksheets can be seen below.



The CMT may request additional reporting of events or metrics, to be determined by the CMT based on the circumstances of each emergency and disaster.

References

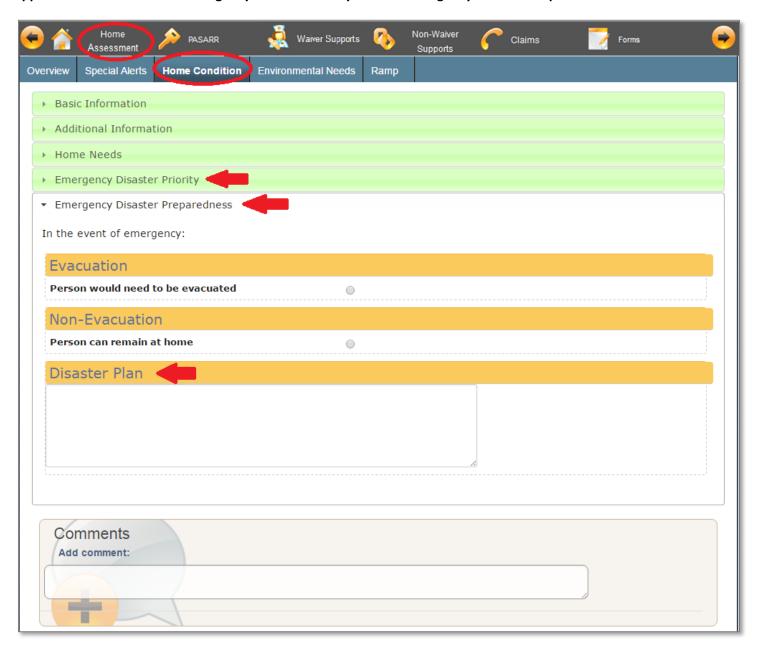
- July 20, 2009 CMS memo on "Pharmacy and Provider Access during a Federal Disaster or Other Public Health Emergency Declaration"
- Chapter 5 of CLTC's Community Choices Policy and Procedure Manual (Case Management)
- CMS Survey & Certification Emergency Preparedness site (link)
- Chapter 4 of the Medicare Managed Care Manual, Section 150 (Benefits during Disasters and Catastrophic Events) and Section 160 (Beneficiary Protections Related to Plan-Directed Care) (<u>link</u>)
- Chapter 5 (Benefits and Beneficiary Protections) of the Medicare Prescription Drug Manual, Section 50.12 (Pharmacy Access During a Federal Disaster or Other Public Health Emergency Declaration) (link)
- CMS Rule on Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers, finalized on September 8, 2016 (link)

For More Information

Please contact Dustin Welch, Program Manager I, at Dustin.Welch@scdhhs.gov or 803-898-3042 if you have any questions.

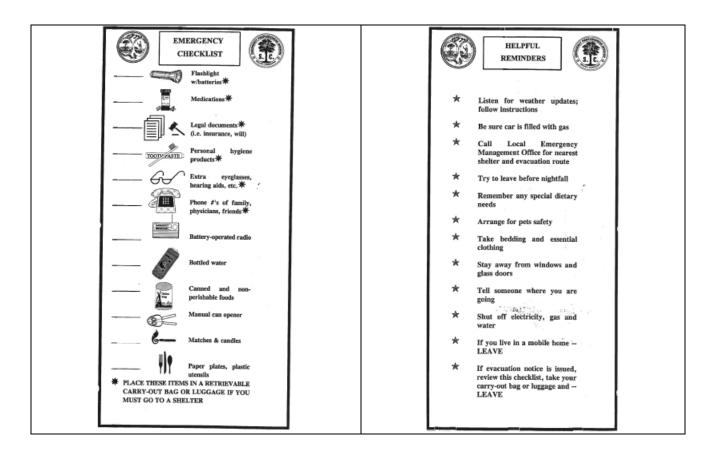
Appendices

Appendix 1: Location of the Emergency Disaster Priority and the Emergency Disaster Preparedness sections in Phoenix



Appendix 2: Sample Emergency Preparedness documents in the CLTC Information Folder provided to waiver participants

