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| **HF Portal Message/Blog Request Form**  Once you complete this form please forward it to your program manager or other appropriate member of the HFEMSD management team for review.  Once approved, please electronically send this Word document, and any required attachments to **“CDPHE\_HFEMSDPortalMessaging@state.co.us”**  Messages received by 2 pm on Tuesdays will be sent on **Wednesdays**  Messages received by 2 pm on Thursday will be sent on **Fridays**  Emergency requests will be sent the same day they are received | |
| Request date: | 4-6-20 |
| Requested by: | Peter Myers |
| Approved by: |  |
| Requested distribution date: | 4-6-20 |
| Subject line in message center/Blog title: | LTCF Preparation and Rapid Response Checklist |
| Message Text:  To:  **Specify who you are directing this information to, e.g., facility administrators, risk managers, building operations, etc**  From:  **Specify who the message is coming from, e.g., HFEMSD, Division Director, etc.**  Body of Message:  **Ideally, the body of the message is no more than 1/2 page. If it needs to be longer, consider posting a document on the web and including a link in the body. Remember that it takes 24 hours to post a document; i.e., you should request the posting by 2 p.m. for posting by the following day.**  For further information:  **Specify who to contact with questions as applicable.** | To:  Skilled nursing facilities and assisted living residences  From:  Health Facilities and Emergency Medical Services Division (HFEMS)  The novel coronavirus 2019 (COVID-19) Long Term Care Facility Mitigation Work Group, located within the State Emergency Operations Center (SEOC) has developed a COVID-19 preparation and rapid response checklist for long term care facilities. The Colorado Department of Public Health and Environment recommends using the checklist to help slow the spread of COVID-19.  Margaret Mohan  Branch Chief  Acute Care and Nursing Facilities  Health Facilities and Emergency Medical Services Division |

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| **Message Type - Check Only One** | |
|  | EDUCATION /TRAINING |
| XXXXXX | INFORMATION |
|  | REGULATORY/LEGISLATIVE UPDATES |
|  | REQUEST |
|  | WARNING |

| **Place an X in the left column next to the facility types that should receive the message** | | | | | | | | |
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| **Fac.**  **Type** | | **Type Description** | **Subtype Description** | **1 = Yes 0 = No** | | | | |
| **Abbreviation** | **Lic.** | **Mcare** | **Mcaid** | **Mcare/**  **Mcaid** |
|  | 011 | HOSPITAL | SHORT TERM | HOSP-ACU | 1 | 1 | 0 | 0 |
|  | 012 | HOSPITAL | PSYCHIATRIC | HOSP-PSY | 1 | 1 | 0 | 0 |
|  | 013 | HOSPITAL | REHABILITATION | HOSP-RHB | 1 | 1 | 0 | 0 |
|  | 014 | HOSPITAL | CRITICAL ACCESS HOSPITALS | HOSP-CAH | 1 | 1 | 0 | 0 |
|  | 015 | HOSPITAL | LONG TERM | HOSP-LT | 1 | 1 | 0 | 0 |
|  | 016 | HOSPITAL | CHILDRENS | HOSP-CHD | 1 | 1 | 0 | 0 |
|  | 01A | HOSPITAL | MATERNITY | HSP-MTE | 1 | 1 | 0 | 0 |
|  | 01B | HOSPITAL | LICENSEDONLY GENERAL | LICGEN | 1 | 0 | 0 | 0 |
|  | 01C | HOSPITAL | LICENSED PSYCH | LICPSY | 1 | 0 | 0 | 0 |
| X | 021 | NURSING HOME (NH) | SNF/NF DUAL CERT | SNF/NF | 1 | 0 | 0 | 1 |
| X | 022 | NURSING HOME (NH) | SNF/NF DISTINCT PART | S/NF DP | 1 | 0 | 0 | 1 |
| X | 023 | NURSING HOME (NH) | SNF ONLY | SNF | 1 | 1 | 0 | 0 |
| X | 024 | NURSING HOME (NH) | NF ONLY | NF | 1 | 0 | 1 | 0 |
| X | 02A | NURSING HOME (NH) | PRIVATE | NCF-LIC | 1 | 0 | 0 | 0 |
|  | 051 | HOME HEALTH AGENCY (HHA) | MEDICARE/MEDICAID | HHA-1819 | 1 | 0 | 0 | 1 |
|  | 052 | HOME HEALTH AGENCY (HHA) | MEDICAID ONLY | HHA-19 | 0 | 0 | 1 | 0 |
|  | 05A | HOME HEALTH AGENCY (HHA) | HHA LICENSE ONLY - CERT ELIGIBLE | HHA-LCE | 1 | 0 | 0 | 0 |
