



**Covid-19**

UPDATE:  
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**Coronavirus / COVID-19  
Response Team**

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**Michigan Executive Order  
2020-50 Dissected**

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## Today's Discussion

1. Who Does This Impact?
2. New Protections for Employees
3. New Protections for Residents
4. Transfers and Discharges

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## Who Does This Impact?

- Long Term Care Facilities
  - Nursing Home (licensed)
  - Home for the Aged (licensed)
  - Adult Foster Care Facility (licensed)
  - Assisted Living Facility (non-licensed)
- Some provisions only apply to nursing homes
- Regional hub- created by the EO
- Alternate care facility- created by the EO
- Hospitals- impacts transfers and discharges

## Protections for Employees

## Protections for Employees

- Employees who test positive for COVID-19 or display one or more of the principal symptoms should remain in their homes as provided in EO 2020-36
  
- Principal symptoms:
  - Fever
  - Atypical Cough
  - Atypical Shortness of Breath

## Executive Order 2020-36

- Cannot discharge, discipline or otherwise retaliate against an employee for staying home when he or she is at particular risk of infecting others with COVID-19
- Individuals who test positive for COVID-19 or display one or more principal symptoms stay home until
  - 3 days have passed since symptoms have resolved AND
  - 7 days have passed since symptoms first appeared or swabbed for positive test

## Precautions For Long Term Care Facility Employees

- Long term care facilities must take all necessary precautions to ensure adequate disinfecting and cleaning of facilities in accordance with CDC
- Use best efforts to provide PPE and hand sanitizer for all employee who interact with residents

## Inform & Notify Employees

- As soon as reasonably possible, but no later than 12 hours after identification, inform employees of the presence of a COVID-19 affected resident (resident who is under investigation for COVID-19 virus or displays one or more of the principal symptoms)
- Notify employees of changes in CDC recommendations related to COVID-19

## Protections for Residents

## Protections for Residents

- No eviction or involuntary discharge for non-payment.
- Can't deny resident access to the facility
- Can't deny admission or readmission based on COVID-19 testing requirements
- Must inform the resident and resident's representatives of a transfer or discharge

## If Resident Obtained Housing Outside Of Facility

- Resident doesn't lose right to return
- Must accept return if you can meet medical needs

## Protections for Residents

- Must screen returning residents
- Must cancel all communal dining
  - How do accomplish this in an AFC?
- Provide PPE and hand sanitizers
- Report cases to health dep't within 24 hours
- Keep inventory of PPE

## Clean & Disinfect In Accordance With CDC

- Schedule for regular cleaning
- Use-EPA-registered, hospital-grade disinfectants
- Focus on shared equipment, frequently touched surfaces in rooms and common areas

## Transfers and Discharges



## **Transfer of Affected Resident – Dedicated Unit**

- Required for Nursing Homes, if less than 80% capacity
- Optional for other facilities

## **Transfer of COVID-19 Affected Residents**

- Must transfer to hospital if medically unstable
- Stable residents must be transferred to:
  - Dedicated unit if you have one and staff have PPE
  - Regional hub, hospital or alternate care facility

## How Do You Transfer Residents?

- Good question...no guidance
  - Ambulance?
  - Facility vehicles?
  - Families?
  - Other options?

## Return of Resident

- Medically stable residents can return:
  - Ideal return is to their original facility if:
    - Dedicated unit, PPE for staff and capacity
  - If not then to a regional hub
  - If not then to an alternate care facility

## Return of Resident

- Alternate care facility must accept if it has capacity
  - Must discharge to facility of residence with capacity
  - If facility of residence has not capacity, must discharge to regional hub
  - Regional hub must then transfer to facility of residence if it has capacity

## Regional Hubs & Alternate Care Facilities

- What is a regional hub?
  - Medicaid certified nursing facility
  - Facilities must request designation as a hub
  - Temporary designation
- Requirements to be a hub?
  - Capacity, proximity to hospitals, performance history, staffing, sanitation and physical space
- Admission to hubs?
  - Preadmission screenings, care determination criteria can occur after admission

## Regional Hubs & Alternate Care Facilities

- Payment and Coordination
  - Hubs will be responsible to notify payers
  - Hubs also responsible for coordinating with programs like PIHPs
- Even less known about alternate care facilities
  - Will be “activated” by the state
  - Example: TCF Regional Care Center
    - Opened April 10th
    - Not aware of any other locations

## Facility Specific Issues

## Nursing Homes

- Nursing Homes with less than 80% capacity must create a “designated unit”
- Must also provide PPE to staff on the unit
- Recommendations on how to create:
  - Create a plan even if you have no affected residents
  - Hold off on moving patients until you have affected residents
  - Use dedicated staff for the unit
  - Use plastic sheeting to separate
  - Work with hospitals to develop a transfer protocol

## Hospitals

- Hospitals must:
  - Accept medically unstable residents
  - Accept stable, affected residents
  - Discharge stable residents
    - This creates a conflict
    - Payment issues
  - Discharge residents in accordance with order
- Hospitals should consider reaching out to long-term care facilities to discuss transfer protocols

## AFCs, HFAs, Assisted Living

- Non-nursing home facilities must:
  - Transfer medically unstable residents to hospitals
  - Transfer affected residents to: hubs, hospitals or alternate care facilities
    - Medicaid Bulletin 20-27 seemed to support keeping residents at facilities if they can be safely isolated
  - Procure PPE
  - Should you create a designated unit?
  - Staffing Issues for AFCs and Assisted Living
    - EO 2020-36

## Other Issues and Uncertainty

## What If A Resident Has Medical Directives That Prohibit Transfer To Hospital?

- Purpose of EO is to prevent spread of COVID-19
- Be sure to include directives with resident
- Transfers raise many, many issues:
  - Within facility
  - Safety concerns
- Return of residents?
  - Isolate/quarantine
- COVID-19 testing rules
- Staffing a designated unit



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