



April 16, 2020

Dear Long Term Care Providers.

As part of Ohio's response to the State of Emergency created by the COVID-19 pandemic, the Ohio Department of Health (ODH), in conjunction with the Ohio Department of Medicaid (ODM), is considering ways in which nursing homes can be leveraged to help meet the surge capacity needed to care for individuals infected with or presumed to be infected with the COVID-19 virus.

ODH and ODM have identified a way to utilize existing nursing homes through consultation and mutual agreement with the Public Health Planning Zone in which the facility is located, by allowing a home to surge their homes in several ways. During this State of Emergency, homes will be permitted to exceed their licensed capacity through the use of certified Health Care Isolation Center (HCIC) beds for quarantine (HCIC-Q), isolation (HCIC-I), or both (HCIC-IQ). Shortly after the end of the State of Emergency, homes will return to their normal licensed capacity and the Isolation Centers will cease operations.

1. Use of entire building as an Isolation Center: An Isolation Center can be as part of the existing nursing home, by temporarily relocating residents so the entire nursing home becomes an isolation center, or by utilizing another building to handle the surge coming into the nursing home.
  - This the the true stand alone model. This is identified when a sponsoring nursing home either uses the entire existing building as an Isolation Center or surges beds into a stand alone building and sets up an HCIC in order to treat COVID-19 patients. This type includes fiscal considerations in section IX of the HCIC Plan. An Isolation Center of this type may be a HCIC-Q, HCIC-I, or HCIC-IQ.
2. Use of a dedicated area as an Isolation Center: Creating an Isolation Center within an existing nursing home, by temporarily identifying an area of the building, that:
  - a. Is a separate separately identifiable part of the building (e.g., a wing or floor)
  - b. Has a separate entrance, if appropriate
  - c. Has segregated, isolation center-only staff
  - This type is similar to the above model, however, it takes place within the nursing home or campus. The facility surges capacity within it's own home or campus and sets up an HCIC to treat COVID-19 patients. This type includes fiscal considerations in section IX of the HCIC Plan. . An Isolation Center of this type may contain an HCIC-Q, HCIC-I, or HCIC-IQ.
3. Internal Facility Cohorting to create HCIC: This is not a HCIC, but is done to accommodate creation of a HCIC. It is limited to a facility's ability to surge their capacity or space. Surging capacity of non-Covid positive or presumptive positive residents within the nursing home plan to facilitate other nursing homes becoming Isolation Centers or for the facility's needs during

the COVID-19 Pandemic. This type of surge does not implicate ODM's increased rates, but ODH must be aware of the increased capacity.

4. Internal Facility Co-horting unrelated to an HCIC: This is not an HCIC but allows a facility to add certified capacity to create internal areas to isolate COVID-19 positive or presumptive positive residents or for facility needs during the COVID-19 pandemic. This type of surge does not implicate ODM's increased rates, but ODH must be aware of the increased capacity.

Any capacity increase is certified and not licensed and is temporary.

Please familiarize yourselves with the Health Care Center Isolation Plan released by ODH and ODM on April 16, 2020, for a better understanding of the requirements for each type before sending your requests.