

69 West Washington Street, Suite 3500 · Chicago, Illinois 60602-3027 · www.dph.illinois.gov

March 24, 2022

TO: Health Care Facilities, including but not limited to, ambulatory surgical treatment centers, hospices, hospitals, physician offices, pharmacies, emergency medical services, IDPH licensed emergency medical service vehicles, chiropractic offices, dental offices, free-standing emergency centers, urgent care facilities, birth centers, post-surgical recovery care facilities, end-stage renal disease facilities, long-term care facilities (including skilled and intermediate long-term care facilities licensed under the Nursing Home Care Act, the ID/DD Community Care Act or the MC/DD Act), Specialized Mental Health Rehabilitation Facilities, assisted living facilities, supportive living facilities, medical assistance facilities, mental health centers, outpatient facilities, public health centers, rehabilitation facilities, residential treatment facilities, and adult day care centers

RE: Preparing for Subsequent Surges of SARS-CoV-2 Infections and COVID-19 Illness

Dear Providers,

The number of Illinoisans being infected with SARS-CoV-2 and those hospitalized or suffering other adverse outcomes related to COVID-19 has sharply decreased since January 2022. As of March 17, 2022, COVID-19 community levels were low in every county in Illinois. Unfortunately, the prospect of new variants of concern, the potential seasonality of transmission, and underlying social and medical vulnerabilities increase the likelihood that we will experience future waves of morbidity and mortality. To ensure the state is prepared for the next surge of COVID-19, we ask that our hospital and congregate living partners have updated emergency plans in place now.

In the event of a surge, a well-developed emergency plan would:

- Ensure adequate supplies of personal protective equipment (PPE), including procedural masks and NIOSH-approved respirators, are readily available (at least a 10-week supply)
- Ensure adequate testing supplies are readily available
- Include a method to anticipate/calculate daily PPE usage or burn rates and significant changes that may occur related to a surge
- Ensure compliance with infection control procedures including updated staff trainings
- Ensure compliance with reporting requirements
- Ensure expedited access to therapeutics for both staff and patients

Hospitals, specifically, should continue to engage in preparedness activities as part of the regional healthcare coalitions. Also, to accommodate for an influx of patients, hospitals should plan for how they will bring on additional staff, cross-train existing healthcare staff, adjust scheduled procedures, and utilize existing and nontraditional spaces for patient care.

Congregate living facilities should also have an identified partner (LTC pharmacy or retail pharmacy) who can supply them with COVID-19 therapeutics in an expedited timeframe in order to be effective in treating Covid-19, given that many treatments need to be administered within 5 days of symptom onset.

Health care facilities should establish and maintain relationships with proven laboratories to support COVID-19 testing of their patients and staff. Due to insufficient funds, the federal Health Resources and Services Administration COVID-19 Uninsured Program has stopped accepting claims for testing. However, there are still options for reimbursement in Illinois. Please find updated guidance from the Department of Healthcare and Family Services here.

We encourage our partners to take full advantage of any remaining federal resources available when preparing for future surges.

If you have any questions regarding this letter, please contact the Illinois Department of Public Health at DPH.SICK@illinois.gov.

Thank you for your critical work on the behalf of every resident of Illinois. We are in this together.

My (May)

Sincerely,

Amaal V.E. Tokars
Acting Director

Illinois Department of Public Health