



CMS Proposed Rule to Establish National Emergency Preparedness Standards for Providers

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In response to concerns about the challenges posed by both natural and man-made disasters in the United States in the recent past, the Centers for Medicare & Medicaid Services (CMS) recently published a proposed rule to amend the Medicare Conditions of Participation or Conditions for Coverage to add emergency preparedness requirements for several different provider and supplier types, including hospitals, hospices, ambulatory surgical centers, skilled nursing facilities/nursing homes, home health agencies, comprehensive outpatient rehabilitation facilities, clinics, rehabilitation agencies, and rural health clinics, among others. 78 FED. REG. 79,082 (Dec. 27, 2013). In developing the proposed rule, CMS noted that the current regulatory requirements for providers and suppliers fail to address the need for communication to allow for coordination with other local or state systems of care, contingency planning, and personnel training.

CMS uses the comprehensive emergency preparedness requirements previously proposed for hospital providers as a template. However, several of the proposed requirements are tailored to address the differing needs and circumstances of each provider or supplier type and the population they serve. For example, certain outpatient service providers may have the option to close their facilities or send patients and staff home or to a shelter and will not require policies and procedures regarding the transportation of patients to evacuation locations and/or arrangements with other providers for patients. In contrast, inpatient facilities may bear greater responsibility for ensuring patient and personnel health and safety during an emergency situation, and facilities such as skilled nursing homes/nursing homes often serve as the patient's home and thus have additional requirements with regard to accounting for missing patients.

CMS's proposed rule requires that the following four core components of emergency preparedness be addressed by all providers and suppliers:

- **Risk Assessment and Planning** – Providers and suppliers are required to perform a risk assessment using an integrated “all-hazards” approach, involving an internal assessment of capacities and capabilities, prior to establishing an emergency plan. Each provider or supplier would be required to consider the particular hazards related to its specific physical location and area.
- **Policies and Procedures** – Policies and procedures must be put in place based on the risk assessment and emergency plan established. The specific policies and procedures to be established will again be based on the particular provider/supplier type. For instance, the proposed rule requires only certain inpatient and outpatient providers to develop policies and procedures with regard to a patient tracking system.
- **Communication Plan** – Each provider must to develop and maintain an emergency preparedness communication plan, in compliance with state and federal laws, to ensure that patient care is coordinated within the provider's facility, as well as with state and local public health departments and other emergency systems, in the event of a disaster.
- **Training and Testing** – Each provider is required to create and implement an organized, effective emergency preparedness training and testing program, to include initial and annual personnel training on emergency preparedness policies and procedures. Most providers

are required to participate in or conduct a community (or facility-based) mock disaster drill and/or paper-based, tabletop exercises to test the emergency plan on an annual basis.

While many providers and suppliers may choose to implement the emergency plan at an individual facility level, larger providers and suppliers may choose to execute certain elements of the emergency plan at the organizational level for efficiency. Because the proposed rule reflects CMS's collaboration with several other federal agencies, multiple interagency documents are provided in the appendix to the proposed rule as a resource for providers and suppliers in developing and maintaining their emergency preparedness plans. Comments on the proposed rule must be submitted to the agency for consideration by February 25, 2014.

For a copy of the proposed rule, click [here](#).¹ For a copy of the CMS fact sheet on the proposed rule, click [here](#).²

¹ <http://www.gpo.gov/fdsys/pkg/FR-2013-12-27/pdf/2013-30724.pdf>.

² <http://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-Sheets/2013-Fact-Sheets-Items/2013-12-20.html>.

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