

59AER20-11 Hospital Screening Requirements for Long-Term Care Facility Residents.

(1) Applicability. The requirements of this emergency rule apply to all hospitals licensed under Chapter 395, F.S.

(2) Definitions.

(a) “Long-term care facility” is defined, for purposes of this rule, as any of the following facilities:

1. Nursing Homes, as provided under Chapter 400, F.S.;

2. Group Home Facilities, as provided under Chapter 393, F.S.;

3. Intermediate Care Facilities for the Developmentally Disabled, as provided under Chapter 400, F.S.; and

4. Assisted Living Facilities, as provided under Chapter 429, F.S.;

(b) “Long-term care facility resident” is defined, for the purposes of this rule, as any individual in Florida that is considered to be a resident, client, or patient of a long-term care facility or who will imminently become a resident, client, or patient of a long-term care facility upon discharge from a hospital licensed under chapter 395.

(3) Every hospital must test any long-term care facility resident whose COVID-19 status is unknown using a nucleic acid amplification laboratory test that has been given Emergency Use Authorization from the Food and Drug Administration (“FDA”) for the detection of SARS-CoV-2 (COVID-19) no more than 48 hours prior to discharging the individual to any long-term care facility. Hospitals may discharge a long-term care facility resident who is awaiting test results for COVID-19 if the long-term care facility resident has never tested positive for nor been suspected of having COVID-19, as long as the hospital confirms that the long-term care facility is able to isolate the resident while the hospital’s test results are pending and the hospital confirms that the long-term care facility is able to follow Centers for Disease Control and Prevention (“CDC”) infection prevention and control precautions for a person with unknown COVID-19 status.

(4) A long-term care facility resident that has tested positive for COVID-19 or is symptomatic must be isolated by the hospital pursuant to the hospital’s isolation protocols. A hospital is prohibited from discharging any long-term care facility resident that has tested positive for COVID-19 or is exhibiting symptoms consistent with COVID-19 to any long-term care facility until the long-term care facility resident has been cleared for discharge, unless the receiving facility has a dedicated wing, unit, or building with dedicated staff to accept the COVID-19 positive resident. The long-term care facility resident must meet the following criteria for symptom-based strategy prior to discharge:

(a) At least 24 hours have passed since resolution of fever without the use of fever-reducing medications; and

(b) Improvement in respiratory symptoms; and

(c) The minimum number of days set forth below have passed since symptoms first appeared:

1. At least 10 days have passed since symptoms first appeared, unless the patient has severe or critical illness or is severely immunocompromised, or

2. At least 20 days have passed since symptoms first appeared in patients with severe or critical illness or who are severely immunocompromised.

(d) For persons who never developed symptoms, the date of first positive FDA Emergency Use Authorized COVID-19 diagnostic laboratory test should be used in place of the date of symptom onset.

(5) Test-based strategy: a test-based strategy is only required to discontinue isolation and discharge earlier than would occur with a symptom-based strategy. Hospitals are not required to use the test-based strategy if the symptom-based strategy has been met. Under the test-based strategy, the long-term care facility resident must have:

(a) Resolution of fever without the use of fever-reducing medications;

(b) Improvement in respiratory symptoms; and

(c) Two consecutive negative test results separated by 24 hours. The first by an FDA Emergency Use Authorized COVID-19 nucleic acid amplification laboratory test, and the second by either an FDA Emergency Use Authorized COVID-19 nucleic acid amplification laboratory test or an FDA Emergency Use Authorized COVID-19 antigen test.

(6) This rule supersedes emergency rule 59AER20-8.

Rulemaking authority 408.819, 408.821(4), FS Law Implemented 408.819, 408.821(4) FS

EFFECTIVE DATE: November 3, 2020