

# Vaccine Mandate Preparedness

With the Supreme Court vaccine mandate decision, state surveyors (and/or CMS) will soon begin enforcing COVID-19 vaccine requirements under F888. The mandate covers all Medicare certified health care facilities under the Medicare & Medicaid requirements of participation. It does not cover Assisted Living Communities or SNFs that are neither Medicare nor Medicaid certified. There are different sets of implementation deadlines based on the state you are located in\*.

The rule applies to any facility staff who provide any care, treatment or services for the facility or its residents. This includes facility employees, licensed practitioners, students, trainees, and volunteers as well as any individuals under contract or under other arrangements who provide care, treatment or other services. A good rule of thumb to follow is if the individual comes into the facility at the request of the facility or resident and they interact with other staff or residents, they should be vaccinated, unless they are a visitor of a resident. Staff who are not covered include staff who work exclusively outside of the facility setting and do not have any direct contact with residents and/or facility staff such as fully remote telehealth or 100% remote workers such who do not work onsite or physically interact with staff or residents. It also includes staff who “very infrequently provide ad hoc services” such as an annual elevator inspector or ad-hoc repair person.

Key actions to take to prepare for the vaccine mandate include the following:

√	<b>CMS Vaccine Mandate</b> Tasks to Complete Prior to 1/27/22, 2/14/22, or 2/21/22* (based on state)	<b>Completion Date</b>
<b>Establish and implement COVID-19 vaccination policies and procedures that includes the following elements:</b>		
	A process for all staff to become fully vaccinated for COVID-19, unless they are approved for a medical or religious exemption or meet criteria for a temporary delay in vaccination.	
	Staff hired on or after February 13, 2022, must have a least the first dose in a primary vaccination series or a single-dose COVID-19 vaccine prior to providing any care, treatment, or other services for the facility.	
	A process to ensure additional mitigation measures are taken to prevent the transmission and spread of COVID-19 among unvaccinated staff members that have requested or been approved for a medical or religious exemption or meet criteria for a temporary delay in vaccination.	
	A process for ensuring that all documentation, which confirms recognized clinical contraindications to COVID-19 vaccines and which supports staff requests for medical exemptions from vaccination, has been signed and dated by a licensed practitioner, who is not the individual requesting the exemption, and who is acting within their respective scope of practice as defined by, and in accordance with, all applicable State and Local laws, and for further ensuring that such documentation contains: <ul style="list-style-type: none"><li><input type="checkbox"/> Information specifying which of the authorized COVID-19 vaccines are clinically contraindicated for the staff member to receive and the recognized clinical reasons for contraindications, and</li><li><input type="checkbox"/> A statement by the authenticating practitioner recommending that the staff member be exempted from the COVID-19 vaccination requirements based on the recognized clinical contraindications.</li></ul>	

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√	CMS Vaccine Mandate	Completion
	Tasks to Complete Prior to 1/27/22, 2/14/22, or 2/21/22* (based on state)	Date
	A process for ensuring the tracking and secure documentation of the vaccination status of staff for whom COVID-19 vaccination must be temporarily delayed.	
	Contingency plans for staff who are not fully vaccinated for COVID-19, including actions that will be taken to get staff fully vaccinated, including the deadline to receive their first (and/or second dose), actions to be taken if they miss their deadline or refuse vaccination and do not have an exemption as well as what additional precautions unvaccinated staff or not yet fully vaccinated staff will need to follow, such as: <ul style="list-style-type: none"> <li>• Use of a NIOSH-approved N95 or equivalent for source control</li> <li>• Reassign to non-patient areas or modification of duties</li> <li>• Follow additional CDC-recommended precautions</li> <li>• At least weekly testing or more frequent testing that currently required based on local, state or CDC recommendations</li> <li>• Check OSHA-required measures which should also be followed</li> </ul>	
	Re-evaluate the vaccination status of all of your staff to ensure that all staff: <ul style="list-style-type: none"> <li><input type="checkbox"/> Have at least the first dose of a two-dose primary series or a single dose of the J&amp;J vaccine, or</li> <li><input type="checkbox"/> Request (or be approved) for a medical or religious exemption, or</li> <li><input type="checkbox"/> Meet <a href="#">criteria for a temporary delay</a> in vaccination.</li> </ul>	
	Establish an education and follow up plan for staff who are not vaccinated or in the process of becoming fully vaccinated.	
√	CMS Vaccine Mandate	Completion
	Tasks to Complete Prior to 2/28, 3/15, or 3/21* (based on state)	Date
	All staff must have completed the vaccine series, except those with granted exemption request and those having a temporary delay recommended by the CDC.	

\*The 1/27/22 & 2/28/22 dates apply to: California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Hawaii, Illinois, Maine, Maryland, Massachusetts, Michigan, Minnesota, Nevada, New Jersey, New Mexico, New York, North Carolina, Oregon, Pennsylvania, Rhode Island, Tennessee, Vermont, Virginia, Washington and Wisconsin

The 2/14/22 & 3/15/22 dates apply to: Alabama, Alaska, Arizona, Arkansas, Georgia, Idaho, Indiana, Iowa, Kansas, Kentucky, Louisiana, Mississippi, Missouri, Montana, Nebraska, New Hampshire, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Utah, West Virginia and Wyoming.

The 2/21/22 & 3/21/22 dates apply to Texas