



COVID-19 WAIVER OFFBOARDING
August 9, 2022

Presenters

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Land Acknowledgement

We start today with a land acknowledgement. I acknowledge that I am on the traditional homelands of the coastal Salish people. Their people have lived on and stewarded these lands since the beginning of time, and continue to do so today.

We recognize that this land acknowledgement is one small step toward true allyship and we commit to uplifting the voices, experiences, and histories of the Indigenous people of this land and beyond.

Agenda

- Acknowledgement and thank you!
- Reflection on waiver background and current use
- Overview of the department's waiver offboarding process (glidepath)
 - Construction Review Services (CRS)
 - Certificate of Need (CN)
 - Licensing
- Next steps and key dates
- Q&A

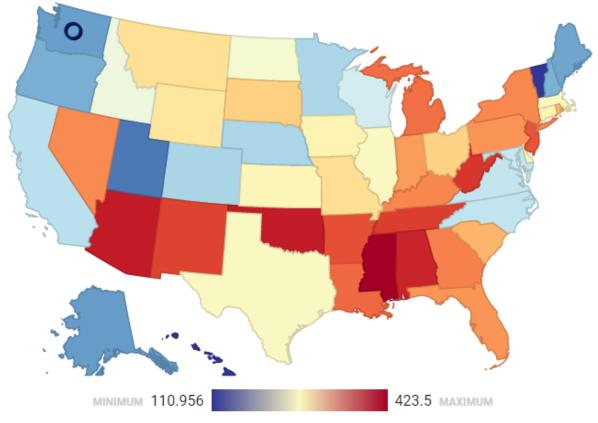
Housekeeping

- Please use the chat function in Zoom to submit questions during the presentation
- Slides will be shared via Gov Delivery next week
- Questions and all required documentation as part of the offboarding process should be submitted to <u>COVIDwaiver@doh.wa.gov</u>
- There will be time for chat at the end of the presentation

Thank You!

- Our state faced unprecedented demands during the COVID-19 pandemic
- Collectively we worked through extreme challenges to ensure patient access to care
- Thank you for your partnership and commitment to the residents of Washington

COVID-19 Deaths per 100K Population



COVID-19 Death Rate by
State | US News Best
States

Background

- Governor Inslee issued
 Proclamation 20-36 early in the pandemic to allow health care facilities to meet demands for COVID surge capacity
- Proclamation 20-36 waived certain CN, CRS, and facility licensing requirements
- Many facilities have used the waivers to meet an increase in demand caused by COVID

Facility	Certificate of Need	Construction Review	Licensing
Ambulatory Surgery	WAIVED	required	required
Hospital, acute	WAIVED	WAIVED	*Partially WAIVED
Hospital, psychiatric	WAIVED	required	required
In-home services			
• Hospice	WAIVED	required	required
Home care (CMS)	WAIVED	NA	required
Nursing Home	WAIVED	required	required
Kidney Dialysis	WAIVED	NA	NA

Proclamation 20-36 Rescinded

- On 7/29/22, Governor Inslee indicated his intent to rescind Proclamation 20-36.
- On 10/27/22, proclamation 20-36 will be formally rescinded
 - 90-days after the announcement
 - facilities must comply with state law applicable for your license type
- Glidepath: If a facility took advantage of the waivers in Proclamation 20-36 and plans to maintain these changes beyond 10/27/22, you must take immediate action to come into compliance



Public and constituent inquiries | 360.902.4111 Press inquiries | 360.902.4136

Inslee announces upcoming rescission of twelve proclamations related to COVID-19

Gov. Jay Inslee today announced the rescission of 12 proclamations under his COVID-19 emergency authority that are no longer needed to respond to the pandemic. All relate to certain health care facilities, including hospitals, long term care facilities, and health care professionals

These emergency orders waived and suspended various statutes and rules, and prohibited certain activities, in order to provide the flexibility needed to respond to the pandemic and protect those receiving care. Examples of suspended statutory requirements include those related to training, testing and certification of various health care

The rescissions apply to Proclamations 20-52 (which incorporates 20-06, 20-10, 20-16, 20-17, and 20-18), 20-

To ensure providers and facilities have time to achieve a smooth transition to pre-COVID statutory requirements the rescission of these orders will become effective in 90 days, on October 27. In support of this transition, the Department of Health and the Department of Social and Health Services have worked diligently to create a glidepath for these health care facilities and professionals. The Department of Health will provide technical assistance to all facilities as they return to full regulatory compliance. DSHS will provide additional technical

In addition, to support the health care system as it addresses certain non-COVID challenges, the state is providing approximately \$22 million to maintain contracted health care staff statewide and to support patients transitioning to community-based services. Some of those funds will be used to support Harborview Medical

The governor had previously rescinded about 75% of all COVID-19 emergency orders. When these 12 healthcare-related emergency orders are terminated, approximately 87% of all COVID emergency proclamations will have been rescinded. COVID-19 remains a state and federal public health emergency and known workplace

Glidepath Approach

- Connecting with stakeholders Staff from the Governor's office and DOH met with stakeholders in early summer to better understand:
 - What waivers were currently being used
 - How facilities had used the waivers to respond to COVID surge
 - What facilities would find valuable as waivers were offboarded
- Glidepath to supporting compliance
 - Reasonable enforcement approach to move toward compliance
 - Focused on processes that may take longer than 90-days

What Does This Mean for Licensed Facilities?

