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**Welcome ICF Providers!**

**COVID-19 Updates and Q&A with LTC  
Regulation and DSHS**

**November 1, 2021**

For more information:

Web: <https://hhs.texas.gov/services/health/coronavirus-covid-19/coronavirus-covid-19-provider-information>

Email: [LTCRPolicy@hhs.texas.gov](mailto:LTCRPolicy@hhs.texas.gov)

Phone: 512-438-3161

# COVID-19 Updates

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## Panelist

Susie Weirether

IDD Policy and Rule Manager

Long-term Care Regulations

Policy and Rules

[LTCRPolicy@hhs.Texas.gov](mailto:LTCRPolicy@hhs.Texas.gov)



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# **\*Reminder: Sign-up for GovDelivery to receive alerts\***

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**Go to:**

**<https://service.govdelivery.com/accounts/TXHHSC/subscriber/new>**

- **Enter your email address.**
- **Confirm your email address, select your delivery preference, and submit a password if you want one.**
- **Select your topics.**
- **When done click “Submit.”**



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# Resources

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The following resources are available on the [ICF Provider Portal](#):

Under "COVID-19 Resources"

- NEW\* [ICF/IID COVID-19 Expansion of Reopening Visitation Emergency Rule \(PDF\)](#)
- [ICF/IID COVID-19 Response Emergency Rule \(PDF\)](#)
- [ICF/IID Provider COVID-19 Vaccination Data Reporting Rule \(PDF\)](#)
- Click on "Provider Communications"
  - [PL 21-04](#) HHSC COVID-19 Reporting Process
  - [PL 21-05](#) COVID-19 Vaccination Reporting
  - [PL 21-21](#) NEW\* COVID-19 Response – Expansion of Reopening Visitation (replaces PL 2021-10)

# COVID-19 Q&A Webinar

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## COVID-19 Q&A Webinar Schedule

December 6, 2021

Please feel free to contact us with any questions, comments, or concerns.

Email: [LTCRPolicy@hhs.texas.gov](mailto:LTCRPolicy@hhs.texas.gov)  
Phone: 512-438-3161

Also, as a reminder, the PowerPoint slides will be available on the Provider Portal shortly after the webinar is completed, typically within 48-72 hours.



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# 2021 ICF Conference, “Stronger Together”

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**Wednesday, Nov. 17, 2021 8:30 a.m. – 4:30 p.m.**

There will be sessions for all attendees and separate sessions for the providers and surveyors.

The conference will feature an opening keynote message delivered by highly rated speaker, Lori Porter, and surveyor panel discussion.

Topics include:

- Trauma-Informed Care
- Cultural Diversity in Caregiving
- Top Ten ICF Deficiencies
- Dietetic Services

The [event agenda \(PDF\)](#) features registration links for each session and lists separate sessions for the providers and surveyors.

CE available for Nurses, Social Workers and LPCs

[Email Joint Training for more details.](#)

# Publication of IL 2021-48

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HHSC has published [IL 2021-48 \(PDF\)](#).

This letter is provided as a companion letter to [PL 2019-01 \(PDF\)](#) which describes acceptable documentation a contractor may use to demonstrate the contractor conducted a criminal history check of an employment applicant or an employee. Licensed contractors must continue to follow the guidance outlined in PL 2019-01. Unlicensed contractors must follow the guidance in this information letter.

For questions about this information letter, please contact [LTSSpolicy@hhs.texas.gov](mailto:LTSSpolicy@hhs.texas.gov)



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# COVID-19

## Medicaid/CHIP Division

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HHSC published an information letter to remind providers about what NPI to use when entering data about the attending medical professional.

[IL No. 20-38](#)

Institutional Claim, Attending Provider's NPI



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## LTC Providers Encouraged to Get Ready for Flu Season

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CDC recommends everyone be [vaccinated against the flu](#) by the end of October to avoid peak flu season. Long-term care providers should review their [program requirements](#) for guidance related to vaccination requirements and infection control.

Some of the CDC's recommendations for vaccinating patients in congregate health care settings are:

- The [CDC recommends](#) that LTC facilities offer the flu vaccine to all residents and health care staff throughout the flu season.
- Residents with close contact to someone with COVID-19 and asymptomatic and pre-symptomatic residents in isolation can be vaccinated.
- For residents with suspected or confirmed COVID-19 who are symptomatic, health care personnel can postpone their vaccine until meeting criteria for discontinuing isolation. The person should not be considered moderately or severely ill and should have fully recovered from acute illness.

(continued on next slide)



## LTC Providers Encouraged to Get Ready for Flu Season

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- Administer COVID-19 vaccines without regard to timing of other vaccines. This includes administering the COVID-19 and flu vaccines at the same time. Access the CDC's [COVID-19 vaccine and coadministration with other vaccines](#) for more information.
- Adhere to [standard precautions](#). They are the foundation for preventing transmission of infectious agents in all health care settings and help prevent the flu.
- Implement [droplet precautions](#) for those with suspected or confirmed flu. Do this for seven days after illness onset or until 24 hours after the fever and respiratory symptoms resolve, whichever is longer, while the person is in a long-term care facility.

Per TAC Title 25, Part 1, Chapter 97, report all outbreaks to the local health department, regardless of the provider type. Contact information for your local health department is on the [DSHS website](#).

