

COVID-19 FAQ

17. Are EMS personnel included in the category of contractors, consultants, and volunteers who are considered facility staff and, therefore, subject to routine COVID testing when making regular contact with SNF staff and residents?

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Answer: There has been a fair amount of confusion regarding this concept of SNF testing and how it might relate to EMS workers. Because information on this topic has come from both CDC and CMS, the information has been slightly inconsistent and unclear.

Here is what CMS initially said that caused the concern (from QSO-20-38 issued August 26th):

“**Facility staff**” includes employees, consultants, **contractors**, volunteers, and caregivers who provide care and services to residents **on behalf of the facility**, and students in the facility’s nurse aide training programs or from affiliated academic institutions. For the purpose of testing “individuals providing services under arrangement and volunteers,” facilities should prioritize those individuals who are regularly in the facility (e.g., weekly) and have contact with residents or staff. We note that the facility may have a provision under its arrangement with a vendor or volunteer that requires them to be tested from another source (e.g., their employer or on their own).

Some read this language to imply that all EMS workers must be tested, interpreting EMS as “contractors” to the SNF, and missing the fact that this guidance was speaking to services provided “on behalf of the facility.” This also seemed to be somewhat consistent with CDC guidance, which recommended testing all healthcare personnel working in nursing homes. This CDC testing recommendation includes both an initial test as well as weekly tests during the initial stages of re-opening. State and local officials have the authority to adjust the frequency of the testing based on the prevalence of the virus in their communities. EMS personnel are included in the CDC’s definition of healthcare personnel. It is critical to note that these are recommendations for healthcare personnel working in a nursing home (as opposed to working for a nursing home).

Under the CDC’s *recommendations*, if an EMS crew is responding to a nursing home, they would be included within the CDC’s testing recommendations for the nursing homes. Please also note that the CDC offers “recommendations” whereas CMS provides “requirements.” In fact, the CDC in its August 24 guidance, under the section titled, “If you work in a nursing home or a long-term care facility:” says, “Follow any additional guidance from State and local public health officials and the Centers for Medicare and Medicaid Services (CMS).” We read that to say, “CMS requirements trump our recommendations.”

New CMS requirements (QSO-20-39-NH) were released September 17. This document now clears up some of the misunderstanding of their earlier guidance by clearly **excluding** EMS workers from being tested by the SNF prior to entry. That guidance, on page 6 indicates: “Health care workers who are **not employees** of the facility but provide direct care to the facility’s residents, such as hospice

workers, Emergency Medical Services (EMS) personnel, dialysis technicians, laboratory technicians, radiology technicians, social workers, clergy etc., must be permitted to come into the facility as long as they are not subject to a work exclusion due to an exposure to COVID-19 or show signs or symptoms of COVID-19 after being screened.”

It is also important to recognize that CMS requirements varied for emergency vs. non-emergency access to SNFs by the EMS workers, and distinguished between screening and testing, noting:

Entry of Health Care Workers and Other Providers of Services

Health care workers who are not employees of the facility but provide direct care to the facility’s residents, such as hospice workers, Emergency Medical Services (EMS) personnel, dialysis technicians, laboratory technicians, radiology technicians, social workers, clergy etc., must be permitted to come into the facility as long as they are not subject to a work exclusion due to an exposure to COVID-19 or show signs or symptoms of COVID-19 after being screened. We note that EMS personnel do not need to be screened so they can attend to an emergency without delay. We remind facilities that all staff, including individuals providing services under arrangement as well as volunteers, should adhere to the core principles of COVID-19 infection prevention and must comply with COVID-19 testing requirements.

Therefore, we believe this latest CMS guidance means EMS workers can be screened prior to entry into the SNF but would **not** have to be subject to additional testing. Part of this rationale seems to be that the EMS workers are being monitored at their place of employment, and the EMS agency (as a fellow healthcare provider) is using due diligence and care to help avoid and prevent the spread of COVID. Of course, consistent with the emergency vs. non-emergency distinction noted above, for *emergency* care situations, neither testing nor screening should stand in the way of providing patient care.