There are two primary pathways facilities can take:

- Revert to original operations by 10/27/22
- **Compliance Glidepath** Follow the departments processes and timelines for coming into compliance.
 - Construction Review Services (CRS)
 - Certificate of Need (CN)
 - Licensing

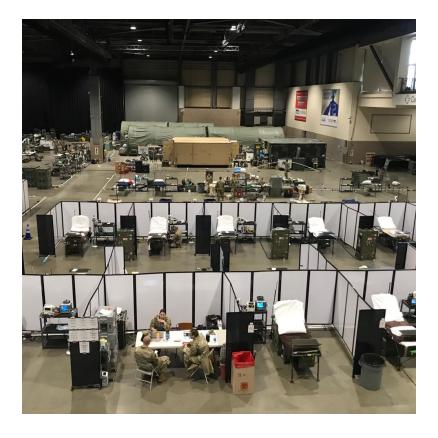


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Construction Review Services (CRS)

Construction Review Services – Examples

- If you made...
 - Changes to the physical environment
 - Added beds
 - Changed your ventilation system
 - Added walls, fixed equipment
 - Added tents, trailers
 - Functional changes to spaces beyond there original approved use
 - Repurposed spaces for more intensive use
 - Changed PACUs to 24 hour stay beds
 - Turned waiting rooms into exam rooms



 If yes to any of the above, and you wish to make these changes permanent, you must go through CRS review.

Construction Review Services – Coming into Compliance

- If your license type requires review by CRS, you must:
- By Aug 28, submit a CRS application.
- Applications must include:
 - A clear description of the scope of work (physical changes, additions, renovations).
 - Appropriate fee



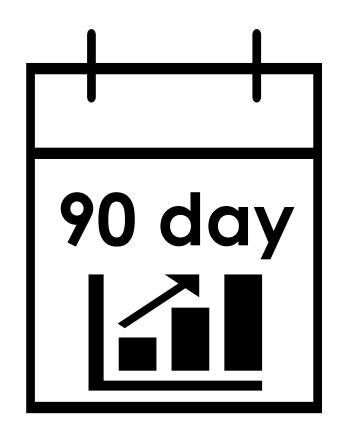
Construction Review Services – Coming into Compliance

- By Oct 27, submit project documentation
- Documentation includes:
 - Functional program
 - Architectural and engineering plans
- Alternatively, facilities must request a technical assistance meeting to establish:
 - Scope of review
 - Documentation requirements
 - Schedule



Construction Review Services – Coming into Compliance

- By Jan 25, begin quarterly Progress reports
- Until fully approved, facilities must respond quickly and in good faith to correct noncompliant construction, eliminate hazards within the environment and complete the review project.
- Progress Reports must:
 - be submitted every 90 days
 - address project status, updates since last report, and planned completion date



CRS Timeline Recap

August 28

• Submit application

January 25

• 1st progress report due

Progress Reports

• Every 90 days



 Submit completed project documents



• 2nd progress report due

Certificate of Need (CN)

Certificate of Need – Examples

- Did you establish/expand a CN reviewable facility, such as:
 - Hospice center/agency
 - Dialysis center
 - Nursing home
 - Hospital beds
 - Elective Percutaneous Coronary Intervention (PCI)
 - Ambulatory Surgery Facility/Center
 - Any tertiary service
- If yes to any of the above, and you wish to continue on a permanent basis, you must submit a CN application

Certificate of Need – Coming into Compliance

- If your license type requires review by CN, you must:
- By Aug 28, submit a Letter of Intent
- Letter of Intent must:
 - Conform to WAC <u>246-310-080</u>
 - Describe the increase in capacity and/or new location(s)
 - Include a patient transition plan
 - Be submitted through COVIDwaiver@doh.wa.gov



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Certificate of Need – Coming into Compliance (Cont'd)

- By Oct 27, facilities must submit a CN application
- Applications must include:
 - Appropriate fee
 - Patient transition plan, if not approved
 - Note: If the CN application is denied, you must execute your patient transition plan and revert operations back to the previously approved CN
- Exception: Facilities with concurrent review cycles.

Certificate of Need – Concurrent Review Exception

- Exception: Facilities with concurrent review cycles.
 - This includes nursing homes, hospice care centers and agencies, and end stage renal disease facilities.
- These facilities must submit a second Letter of Intent,
 CN application, and appropriate fee.
 - These must be submitted in compliance with the department's published schedule the next time the application cycle opens.
 - Note: Following the process above will not adversely affect a facility's CN application.

CN Timeline Recap

August 28

Submit letter of intent

*Exception for facilities with concurrent review



• Submit CN application

Facility Licensing

Licensing – Coming into Compliance

- Hospitals that intend to maintain the following on a permanent basis must submit an updated hospital application and fee (if applicable):
 - added beds
 - additional locations under the hospital license
 - new service lines
- By Oct 27, submit either an updated hospital application -or- a revised licensing renewal application.



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Enforcement

Enforcement

- Failure to revert to pre COVID operation or to follow the department's waiver offboarding requirements will be considered non-compliance
 - The department will use existing structures to identify and manage non-compliance
 - The department may take appropriate enforcement action in cases of non-compliance
 - All patient safety related complaints will be addressed through the department's normal complaint process

Questions

Please use the chat function

Next Steps

- Facilitating two webinars next week
- Developing an FAQ
- Pay attention to key dates
- •We are here to support COVIDwaiver@doh.wa.gov