

CCO COVID-19 Response Protocol- Emergency Face to Face Screening

Name: _____ Completed By: _____ Date: _____

A request for an emergency Face to Face visit requires that the following questions be completed, for both the member and the care manager. CCO's have instituted protocol in which all requests must be made through the CCO chain of support, and approvals will be determined by care management senior leadership with consult from the clinical team.

CCO leadership will screen the Care Manager using the following questions. The Care Manager will screen the member using the following questions. The Care Manager should first ensure that the member is aware of the COVID-19 virus, and informed that these questions are being asked to ensure health and safety.

1. Have you had a cough or fever or shortness of breath in the last few days?
Yes **No**
 - If yes, assist and direct the member/caregiver to contact their Primary Care Physician who will give them further instruction. (Doctor Name) at (telephone number)
2. Have you, or has someone with whom you have had close physical contact, traveled out of the United States within the last 14 days? **Yes** **No**
 - (If yes) "To which countries did you/your contact, travel?" For updated information on affected countries visit: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>
3. Have you had close contact with anyone with confirmed COVID-19 in the past 14 days?
Yes **No**

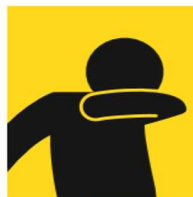
If the member responds "yes" to any of these questions, the Care Manager will coordinate with the member and appropriate health care providers to ensure that the member is referred to the appropriate medical personnel.

4. Would you or your family/ representative like any additional information about COVID-19?
Yes **No**
 - The following website can be shared with member/families if they would like more information.
<https://www.cdc.gov/coronavirus/2019-ncov/about/index.html>

If using Video Conference, the CM can use the visual below to help relay the questions being asked.



FEVER



COUGH



**TROUBLE
BREATHING**