Checklist the next time disaster strikes, you may not	Preparedness checklist will holp you get started. Discuss these	American Federal Energozy Bad cross Management Agency For additional information about how to prepare for	City Telephone (Day) Local Contact Name Telephone (Day)	(Evening)	moment's notice. You should be nearly to get out fire. Develop as escape plan by drawing a floor plan of your maidmon, Using a black or blue pen, show the location of doors, wisdows, saleways, and large familizes. Indicate the location of emergency supplies (Diaster Stupples IXI), fire estinguishers, smoke detectors, collegable allelane, first aid dies and
have much time to act. Prepare now for a sudden emergency. Learn how to protect your- self and cope with disaster by planning ahead. This	ideas with your family, then prepare an emergency plan. Post the plan where everyone will see it—on the refrigerator or bulletin board.	hazards in your commu- nity, contact your local emergency management or civil defense office and American Red Cross chapter.	Noarest Relative Name City Telephone (Day)	(2*enting)	utility shut off points. Next, use a coloned pen to draw a broken lise charring at least two escape routes from each room. Finally, mark a place outside of the home where heasehold members should meet it case of fire. Be use to include important points outside ruch as purages, petios, stairweys, elevation, drivenance and prother. If you
	Emergency Checklis	t	Family Work Numbers	Mother	home has more than two floors, use an additional sheet of paper. Practice
Call Your Emergency Management Office or American Red Cross Chapter	Discuss what to do about power outages and personal injuries. Draw a floor plan of your home. Mark two escape routes from each room.	Prepare a Disaster Supplies Kit Assemble supplies you might need in an evacuation. Store them in an easy-so-carry	OtherEmergency Telephone Numbers	cal emergency medical services system number.	emergency evacuation dells with all household members at least two times each year.
Find out which disasters could occur in your area. Ask how to prepare for each disaster. Ask how you would be warned of an emergency.	Learn how to turn off the water, gas and electricity at main switches. Post emergency telephone numbers near telephones.	container such as a backpack or duffle bug. Include: A supply of water (one gallon per person per day). Store water is scaled, subtraskable containers. Hersiff the	Police Department Fire Department Hospital		Example:
☐ Learn your community's evacuation routes. ☐ Ask about special assistance for elderly or disabled persons.	Teach children how and when to call 911, police and fire. Instruct household members to turn on the nade for emergency information. Pick one out-of-state and one local	storage date and replace every six months. A supply of non-perishable packaged or canned food and a non-electric can opener. A change of clothing, rain gear and	Family Physicians Name	Telephone	
Also Ask your workplace about emergency plans. Learn about emergency plans for your children's school or day care center.	friend or relative for family members to call if separated by disaster (it is often easier to call out-of-state than within the affected area). Teach children how to make long distance telephone calls.	standy shoes. Blankets or sleeping bags. A first aid kit and prescription medications. An extra pair of glasses.	Name Reunion Locations	Tolephone	Rain Rists
Create an Emergency Plan Meet with household members. Discuss with children the dangers of	ostance relegione calls. Dick two meeting places. 1) A place near your home in case of a fire. 2) A place outside your neighborhood in case you cannot return home after a diseaser.	A battory-powered radio, flashlight and plenty of extra batteries. Credit cords and costs. An extra set of car keys. A list of family physicians. A list of important family informa-	Right outside your home Awey from the neighborhood, in case you	current return borne	
fire, severe weather, earthquakes and other energencies. Discuss how to respond to each disaster that could occur.	☐ Take a basic first aid and CPR class.☐ Keep family records in a water and fire-proof container.	tion; the style and serial number of medical devices such as pacentalers. Special items for infants, ederty or disabled family members.	Telephone Rouse to try first		
Home Hazard Hunt In a diseaser, ordinary items in the home can	Wear protective clothing and sturty shoes.	O Maps O Shovel	Floor Plan		
cause injury and damage. Anything that can move, fall, break or cause a fire is a potential bazard. Repair defective electrical wiring and	Take your Disaster Supplies Kit. Lock your house. Use travel routes specified by local officials.	☐ The repair kit and pump ☐ Places	Floor One		
leaky gas connections. Pasten shelves securily. Place large, heavy objects on lower shelves.	If you are sure you have time Shut off water, gas and electricity. If instructed to do so. Let others know when you left and	Fire Safety Plan two escape motes on of each morn. Teach family members to stay low to the ground when escaping from a fire.			
Hang pictures and mirrors away from bods. Brace overhead light fintures. Secure water heater. Strap to wall study.	where you are going. Make arrangements for pets. Animals may not be allowed in public shelters. Prepare an	☐ Teach family members never to open doors that are hot. In a fire, feel the bottom of the door with the pairs of your band. If it is hot, do not open the door. Find another way out.			y e
Repair cracks in ceilings or foundations. Store weed failers, pesticides and flammable products away from heat sources. Place ofly polishing rags or waste in	Emergency Car Kit Include: Bastery powered radio and extra Instantes	Install smoke detectors. Coan and test smoke detectors once a month. Change batteries at least once a year. Keep a whistle in each befroom to awaken household members in case of			
covered metal cans. Clean and repair chimneys, fixe pipes, vent connectors and gas vents. If You Need to Evacuate		fire. Check electrical outlets. Do not overload outlets. Parchase a firm entinguisher (5 lb., A-B-C type).			
 Listen to a battery powered radio for the location of emergency shelten. Follow instructions of local officials. The Federal Emergency Management Agency (FE) 	Bottled water and mon-perishable high marryy freeds such as granola bars, raisins and peanut batter. MA) and the American Red Cross are pleased to prov Ores' Disaster Education Programs are subservoiced.	Have a collapsible ladder on each apper floor of your house. Consider installing home spendors, ide you with this brothers. FEMA's Emergency	Floor Two		
gunday and etimentary to desirent man emergences for more information, please contact you local strengency management office and your local Armician Red Cross chapter. Writes to PEMA, said for "Am You Ready?" II-34, June #8-0908	Your Local Contact is:	forts to increase the ability of dilizens to respond			
P.O. Box 70274 aug.sc Washington, D.C. 20004 45550+0 Nov. 18					
Poderal Emergency	Company ?	Emergency Preparedness Checklist			
		incy			
(family party)		cy Pre			



Appendix 3: Location of the Pre-Disaster Checklist and Post-Disaster Checklist in Phoenix

