



Application and Startup

I'm interested in pursuing HCIC status for my facility. Are all COVID-19 Health Care Isolation Centers (HCICs) and their requirements the same?

There are three types of HCICs:

- *HCIC-Q: Quarantine level of care only*
- *HCIC-I: COVID-19 level of care 1-3*
- *HCIC-IQ: Both quarantine and COVID-19 levels of care in two distinct units, including staff and PPE supplies.*

Do I have to become an HCIC if I am isolating or quarantining residents in my facility?

No. A nursing facility can isolate and/or quarantine residents without receiving approval as an HCIC. However, only facilities identified as HCICs and designated as COVID-19 community providers will be eligible for the HCIC reimbursement rates.

What is required for an HCIC?

A survey may be required, but depends on a facility's HCIC application. The Ohio Department of Health will make that determination once your HCIC application is received. Please reach out directly to the technical assistance coordinator in your regional hospital zone if you have a question, or are interested in becoming an HCIC. The technical assistance coordinators by hospital zone are:

Zone 1: *Eric Beck, DO, MPH*
Eric.Beck@UHhospitals.org
Alice Kim, MD
KIMA@ccf.org

Sean Cannone, DO
Sean.Cannone@UHhospitals.org

Zone 2: *James Lawlor, DO*
James.lawlor@osumc.edu

Zone 3: *Richard Shonk, PhD*
RShonk@healthcollab.org



What is a technical assistance team? What types of support do they offer?

A technical assistance team, made up of staff from the Ohio Department of Health and the Ohio Department of Medicaid, is available for each regional hospital zone. to assist operators of HCICs with any questions during the application, startup, operation, and closure of HCICs.

Please contact the technical assistance team lead for your region for assistance:

Zone 1: James Hodge

James.Hodge@odh.ohio.gov

Zone 2: Rebecca Sandholdt

Rebecca.Sandholdt@odh.ohio.gov

Zone 3: Julie Evers

Julie.Evers@medicaid.ohio.gov

Do I have to submit a letter from the regional hospital zone if my facility is surging over capacity, or surging into a non-certified space?

No. For in-facility cohorting, which includes surging beyond certified capacity or noncertified space, this type of application does not require a letter from your zone assistance coordinator. The application can be submitted to the Ohio Department of Health (liccert@odh.ohio.gov and james.hodge@odh.ohio.gov) for processing. Please note from the HCIC plan, however, that this type does not include any increased reimbursement from the Ohio Department of Medicaid.

Can a hospice inpatient facility or a residential care facility (RCF) become an HCIC?

Yes. A hospice inpatient facility or a residential care facility can become an HCIC in the following two ways:

- Enroll for certification as a skilled nursing facility.
- Temporarily close and allow a nursing facility to surge into their space. Interested parties can negotiate an agreement detailing the use of hospice staff and in accordance with certification regulations.

NOTE: hospice and/or residential care facilities will be required to meet all HCIC requirements outlined in the Health Care Isolation Center Plan.



Can an HCIC application be submitted for the future, and if so, will I be required to operationalize it?

Only applications in which a facility is actively seeking a change of designation as an HCIC should be submitted. At this time, the Ohio Department of Health and the Ohio Department of Medicaid are not approving HCIC plans for future use or purposes.

Will approval of an HCIC ever be retroactive?

Yes. An HCIC can be approved and eligible as a COVID-19 community provider to receive the enhanced rate for services on, or after March 27, 2020, but not earlier than the date the HCIC was approved by the Ohio Department of Health.

Can a respiratory therapist serve as the clinician required in the HCIC plan?

There are two requirements in the HCIC plan that must be considered. The first requires a pulmonologist or other clinician available to manage the care of residents in an HCIC isolation unit. Generally, a respiratory therapist cannot serve in this role because it may require activities (such as ordering medications) that fall outside the scope of practice.

A second requirement is that all HCIC isolation units that provide ventilator care have a respiratory therapist available 24/7.

Can the nursing facility medical director serve as the clinician required in the HCIC plan?

When ventilator care is not being provided in the HCIC isolation unit, the nursing facility medical director is generally able to fill this role. If ventilator care is being provided, the nursing facility medical director may be able to fill this role if he or she has experience in managing ventilator care.

Admissions to an HCIC

Can a patient in an HCIC apply for Medicaid if he or she is not already eligible?

Yes. An individual who is receiving services in an HCIC can apply for Medicaid.

Do we have to take residents from other facilities?

As a rule, HCICs are approved to meet the needs for isolation and/or quarantine capacity in the regional hospital zone as a whole, and within a particular facility. However, as with all admissions, a nursing facility should not admit an individual if the facility is unable to meet the needs of the resident. Any concerns about a specific admission should be resolved in collaboration with the regional hospital zone.



Does an inpatient hospital stay meet the requirement for COVID-19 exposure for purposes of admission to a quarantine unit?

An admission from the hospital to the quarantine unit of an HCIC will meet the quarantine level of care standard if the individual has level-of-care needs comparable to the requirements for a nursing facility level of care, and there is a physician order for quarantine.

Operating an HCIC

When can staff return to work after having COVID-19?

Operators of HCICs should apply current Centers for Disease Control and Prevention (CDC) guidance when determining the appropriate time for an individual to return to work after having COVID-19. Pursuant to the [Criteria for Return to Work for Healthcare Personnel with Suspected or Confirmed COVID-19](#) (updated April 30, 2019), when using a symptom-based strategy, an individual who experienced COVID-19 symptoms can return to work three days after recovery and after 10 days from symptom onset. Individuals who did not experience COVID-19 symptoms can return to work 10 days after the first positive test.

Providers should monitor the Ohio Department of Health and CDC websites for the most current guidance.

When do you anticipate providing health care providers with adequate telehealth details?

Information about Medicaid's coverage of telehealth services during the COVID-19 pandemic is on the [Medicaid.Ohio.Gov/COVID](#). Additional coverage of telehealth services is outlined in [Ohio Administrative Code Rule 5160-1-18](#).

Does the payment structure described in the HCIC plan apply only to individual stand-alone units, or would it apply to all COVID-19 patients?

Only those units approved as HCICs by the Ohio Department of Health and designated as a COVID-19 community provider by the Ohio Department of Medicaid will be eligible for the enhanced reimbursement.



How do I know what level of COVID-19-related care to use when billing?

This table can be used to determine the level of COVID-19-related care when submitting claims. NOTE: Level is likely to change during an individual’s stay.

Table with 5 columns: Quarantine, Level 1, Level 2, Level 3, Level 3 + Vent. It details care requirements for different COVID-19 levels, such as symptoms, oxygen needs, and monitoring.

Discharges from an HCIC

Do I have to admit individuals discharged from my HCIC into my regular nursing facility?

The HCIC is responsible for discharge planning for individuals admitted to the HCIC. If the individual was receiving services in a nursing facility prior to admission to the HCIC, in most instances, a return to the nursing facility of residence is optimal. In all cases, the HCIC should work with the individual to ensure the discharge is to a setting the individual chooses where his or her needs can be met.



Department of
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COVID-19
Health Care
Isolation Center
Frequently Asked Questions

Closing an HCIC

Can I choose to close my HCIC or do I have to wait for Ohio Department of Health or Ohio Department of Medicaid approval?

The operator of an HCIC must provide 30 days written notice to the Ohio Department of Health, the Ohio Department of Medicaid, the Ohio Long Term Care Ombudsman, and all patients receiving services in the HCIC prior to voluntarily closing the unit or facility. In addition, the operator of the HCIC is responsible for coordinating with the patients and the regional hospital zone regarding all discharges and transfers from the HCIC.