

# Emergency Preparedness Rule

## EMERGENCY PREPAREDNESS RULE

The Centers for Medicare & Medicaid Services (CMS) implemented the Emergency Preparedness (EP) Rule on November 16, 2016. Health care providers and suppliers affected by this rule were given until the compliance date of November 15, 2017 to have all elements in place. The purpose of the EP Rule is to establish national emergency preparedness requirements for all-hazards.

The EP Rule emphasizes an all-hazards approach, which addresses a wide spectrum of emergencies or disasters, both natural and man-made. This includes preparedness for emergencies which may include, but is not limited to, equipment and power failures, communication interruptions, cyber attacks, and interruptions in the normal supply of water.

There are 4 elements of compliance with the EP Rule:

- Hazard Vulnerability Assessment or Risk Assessment
- Policies and Procedures
- Communication Plan
- Training and Testing

All 4 elements of the EP Rule must be reviewed and updated annually to maintain compliance.

## WHO MUST PARTICIPATE?

Facilities classified as one of the [17 affected provider types](#). If a facility is unclear on what provider type they are, facilities can use the [QCOR tool](#) to determine their certified provider type under Medicare.

## HAZARD VULNERABILITY ASSESSMENT

A Hazard Vulnerability Assessment (HVA) or Risk Assessment requires facilities to assess and document potential hazards likely to impact their geographical region, community, office and patient population, as well as identify gaps and challenges that should be considered and addressed in developing this EP program.

## POLICIES AND PROCEDURES

The EP Rule requires providers and suppliers to develop emergency policies and procedures to ensure that operational requirements and guiding principles translate into steps that result in successful outcomes. The EP Rule does not include detailed requirements for how facilities should write their emergency preparedness policies and procedures.

## COMMUNICATION PLAN

The EP Rule requires facilities to have a communication plan in place to contact staff, practitioners, and other necessary persons in a timely manner to ensure continuation of patient care and to ensure they are carried out in a safe and effective manner.

## TRAINING AND TESTING

The EP Rule requires all staff members and practitioners to have proper emergency preparedness training to implement the facility's Emergency Preparedness Plan when an emergency situation arises.

The facility is also required to complete two exercises to test the emergency plan, and to document participation.

\*Please be on the look out for an upcoming exercise held by the South Central Healthcare Coalition (SCHCC), which local offices may participate in to meet this requirement. To get connected with the SCHCC, please contact [schcc@epcms.org](mailto:schcc@epcms.org)

[Provider Type Requirements Chart from ASPR TRACIE](#)

Source: Centers for Medicare and Medicaid Services

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Emergency-Prep-Rule.html>

