

# Care Coordination and Covid-19

Communications to the Home and Community Based  
Services community

# Emergency Case Management Protocols

- Commitment to unified guidance between ODA and ODM
- Continuous updates
  - » Initial release March 13<sup>th</sup>, most recent May 5<sup>th</sup>
- Collection of documents:
  - » Case Management Emergency Protocol
  - » Provider Emergency Protocol
  - » Guidance for individuals
  - » LTSS Toolkit





The Ohio Department of Aging and the Department of Medicaid provided guidance to implement emergency protocols as part of the state's response to the COVID-19 pandemic. The documents below provide details of the changes the state has taken and answer your questions.

**LONG TERM SERVICES AND SUPPORT - COVID CONGREGATE CARE GUIDES**

NF-Based Level Care Waivers, Case Management Emergency Protocol  
NF-Based Level Care Waivers, Provider COVID FAQs

MCP FFS Member Notice COVID

COVID-19 LTSS Pre-Surge Planning Toolkit

Nursing Facility-Focused LTSS Toolkit Walk-Through

Community-Focused LTSS Toolkit Walk-Through

# Guiding Themes

- **Reduce, where safe and practical, face to face visits**
  - » Lift requirements for face to face case management visits
  - » Allow services to be added to a service plan telephonically
  - » Allow individuals to temporarily increase reliance on informal supports, if desired
- **Reduce administrative burden so the healthcare system is free to focus on taking care of individuals**
  - » Allow greater flexibility in timelines for case management activities
- **Provide guidance on safe care practices in the home**
  - » Individual and Staff Journey documents (LTSS Toolkit)

# Staff Journey in Community Setting

PRE-SURGE PLANNING

## Staff Journey in Community Settings

- 1. Staff Assessment:** staff risk, <sup>2</sup> number/type of staff coming to the home, clinical capabilities, telehealth options, agency restrictions. Consideration for highest risk staff to avoid caring for COVID-19 + individuals. **Provide social and emotional support to all staff.** <sup>9</sup>
- 2. Home Assessment:** layout and ability to quarantine/isolate patient/resident, advise on cleaning and disinfecting.
- 3. Heavy Reliance on Staff for Infection Control:** Pay extra attention to hand-washing, change PPE between clients, pay attention to surfaces when entering / exiting homes.

