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Update on the CMS Proposed Rule to the Medicare Conditions of Participation for Emergency Preparedness
Conditions of Participation

• Conditions of Participation (CoPs) and Conditions for Coverage (CfCs) are health and safety regulations which must be met by Medicare and Medicaid-participating providers and suppliers.

• They serve to protect all individuals receiving services from those organizations.
The Proposed Rule:

- Published in the *Federal Register* on Dec. 27, 2013.
- Increases patient safety during emergencies.
- Establishes consistent emergency preparedness requirements across provider and supplier types.
- Establishes a more coordinated response to natural and man-made disasters.
- Applies to 17 Medicare and Medicaid providers and suppliers.

Goals

- Address systemic gaps
- Establish consistency
- Encourage coordination
Four Major Provisions for All Provider Types

- Risk Assessment and Planning
- Policies and Procedures
- Communication Plan
- Training and Testing

Risk Assessment and Planning

- Develop an emergency plan based on a risk assessment.
- Perform risk assessment using an “all-hazards” approach, focusing on capacities and capabilities.
- Update emergency plan at least annually.
Policies and Procedures

- Develop and implement policies and procedures based on the emergency plan and risk assessment.

- Policies and procedures must address a range of issues including subsistence needs, evacuation plans, procedures for sheltering in place, tracking patients and staff during an emergency.

- Review and update policies and procedures at least annually.

Communication Plan

- Develop a communication plan that complies with both Federal and State laws.

- Coordinate patient care within the facility, across health care providers, and with state and local public health departments and emergency management systems.

- Review and update plan annually.
Training and Testing Program

• Develop and maintain training and testing programs, including initial training in policies and procedures.
• Demonstrate knowledge of emergency procedures and provide training at least annually.
• Conduct drills and exercises to test the emergency plan.

Emergency and Standby Power Systems

• Additional requirements for hospitals, critical access hospitals and long term care facilities.
• Locate generators in accordance with National Fire Protection Association (NFPA) guidelines.
• Conduct additional generator testing and inspection beyond that required by NFPA.
• Maintain sufficient fuel to sustain power during an emergency.
Requirements Vary by Provider Type

- Outpatient providers would not be required to have policies and procedures for the provision of subsistence needs.
- Home health agencies and hospices required to inform officials of patients in need of evacuation.
- Long term care and psychiatric residential treatment facilities must share information from the emergency plan with residents and family members or representatives.

Enforcement

- Rule will be enforced through the survey process once it becomes effective.
- CMS has the authority to recognize private accreditation in certain settings for purposes of meeting Medicare certification requirements.
Stakeholder Feedback

**Timeframes**
- Delay implementation
- Phase in by provider type

**Existing Standards**
- Overlap with existing laws
- Defer to existing standards

**Burden**
- Impractical for provider type
- Compliance too costly

Links


- Link to the public comments: [http://www.regulations.gov/#!docketBrowser;rpp=25;po=0;dct=PS;D=CMS-2013-0269](http://www.regulations.gov/#!docketBrowser;rpp=25;po=0;dct=PS;D=CMS-2013-0269)