



**Center for Clinical Standards and Quality/Quality, Safety & Oversight Group**

Ref: QSO19-06-ALL

**DATE:** February 1, 2019

**TO:** State Survey Agency Directors

**FROM:** Director  
Quality, Safety & Oversight Group

**SUBJECT:** Emergency Preparedness- Updates to Appendix Z of the State Operations Manual (SOM)

**Memorandum Summary**

- **Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers:** On September 16, 2016, the *Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers* (Emergency Preparedness Rule) final rule was published in the Federal Register.
- Health care providers and suppliers affected by the rule were required comply and implement all regulations by November 15, 2017.
- We are updating Appendix Z of the SOM to reflect changes to add emerging infectious diseases to the definition of all-hazards approach, new Home Health Agency (HHA) citations and clarifications under alternate source power and emergency standby systems.

**Background**

The Emergency Preparedness Final Rule (81 Fed. Reg. 63860, September 16, 2016) sets out requirements for all providers and suppliers in regards to planning, preparing and training for emergency situations. The rule includes requirements for emergency plans, policies and procedures, communications and staff training. While there are minor variations based on the specific provider type, the rule is applicable to all providers and suppliers. The emergency preparedness requirement is a Condition of Participation/Condition for Coverage which covers the requirement for facilities to have an emergency preparedness program.

**Discussion**

CMS is adding “emerging infectious diseases” to the current definition of all-hazards approach. After review, CMS determined it was critical for facilities to include planning for infectious diseases within their emergency preparedness program. In light of events such as the Ebola Virus and Zika, we believe that facilities should consider preparedness and infection prevention within their all-hazards approach, which covers both natural and man-made disasters.

Additionally, since the release of the Interpretive Guidelines for Emergency Preparedness in 2017, stakeholders and providers have asked for additional clarifications related to portable/mobile generators. CMS has added guidance under Tag E0015- Alternate Source Power as well as clarifications under Tag E0042- Emergency Standby Power Systems. Facilities should use the most appropriate energy source or electrical system based on their review of their individual facility's all-hazards risks assessment and as required by existing regulations or state requirements. Regardless of the alternate sources of energy a facility chooses to utilize, it must be in accordance with local and state laws, manufacturer requirements, as well as applicable Life Safety Code (LSC) requirements.

If a facility risk assessment determines the best way to maintain temperatures, emergency lighting, fire detection and extinguishing systems and sewage and waste disposal would be through the use of a portable and mobile generator, rather than a permanent generator, then the LSC provisions such as generator testing, maintenance, etc. outlined under the National Fire Protection Association (NFPA) guidelines requirements would not be applicable, except for NFPA 70 - National Electrical Code. However, the revisions, as the provisions under emergency preparedness themselves, **do not take away existing requirements** under LSC, physical environment or any other Conditions of Participation that a provider type is subject to (for example to maintain safe and comfortable temperatures).

Finally, in addition to minor technical edits, CMS has also made the change to the HHA citations from 482.22 to reflect the regulatory citation 484.102.

**Contact:** For questions regarding the Emergency Preparedness Rule, please contact [SCGEmergencyPrep@cms.hhs.gov](mailto:SCGEmergencyPrep@cms.hhs.gov).

**Effective Date:** Immediately. The information provided in this memorandum should be communicated with all survey and certification staff, their managers and the State/Regional Office training coordinators within 30 days of this memorandum.

/s/  
Karen Tritz  
Acting Director

Attachment- Advanced Copy- Revised Appendix Z State Operations Manual

cc: Survey and Certification Regional Office Management