Healthy Connections
PRIME

Memo Date:	**August 28, 2017**
Memo Topic:	**Emergency Reporting Templates**
To:	Medicare-Medicaid Plans (MMPs)
From:	Dustin Welch, MHA – Program Coordinator II (dustin.welch@scdhhs.gov) South Carolina Department of Health and Human Services (SCDHHS)

Attached are two emergency reporting templates that Medicare-Medicaid Plans (MMPs) shall use during declared emergencies or disasters. The Emergency Preparedness Protocol posted on the CICO tab of the website has been updated to reflect the requirements around these reports.

During a declared emergency or disaster, the MS Word emergency response report should be updated weekly. MMPs must summarize their response actions and the impact on members, staff, and operations. A summary of Serious Reportable Events (SREs) and high-risk members (non-waiver, non-nursing facility) who were evacuated or shelter in place is also required.

MMPs must submit this report weekly to the Contract Management Team (CMT) via the CMT's preferred method of communication (e.g., a conference call, email, or both) **and** a written update must be sent weekly to the Healthy Connections Prime mailbox (prime@scdhhs.gov). No member-specific details should be included. The first page of this template can be seen below.

BETTER CARE. BETTER VALUE. BETTER HEALTH.   MMP EMERGENCY RESPONSE REPORT

[Emergency Name]: MMP Emergency Response Report

MMP Name
Report for Week Starting   [mm/dd/yy]

Primary Contact (Name, Title, Email, Cell Phone Number)
Backup Contact (Name, Title, Email, Cell Phone Number)

Instructions: During each declared emergency and disaster, the Medicare-Medicaid Plan (MMP) must update the Contract Management Team (CMT) via the CMT's preferred method of communication (e.g., a conference call, email, or both). The frequency of the updates will be determined by the CMT, and may be changed based on need. A written update must also be sent to the Prime mailbox (prime@scdhhs.gov).

I. Member Impact

Activity	Status Update (Start each update on a new line, preceded by date of update)
Activate MMP's emergency action plan	[mm/dd/yy] – [update]
Lift refill-too-soon edits	
Relax prior authorizations for out-of-network providers	
Outreach to high risk members	
Implement website updates (optional)	
Access to community resources (optional)	
Media updates (optional)	
Other	

II. Staffing Impact

Staff Area	Status Update (Start each update on a new line, preceded by date of update)
Call Center Operations	[mm/dd/yy] – [update] [mm/dd/yy] – [update]
Care Coordination	
Other Staff	

III. Issues (Not Member-Specific)

Issue	Description

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IV. Serious Reportable Events

During and 30-days post declaration. As Serious Reportable Events are already being entered in a separate report, please use this section for high level updates without any PHI/PII.

Date of Event	Status Update (Start each update on a new line, preceded by date of update)

V. High Risk Members Evacuated or Who Shelter in Place (Non-Waiver, Non-Nursing Facility)

Only include narrative data and information on members who are not enrolled in a waiver and who are not residing in a nursing facility. MMPs should, however, report on members in a nursing facility under a Medicare skilled stay.

Note: Details by member are provided in a separate Excel report that should be emailed only to the Healthy Connections Prime mailbox (prime@scdhhs.gov).

Date of Report	Total Number Evacuated	Total Nursing Facility Enrollees Evacuated (Medicare skilled stay)	Total Number Who Shelter in Place	Total Unable to Reach	Comments

The second report template, an MS Excel detailed member report, contains 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 detailed report with member-specific information should be emailed weekly **only** to the Healthy Connections Prime mailbox (prime@scdhhs.gov). A picture of these two worksheets can be seen below.

Healthy Connections Prime
[Emergency Name]: Evacuated High Risk Members (Non Waiver, Non Medicaid-related Nursing Facility Stay)
[MMP Name]

Instructions: Complete each chart with the status update for each week during the emergency. The first status update will be for the date the member was added.

Only include narrative data and information on members who are not enrolled in a waiver and who are not residing in a nursing facility. MMPs should, however, report on members in a nursing facility under a Medicare skilled stay.
Note: This file with member-specific information should be emailed only to the Healthy Connections Prime mailbox (prime@scdhhs.gov)

Member ID	Date of Evacuation	Evacuation Location	County	Evacuation Location Contact Information	Date Returned Home or to Facility	Status Update (Enter Date of Report)			
						1/1/2018	1/8/2018	1/15/2018	1/22/2018

Healthy Connections Prime
[Emergency Name]: High Risk Members Who Shelter in Place (Non Waiver, Non Medicaid-related Nursing Facility Stay)
[MMP Name]

Instructions: Complete each chart with the status update for each week during the emergency. The first status update will be for the date the member was added.

Only include narrative data and information on members who are not enrolled in a waiver and who are not residing in a nursing facility. MMPs should, however, report on members in a nursing facility under a Medicare skilled stay.
Please also include information on any safety concerns for members who opt to shelter in place (e.g., inadequate food and water, no access to medication).
Note: This file with member-specific information should be emailed only to the Healthy Connections Prime mailbox (prime@scdhhs.gov)

Member ID	Date of Contact	Safety Concerns	Status Update (Enter Date of Report)				
			1/1/2018	1/8/2018	1/15/2018	1/22/2018	1/29/2018

Contact Information

For questions or additional guidance, please contact:

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  South Carolina Department of Health and Human Services (SCDHHS)