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CMS Issues Recommendations to Re-Open Health Care Systems in Areas with Low Incidence of COVID-19

As the United States continues to face the unprecedented public health emergency from the COVID-19 pandemic, the tide is turning and some areas throughout the country are seeing a decline in cases. As states and localities begin to stabilize, the Centers for Medicare & Medicaid Services (CMS) is issuing guidance on providing essential non-COVID-19 care to patients without symptoms of COVID-19 in regions with low and stable incidence of COVID-19. This is part of Phase 1 in the Trump Administration's Guidelines for Opening Up America Again.

"By complying with our recommendations to postpone non-essential elective surgeries, our healthcare system has made a tremendous sacrifice. We owe both those on the frontlines and those who postponed procedures for the sake of their colleagues a profound debt of gratitude," said CMS Administrator Seema Verma. "Today, some areas of the country are experiencing fewer cases and lower incidence of the virus, necessitating a more tailored and flexible approach. Every state and local official will need to assess the situation on the ground to determine the best course forward, but these guidelines provide a gradual process for restarting non-COVID-19 essential care while keeping patients safe."

The new recommendations are specifically targeted to communities that are in Phase 1 of the Guidelines for Opening Up America Again with low incidence or relatively low and stable incidence of COVID-19 cases. The recommendations update earlier guidance provided by CMS on limiting non-essential surgeries and medical procedures. The new CMS guidelines recommend a gradual transition and encourage health care providers to coordinate with local and state public health officials, and to review the availability of personal protective equipment (PPE) and other supplies, workforce availability, facility readiness, and testing capacity when making the decision to re-start or increase in-person care.

Prior to entering Phase 1, states or regions need to pass gating criteria regarding symptoms, cases, and hospitals. The CMS recommendations are not meant to be implemented by every state, county, or city at this time and Governors and local leaders ultimately need to make decisions on whether they are appropriate for their communities.

Healthcare facilities and providers that are in areas still seeing a higher number of COVID-19 cases are encouraged to continue following the recommendations made by CMS last month. These were issued to expand capacity to care for patients with COVID-19, to reduce the risks of transmission and exposure to patients, and to conserve adequate supplies, especially PPE and manpower, during the public health emergency.

Healthcare facilities in some areas may have been stretched to their limits of capacity, and surge areas have been needed to augment care. However, many parts of the country have a low, or relatively low and stable incidence of COVID-19, and it is important to allow flexibility to provide non-COVID-19 healthcare. Both sets of recommendations issued by CMS are based on ensuring doctors are making the ultimate decision about patient care. Providers and patients are still

highly encouraged to continue to utilize virtual care for services that can be managed via remote appointments to continue limiting the risk of exposure and spread of this virus.

The new recommendations can be found here: <https://www.cms.gov/files/document/covid-flexibility-reopen-essential-non-covid-services.pdf>

The Guidelines for Opening Up America Again can be found here: <https://www.whitehouse.gov/openingamerica/#criteria>

These actions, and earlier CMS actions in response to COVID-19, are part of the ongoing White House Coronavirus Task Force efforts. To keep up with the important work the Task Force is doing in response to COVID-19 click here www.coronavirus.gov. For information specific to CMS, please visit the [Current Emergencies Website](#).

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