<p><b>Daily Staff Assessment and Work</b> <i>Includes hospice and other visiting personnel</i></p> <p>If sick, <b>STAY HOME</b> and call primary care clinician</p> <ol style="list-style-type: none"> <li><b>1. Daily self assessment</b> <sup>5</sup> <ul style="list-style-type: none"> <li>&gt; 100.0 degree temp.</li> <li>New/change in cough</li> <li>Shortness of breath</li> <li>Sore throat, malaise, fatigue, nausea, diarrhea, or other symptoms</li> </ul> </li> <li><b>2. Document infection control practices, as appropriate</b></li> <li><b>3. Verify work clearance</b></li> <li><b>4. Only care for subset of people</b></li> <li><b>5. Actively create a culture of safety; pay attention to attire and PPE practices</b> <sup>10</sup></li> <li><b>6. Practice vigilant sanitation</b> <ul style="list-style-type: none"> <li>Hand-washing for 20 <sup>13</sup> seconds + ABHS</li> <li>Don't touch face</li> <li>Disinfect surfaces frequently</li> </ul> </li> </ol>	PATIENT/RESIDENT STATUS	CARE SETTING	CARE IN HOME	Contingency PPE <sup>11</sup>	Crisis PPE <sup>12</sup>
	<p><b>No Exposure</b> <i>No Symptoms</i></p>	<p><b>Clean Environment</b></p> <ul style="list-style-type: none"> <li>Physical distancing, as able</li> </ul>	<ul style="list-style-type: none"> <li>Continue routine care</li> <li>Provide social and emotional support <sup>8</sup></li> </ul>	<ul style="list-style-type: none"> <li>Surgical/medical facemask: extended use/re-use all shift*</li> <li>Other PPE only for routine precautions</li> </ul>	<ul style="list-style-type: none"> <li>Surgical/medical facemask preferred: extended use/re-use all shift*</li> <li>» Face shield or other masks if necessary</li> <li>Other PPE only for routine precautions</li> </ul>
	<p><b>Exposed</b> <i>No Symptoms</i></p>	<p><b>Quarantine</b></p> <ul style="list-style-type: none"> <li>Separate room and bathroom, as able</li> </ul>	<ul style="list-style-type: none"> <li>Continue routine care</li> <li>Provide social and emotional support <sup>8</sup></li> <li>Avoid aerosols, switch to metered dose inhalers</li> <li>Monitor individual <sup>5</sup> for development of symptoms (temp 100 or higher, cough, or shortness of breath)</li> </ul>	<ul style="list-style-type: none"> <li>Surgical/medical facemask: extended use/re-use all shift* <b>resident should also wear a mask</b></li> <li>N95 only with aerosol-generating procedures</li> <li>Extended use/re-use goggles or face shield</li> <li>Expired or cloth isolation gown, change between residents</li> <li>Medical grade gloves, non-sterile, change between residents</li> </ul>	<ul style="list-style-type: none"> <li>Surgical facemask: extended use/re-use all shift* <b>resident should also wear a mask</b></li> <li>» Face shield /other masks if necessary</li> <li>Safety goggles / glasses only with aerosolization</li> <li>Expired disposable / cloth gowns*; multiple staff use same gown for single resident (store in paper bag at house); if necessary coveralls / lab coats (wear backward)</li> <li>Non-medical, industrial gloves</li> </ul>
<p><b>COVID-19 + Confirmed or Suspected</b></p>	<p><b>Isolation</b></p> <ul style="list-style-type: none"> <li>Separate room and bathroom, as able</li> </ul>	<ul style="list-style-type: none"> <li>Continue routine care</li> <li>Provide social and emotional support <sup>8</sup></li> <li>Avoid aerosols, switch to metered dose inhalers</li> <li>Monitor individual <sup>3</sup> for development of symptoms for potential increase in level of severity</li> </ul>	<ul style="list-style-type: none"> <li>N95 mask: extended use within isolation status; limited re-use* <b>» Resident &amp; in-home caregivers should also wear a face mask</b></li> <li>Extended use/re-use goggles or face shield</li> <li>Expired or cloth isolation gown, change between residents</li> <li>Disposable gloves, change between residents</li> </ul>	<ul style="list-style-type: none"> <li>Surgical facemask preferred: extended use/re-use all shift*, N95 only for aerosolization <b>» Resident &amp; in-home caregivers should also wear a face mask</b></li> <li>Extended use/re-use safety glasses</li> <li>Expired or cloth isolation gown*; multiple staff use same gown for single resident (store in paper bag at house); if necessary coveralls / lab coats (wear backward)</li> <li>Non-medical, industrial gloves</li> </ul>	




\*Unless contaminated (wet, soiled, damaged) 9 of 26

# Individual Journey in the Community Setting

PRE-SURGE PLANNING

## Patient/Resident Journey in Community Settings

1. **Assessment of Patient/Resident and Others in the Home<sup>^</sup>:** risk **1** status, location; ensure advance directives are updated.
2. **Staff Assessment:** consideration for highest risk staff **2** to avoid caring for COVID-19+ residents.
3. **Home Assessment:** layout and ability to quarantine/isolate individual; provide advice on cleaning and disinfecting. **13**

