The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

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To: All BSAS Licensees and Contractors

From: Deirdre Calvert, LICSW, Director of the Bureau of Substance Addiction Services

Date: January 5, 2020

Re: Required Reporting of COVID-19 Positive Cases

The purpose of this memo is to provide guidance to all licensed/contracted programs by the Massachusetts Department of Public Health’s (DPH) Bureau of Substance Addiction Services (BSAS) on the reporting requirements for positive COVID-19 cases in substance use disorder treatment programs. This memo will review the information providers must include when reporting any positive cases of COVID-19 to BSAS.

**This guidance is intended to supplement, not supplant, provisions from regulatory agencies that oversee programs licensed/contracted by BSAS.**

**COVID-19**

As you are aware, 105 CMR 164.035(H) requires programs to report any health or safety conditions at the program through the Required Notification process. This includes all known positive results for COVID-19 for both staff and patients/residents.

In order to address the current public health emergency, BSAS is requiring specific information from the programs in addition to the information submitted in the Required Notification form as follows:

When submitting the Health and Safety Required Notifications Reporting Form (pursuant to 105 CMR 164.035) to BSAS, providers must also complete and submit the attached “Covid19 Fillable Required Notification Form”.

The information that must be provided includes:

* Date of COVID-19 exposure, date of testing, and date of the test results receipt.
* Availability of Personal Protective Equipment (PPE) and face coverings at the program for both staff and patients/residents, including what type of masks or face coverings staff and patients/residents will be using, if the staff are wearing eye protection such as face shields/goggles, and if the program has enough supplies to work with patients/residents who are confirmed or suspected to be infected with COVID-19.
* Measures the program has taken to regularly clean and disinfect high-touch surfaces and common areas using appropriate EPA products on [List N](https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19), including but not limited to bringing in a cleaning service to clean the facility if recommended by DPH Epidemiology.
* Program plans for quarantining staff who have an exposure, isolation for patients/residents who have tested positive for COVID-19, and any other measures taken to reduce transmitting the virus to other patients/residents/staff.
	+ If an inpatient facility does not have the capacity to accommodate the needs of a positive COVID-19 individual, include the program’s plan to transfer the patient/resident to one that can, and include the name of the program receiving the patient/resident.
	+ For an outpatient/ambulatory facility, include information around the patient’s ability to utilize telehealth, take homes for methadone, etc.
* Any contact tracing and communications by the program with individuals who may have been exposed to a person who tested positive for COVID-19, and contact information for those individuals completing the contract tracing.