



Medicare Accreditation

OPT Emergency Preparedness

The Provider/Supplier must comply with all applicable Federal, State, and local emergency preparedness requirements. The Provider/Supplier must establish and maintain an emergency preparedness program that meets the requirements of this section. The emergency preparedness program must include, but not be limited to, the following elements:



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Emergency plan. The Provider/Supplier must develop and maintain an emergency preparedness plan that must be reviewed, and updated at least annually. The plan must do the following:

Be based on and include a documented, facility-based and community-based risk assessment, utilizing an all-hazards approach.



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Include strategies for addressing emergency events identified by the risk assessment.

Address patient population, including, but not limited to, the type of services the Provider/Supplier has the ability to provide in an emergency; and continuity of operations, including delegations of authority and succession plans.

Address the location and use of alarm systems and signals; and methods of containing fire.



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Include a process for cooperation and collaboration with local, tribal, regional, State, and Federal emergency preparedness officials' efforts to maintain an integrated response during a disaster or emergency situation, including documentation of the Provider/Supplier's efforts to contact such officials and, when applicable, of its participation in collaborative and cooperative planning efforts.

The plan must be developed and maintained with assistance from fire, safety, and other appropriate experts.



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The Provider/Supplier must develop and implement emergency preparedness policies and procedures, based on the emergency plan, risk assessment, and the communication plan set forth in this section.

The policies and procedures must be reviewed and updated at least annually.



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Safe evacuation from the Provider/Supplier, which includes the following:

- Consideration of care and treatment needs of evacuees
- Staff responsibilities
- A means to shelter in place for patients, staff, and volunteers who remain in the Provider/Supplier.

A system of Medical Documentation that:

- preserves patient information
- protects confidentiality of patient information
- secures and maintains the availability of records

The use of volunteers in an emergency and other staffing strategies, including the process and role for integration of State and Federally designated health care professionals to address surge needs during an emergency.



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Communication plan. The Provider/Supplier must develop and maintain an emergency preparedness communication plan that complies with Federal, State, and local laws and must be reviewed and updated at least annually.

The communication plan must include all of the following:

- Names and contact information for the following: (i) Staff (ii) Entities providing services under arrangement (iii) Patients' physicians (iv) Volunteers (v) Other Provider/Suppliers within the same Medicare type
- Contact information for the following: (i) Federal, state, tribal, regional, and local emergency preparedness staff (ii) Other sources of assistance
- Primary and alternate means for communicating with the following: (i) Provider/Supplier's staff (ii) Federal, State, tribal, regional, and local emergency management agencies.



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The communication plan must include all of the following:

- A method for sharing information and medical documentation for patients under the Provider/Supplier's care, as necessary, with other health care providers to maintain the continuity of care.
- A means of providing information about the Provider/Supplier's needs, and its ability to provide assistance, to the authority having jurisdiction or the Incident Command Center, or designee.



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Training and testing. The Provider/Supplier must develop and maintain an emergency preparedness training and testing program that is based on the emergency plan, risk assessment, policies and procedures, and the communication plan of this section. The training and testing program must be reviewed and updated at least annually.

The training program must:

- Consist of initial training in emergency preparedness policies and procedures to all new and existing staff, individuals providing on-site services under arrangement, and volunteers, consistent with their expected roles
- Provide emergency preparedness training at least annually.
- Maintain documentation of all emergency preparedness training.
- Demonstrate staff knowledge of emergency procedures



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Testing.

The Provider/Supplier must conduct exercises to test the emergency plan at least annually. The Provider/Supplier must do the following:

- **Participate** in a full-scale exercise that is community-based or when a community-based exercise is not accessible, an individual, facility-based.
- **Conduct** an additional exercise that may include, but is not limited to following:
 - (A) A second full-scale exercise that is community-based or individual, facility-based.
 - (B) A tabletop exercise that includes a group discussion led by a facilitator, using a narrated, clinically-relevant emergency scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge an emergency plan.
- **Analyze** the Provider/Supplier's response to and maintain documentation of all drills, tabletop exercises, and emergency events, and revise the Provider/Supplier's emergency plan, as needed.



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Integrated healthcare systems.

This section only applying to those providers/suppliers participating in Intergraded Health Systems.

If a Provider/Supplier is part of a healthcare system consisting of multiple separately certified healthcare facilities that elects to have a unified and integrated emergency preparedness program, the Provider/Supplier may choose to participate in the healthcare system's coordinated emergency preparedness program.



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If elected, the unified and integrated emergency preparedness program must do all of the following:

- demonstrate that each separately certified facility within the system actively participated in the development of the unified and integrated emergency preparedness program.
- be developed and maintained in a manner that takes into account each separately certified facility's unique circumstances, patient populations, and services offered.
- demonstrate that each separately certified facility is capable of actively using the unified and integrated emergency preparedness program and is in compliance with the program.
- include a unified and integrated emergency plan that meets the requirements.



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The unified and integrated emergency plan must also be based on and include all of the following:

- A documented community-based risk assessment, utilizing an all-hazards approach.
- A documented individual facility-based risk assessment for each separately certified facility within the health system, utilizing an all-hazards approach.
- A coordinated communication plan, and training and testing programs that meet the requirements in standards of this section.



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Exam

Select the link below to take and submit the exam.

If a navigation pop-up appears for [aaaasf.org](https://www.aaaasf.org), you may choose to navigate, or copy and paste the link below into your browser.

<https://www.aaaasf.org/surveyors/surveyor-exams/>

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For additional resources:

Visit: [ASPR TRACIE CMS EP Rule: Resources at Your Fingertips](#)

or

[CMS EP Rule Crosswalk](#)