PATIENT/RESIDENT STATUS	ENVIRONMENT, PLANNING, AND COMMUNICATIONS	SERVICE PROVISION AND MONITORING OF STATUS	IF CARE EXCEEDS ABILITY TO REMAIN HOME	PPE FOR PATIENT & IN-HOME CAREGIVERS
<b>No Exposure</b> <i>No Symptoms</i> 	<b>Clean environment</b> <ul style="list-style-type: none"> <li>Remain in usual care setting</li> <li>Limit interaction with others as much as possible</li> <li>Create / implement a back-up plan                             <ul style="list-style-type: none"> <li>If essential services no longer possible with usual providers, deploy back up plan and/or seek alt. providers</li> </ul> </li> <li>Contact case manager, as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>Continue authorized services</li> <li>Implement alternative social emotional support plan <b>8</b></li> <li>Ensure individual is safe at home</li> <li>Ensure contact with treating clinician regarding care questions</li> </ul>	<ul style="list-style-type: none"> <li>Review other placement settings with family/friends</li> <li>Contact clinician before sending to ED or hospital</li> </ul>	<ul style="list-style-type: none"> <li>No PPE</li> <li>Implement vigilant sanitation:                             <ul style="list-style-type: none"> <li>Hand-washing for 20 seconds + ABHS</li> <li>Don't touch face</li> <li>Disinfect surfaces frequently</li> </ul> </li> </ul>
<b>Exposed</b> <i>No Symptoms</i> 	<b>Quarantine</b> <ul style="list-style-type: none"> <li>Remain in usual care setting</li> <li>Limit interaction with others as much as possible</li> <li>Create / implement a back-up plan:                             <ul style="list-style-type: none"> <li>If essential services no longer possible with usual providers, seek alt. providers</li> </ul> </li> <li>Consider replacing aerosolized with metered dose inhalers</li> <li>Provide individual with self-monitoring log <b>5</b></li> <li>Communicate with in-home providers about PPE</li> <li>Ensure appropriate contact with LHD</li> <li>Contact case manager, as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>Continue authorized services</li> <li>Implement alternative social emotional support plan <b>8</b></li> <li>Enhance communication due to wearing of face masks</li> <li>Communicate with treating clinician initially and as symptoms, develop as appropriate</li> <li>Monitor oxygen level</li> <li>Release from quarantine when patient/resident has no symptoms for 14 days.</li> <li>Transfer to isolation if COVID-19 Dx presumed or tested</li> </ul>	<ul style="list-style-type: none"> <li>If essential services are unavailable, or if care needs exceed capacity in the home, review alternate service delivery settings</li> <li>Contact clinician before sending to ED or hospital</li> </ul>	<ul style="list-style-type: none"> <li>Patients should wear a face mask                             <ul style="list-style-type: none"> <li>Surgical/medical mask, extended use</li> <li>Other mask if necessary</li> </ul> </li> <li>Implement vigilant sanitation:                             <ul style="list-style-type: none"> <li>Hand-washing for 20 seconds + ABHS</li> <li>Don't touch face</li> <li>Disinfect surfaces frequently</li> </ul> </li> </ul>
<b>COVID-19 +</b> <i>Confirmed or Suspected</i> 	<b>Isolation</b> <ul style="list-style-type: none"> <li>Remain in usual care setting, if able</li> <li>Limit interaction with others as much as possible</li> <li>Create / implement a back-up plan:                             <ul style="list-style-type: none"> <li>If essential services no longer possible with usual providers, seek alt. providers</li> </ul> </li> <li>Consider replacing aerosolized with metered dose inhalers</li> <li>Communicate with in-home providers about PPE</li> <li>Ensure appropriate contact with LHD</li> <li>If calling 911 for sudden change in condition, communicate COVID status</li> <li>Contact case manager, as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>Symptomatic treatment, to include:                             <ul style="list-style-type: none"> <li>Monitoring oxygen level</li> <li>Maintaining clinician contact as additional clinical care may be required</li> </ul> </li> <li>Continue other authorized services</li> <li>Implement alternative social emotional support plan <b>8</b></li> <li>Enhance communication due to wearing of face masks</li> <li>Patient must meet infection control criteria prior to return to usual care</li> </ul>	<ul style="list-style-type: none"> <li>If essential services are unavailable, or if care needs exceed capacity in the home, review COVID-19+ Patient Journey into Higher Levels of Care</li> </ul>	<ul style="list-style-type: none"> <li>Patients <i>and all in-home caregivers</i> should wear a face mask                             <ul style="list-style-type: none"> <li>Surgical/medical mask preferred, extended use</li> </ul> </li> <li>Implement vigilant sanitation:                             <ul style="list-style-type: none"> <li>Hand-washing for 20 seconds + ABHS</li> <li>Don't touch face</li> <li>Disinfect surfaces frequently</li> </ul> </li> </ul>

<sup>^</sup> The PPE guidance above for patients/residents and in-home caregivers should be followed when other individuals living in the home are "exposed" or "COVID-19 +" For example, if an in-home caregiver is exposed to COVID-19 (no symptoms), the exposed caregiver should assume the role of the "patient" and wear a mask, per the PPE precautions found in the orange row.

# Resources

- Case Management Emergency Protocol:
  - » <https://www.medicareid.ohio.gov/Portals/0/COVID19/NF-BasedLevelCareWaiversCaseManagementEmergencyProtocol.pdf>
- Provider Emergency Protocol:
  - » <https://www.medicareid.ohio.gov/Portals/0/COVID19/Provider Protocol Revised%20Signature 5.8.2020.pdf>
- Member document:
  - » <https://www.medicareid.ohio.gov/Portals/0/COVID19/FFS%20-MCP%20Member-COVID-NOTICE-4-22-20.pdf>
- Journey documents (Part of COVID-19 Pre-Surge Toolkit)
  - » <https://www.medicareid.ohio.gov/Portals/0/COVID19/COVID-19LTSSPre-SurgePlanningToolkit4-3-20-FINAL.pdf>

**Questions?**