|  | 05B | HOME HEALTH AGENCY (HHA) | HHA LICENSE ONLY - NOT CERT ELIGIBLE | HHA-LNCE | 1 | 0 | 0 | 0 |
|  | 05C | HOME HEALTH AGENCY (HHA) | HCA LICENSE ONLY | HCA-LIC | 1 | 0 | 0 | 0 |
|  | 05D | HOME HEALTH AGENCY (HHA) | HCA LICENSE - PERSONAL CARE HOMEMAKER | HCA-PHS | 1 | 0 | 1 | 0 |
|  | 05E | HOME HEALTH AGENCY (HHA) | HCA LICENSE - IN-HOME SUPPORT SERVICES | HCA-IHSS | 1 | 0 | 1 | 0 |
|  | 05F | HOME HEALTH AGENCY (HHA) | HCA LICENSE - INTELLECTUAL AND DEVELOPME | HCA-IDD | 1 | 0 | 1 | 0 |
|  | 061 | PSYCHIATRIC RESIDENTIAL TREATMENT FACILITIES | MEDICAID | PRTF | 0 | 0 | 1 | 0 |
|  | 071 | PORTABLE X-RAY SUPPLIERS | MEDICARE | X-RAY | 0 | 1 | 0 | 0 |
|  | 081 | OUTPATIENT PHYSICAL THERAPY/SPEECH PATHOLOGY SERVICES | MEDICARE | OPT-SP | 0 | 1 | 0 | 0 |
|  | 091 | END STAGE RENAL DISEASE FACILITIES | MEDICARE | ESRD | 1 | 1 | 0 | 0 |
|  | 09B | END STAGE RENAL DISEASE (ESRD) | LICENSED | ESRD-LIC | 1 | 0 | 0 | 0 |
| X | 111 | INTERMEDIATE CARE FACILITY FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES | MEDICAID | ICF/IID | 1 | 0 | 1 | 0 |
| X | 11A | INTERMEDIATE CARE FACILITY FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES | LICENSED | ICF/IDDLI | 1 | 0 | 0 | 0 |
|  | 121 | RURAL HEALTH CLINICS | MEDICARE | RHC | 0 | 1 | 0 | 0 |
|  | 131 | PHYSICAL THERAPIST INDEP. PRACTICE | MEDICARE | PTIP | 0 | 1 | 0 | 0 |
|  | 141 | COMPREHENSIVE OUTPATIENT REHABILITATION FACILITIES | MEDICARE | CORF | 0 | 1 | 0 | 0 |
|  | 151 | AMBULATORY SURGICAL CENTER | MEDICARE | ASC | 1 | 1 | 0 | 0 |
|  | 15B | AMBULATORY SURGICAL CENTER (ASC) | LICENSED | ASCLIC | 1 | 0 | 0 | 0 |
|  | 161 | HOSPICE | MEDICARE | HOSPICE | 1 | 1 | 0 | 0 |
|  | 16A | HOSPICE | LICENSED | HSPLIC | 1 | 0 | 0 | 0 |
|  | 191 | COMMUNITY MENTAL HEALTH CENTERS | MEDICARE | CMHC | 1 | 1 | 0 | 0 |
|  | 19A | COMM. MENTAL HEALTH CENTER | CMHC-CLINIC ONLY | CMHCC | 1 | 1 | 0 | 0 |
|  | S22 | HCBS | ADULT DAY | ADAY | 0 | 0 | 1 | 0 |
|  | S24 | HCBS | BRAIN INJURY SUPPORTED LIVING | BISL | 0 | 0 | 1 | 0 |
|  | S26 | HCBS | DAY TREATMENT | DAYTRT | 0 | 0 | 1 | 0 |
|  | S27 | HCBS | TRANSITIONAL LIVING | TRLIV | 0 | 0 | 1 | 0 |
|  | S28 | HCBS | CHILDREN WITH AUTISM | CWA | 0 | 0 | 1 | 0 |
|  | S2A | HCBS | INDEPENDENT LIVING SKILLS TRAINING | ILST | 0 | 0 | 1 | 0 |
|  | S2B | HCBS | BEHAVIORAL PROGRAMMING | BPRO | 0 | 0 | 1 | 0 |
|  | S2C | HCBS | COMMUNITY TRANSITION SERVICES | CTS | 0 | 0 | 1 | 0 |
|  | S2D | HCBS | SPINAL CORD INJURY | SCI | 0 | 0 | 1 | 0 |
|  | S2E | HCBS | SERVICE AGENCY | HCBS-IDD | 0 | 0 | 1 | 0 |
|  | S2F | HCBS | REGISTERED PLACEMENT AGENCY | HCBS-CES | 0 | 0 | 1 | 0 |
|  | S41 | RCF-DD | RESIDENTIAL TREATMENT | RCF-DD | 1 | 0 | 1 | 0 |
|  | S51 | HOSPITAL UNIT | HOSPITAL UNIT | H-UNIT | 1 | 0 | 0 | 1 |
|  | S61 | COMMUNITY CLINIC | COMMUNITY CLINIC | CC | 1 | 0 | 0 | 0 |
|  | S62 | COMMUNITY CLINIC | COMMUNITY CLINIC/EMERGENCY | CCEC | 1 | 0 | 0 | 0 |
|  | S63 | COMMUNITY CLINIC | DOC CLINIC | CCDOC | 1 | 0 | 0 | 0 |
|  | S64 | COMMUNITY CLINIC | CRISIS STABILIZATION CENTER | CCCSC | 1 | 0 | 0 | 0 |
|  | S65 | COMMUNITY CLINIC | VOLUNTARY | CCVOL | 1 | 0 | 0 | 0 |
|  | S71 | CONVALESCENT CENTER | CONVALESCENT CENTER | CONV | 1 | 0 | 0 | 0 |
| X | SA1 | ASSISTED LIVING RESIDENCE | ALR ONLY | ALRONLY | 1 | 0 | 0 | 0 |
| X | SA2 | ASSISTED LIVING RESIDENCE | ALR/ACF | ALR/ACF | 1 | 0 | 1 | 0 |
| X | SA3 | ASSISTED LIVING RESIDENCE | ALR/RTF | ALR/RTF | 1 | 0 | 0 | 0 |
| X | SA5 | ASSISTED LIVING RESIDENCE | ALR/BISL | ALR/BISL | 1 | 0 | 1 | 0 |
|  | SB1 | BIRTH CENTERS | BIRTH CENTERS | BIRTH | 1 | 0 | 0 | 0 |
|  | SC1 | ACUTE TREATMENT UNITS | ACUTE TREATMENT UNITS | ATU | 1 | 0 | 0 | 0 |
|  | SE1 | HOME CARE PLACEMENT AGENCY | HOME CARE PLACEMENT AGENCY | HCPA | 1 | 0 | 0 | 0 |