BURR·ALERT

Steps for Alternate Care Sites

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April 2020

1) LICENSURE

ADPH has issued guidance to allow a provider to add an "alternate care site." There are two types of alternate care sites

- Transfer from one facility type of patients no longer requiring that level of care to another facility type that is going to provide a level of care other than that which the facility accepting transfer is licensed or certified.
- Transfer of patients to a building/facility not constructed or used as a health care facility

To obtain approval, which is required before accepting any patients, the facility must file with ADPH the following:

- a) Statement including the following
 - a. Description of alternate care site
 - b. Name and location of facility
 - c. How it will be used
 - d. Number of residents to be housed
 - e. Level of care to be provided
 - f. Name and location of any other health care provider with whom you are collaborating regarding the use of the alternate care site
- b) Copies of waiver from SHPDA (see below)
- c) Technical Services information submitted
 - a. Name, location and facility ID
 - b. Life safety/evacuation plan
 - c. Fire safety/evacuation polies and procedures
 - d. Most recent inspection on fire alarm system
 - e. Does facility have automatic sprinkler system if yes, provide most recent inspection report
 - f. Does facility have emergency generator?
 - i. If yes, most recent inspection report
 - ii. If no, information on portable generator
 - 1. What will be on emergency generator
 - 2. kW of generator
 - 3. fuel source of generator
 - g. Call light system?
 - h. Construction Type (LSC)

d) Signed attestation certifying you will sufficiently address and provide for the health and safety of the patient/resident population to be served in the alternate care site and meet the population's level of care requirements

2) CERTIFICATE OF NEED

Emergency rules passed by SHCC and CONRB on 4/7/2020 require the filing of a waiver that includes the following information:

- 1. Name and address of the provider;
- 2. Additional institutional health services or any other services, to be provided;
- 3. Number of beds or additional hemodialysis stations requested;
- 4. A description of any facilities being constructed, and equipment being acquired;
- 5. The date that the proposed new facilities, equipment or services will be in service and available to address the emergency;
- 6. Projected cost if known;
- 7. Information demonstrating that the project is required to address the public health emergency identified in the Declaration and this rule; and
- 8. An unqualified commitment, by an authorized officer of the applicant, to comply with the requirements and limitations of this emergency rule and any similar emergency rule adopted by the CON Board.

There is a filing fee of \$50.00, which must be paid through the electronic payment portal.

SHPDA developed a form for use in applying for the CON waiver. The form can be found <u>here</u>.

3) CERTIFICATION/REIMBURSEMENT

This is still an area of that has not been clarified. CMS has instructed providers to reach out to Palmetto (MAC) on how to "enroll" the alternate care site. Under previous CMS guidance to nursing facilities, a facility could operate "under arrangements" with another facility and continue billing under the nursing facility's provider agreement. We have reached out to CMS and Palmetto for additional guidance. The other alternative would be to enroll the "alternate care site" as a temporary or new provider. According to the MAC Hotline document from CMS the temporary billing privileges could be issued in two business days. For full provider enrollment, the MAC information states that an electronic based application is expected to process in seven days and a paper application in 14 days.

Additional information regarding provider enrollment relief can be found here.

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To discuss this further, please contact:

<u>Angie C. Smith</u> at (205) 381-1364 or acsmith@burr.com or the Burr & Forman attorney with whom you normally consult.

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