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# LTC Providers Encouraged to Get Ready for Flu Season

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For more information, view:

- [Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States](#)
- [Managing a Flu Outbreak - U.S. Centers for Disease Control and Prevention \(CDC\)](#)
- [Interim Guidance for Routine and Influenza Immunization Services During the COVID-19 Pandemic](#)

# State of Texas Emergency Assistance Registry

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State of Texas Emergency Assistance Registry (STEAR) is a free program that provides local emergency planners and emergency responders with additional information on the needs in their community.

## **Who Should Register?**

- People with Disabilities
- People with access and functional needs such as:
  - People who have limited mobility
  - People who have communication barrier
  - People who require additional medical assistance during an emergency event
  - People who require transportation assistance
  - People who require personal care assistance

[STEAR – TDEM \(texas.gov\)](http://texas.gov)

# Advanced Positive Behavior Management and Support Workshops

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HHSC is offering two Advanced Positive Behavior Management and Support workshops free of charge on the following dates:

- Efficient Approaches to the Assessment and Treatment of Problem Behavior Nov. 9 – 10, 2021 (via Zoom)
- Efficient Approaches to the Assessment and Treatment of Problem Behavior Dec. 7 – 8, 2021 (Norris Conference Centers – Houston/CityCentre)

The workshops are available to the public, including family members, care givers, providers (educational, geriatric, foster care and long-term services and supports in the intellectual and developmental disabilities and aging population), Adult Protective Services, case managers, and mental health care professionals.

[Training Initiatives | Texas Health and Human Services](#)

# COVID-19 Expanded Visitation Rules

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HHSC Long-term Care Regulation has published revised [COVID-19 Expansion of Reopening Visitation Emergency Rules for Intermediate Care Facilities for Individuals with Intellectual Disabilities \(ICFs/IID\) or Related Conditions \(PDF\)](#).

The rules address changes in response to [Executive Order No. GA-38 \(PDF\)\(link is external\)](#) and updated CDC guidance.

The rules became effective October 20, 2021.

# COVID-19 Expanded Visitation Rules

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Also published as companion resources to the revised COVID-19 Expansion of Reopening Visitation Emergency Rules for ICFs:

- [PL 2021-21, COVID-19 Response – Expansion of Reopening Visitation \(PDF\) for ICF/IID providers](#)
- [ICF COVID-19 Response Plan](#) to include Visitation Rule updates
- [ICF COVID-19 FAQ's](#) to include Visitation Rule updates.

# COVID-19 Expanded Visitation Rules

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Notable changes include:

- Additional, revised, deleted definitions
- Updated requirements for visitation once an ICF has offered a complete series of a one- or two-dose COVID-19 vaccine to individuals and staff and documented each individual's choice to vaccinate or not vaccinate.
- Removed visitation requirements for HHSC attestation form 2195

# COVID-19 Expanded Visitation Rules



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## Definitions

- *Fully vaccinated person* - A person who received the second dose in a two-dose series or a single dose of a one dose COVID-19 vaccine and 14 days have passed since this dose was received.
- *Physical distancing* - Maintaining a minimum distance between persons as recommended by the CDC, avoiding gathering in groups in accordance with state and local orders, and avoiding unnecessary physical contact.
- *Unknown COVID-19 status*--The status of a person, except as provided by the CDC for an individual who is fully vaccinated for COVID-19 or recovered from COVID-19, who:
  - (A) is a new admission or readmission;
  - (B) has spent one or more nights away from the facility;
  - (C) has had known exposure or close contact with a person who is COVID-19 positive; or
  - (D) is exhibiting symptoms of COVID-19 while awaiting test results.

# COVID-19 Expanded Visitation Rules

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- HHSC LTCR no longer requires visitors and individuals wear face masks or face coverings.
- Visits are no longer required to be scheduled in advance.
- Indoor visitation is not limited to areas with a plexiglass barrier or booth.
- ICFs are no longer required to submit an attestation form or receive an approved visitation designation.
- A large ICF no longer must ensure staff are designated to work with one individual cohort.

# COVID-19 Expanded Visitation Rules

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## COVID-19 Vaccine

- The facility must offer a complete series of a one- or two-dose COVID-19 vaccine to individuals and staff and document each individual's choice to vaccinate or not vaccinate
- A facility may ask about a visitor's COVID-19 vaccination status and COVID-19 test results, but a facility **must not** require a visitor to provide documentation of a COVID-19 negative test or COVID-19 vaccination status as a condition of visitation or to enter the facility.

# COVID-19 Expanded Visitation Rules

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## Infection Control

- The facility must develop and enforce policies and procedures that ensure infection control practices for visitors. The policy may include:
  - ✓ Whether the visitor and the individual should wear a face mask or face covering.
  - ✓ Whether the visitor should wear appropriate PPE.
- The facility must inform visitors of the facility's infection control policies and procedures related to visitation.
- A facility must provide hand-washing stations, or hand sanitizer, to the visitor and individual before and after visits.
- The visitor and the individual must practice hand hygiene before and after the visit.

# COVID-19 Expanded Visitation Rules

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- Visitation must be facilitated to allow time for cleaning and sanitization of the visitation area between visits and to ensure infection prevention and control measures are followed.
- Essential caregiver visits and end-of-life visits are permitted for individuals who have COVID-19 negative, COVID-19 positive, or unknown COVID-19 status.
- All other visits are for those individuals with a COVID-19 negative status.
- Essential caregiver visitors and end-of-life visitors do not have to maintain physical distancing between themselves and the individual they are visiting. All other visits must follow CDC recommendations regarding physical distancing and visitation.

# COVID-19 Expanded Visitation Rules



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CDC Recommendations\*

Are the individual and the visitor fully vaccinated?

Yes

No (or unknown vaccination status)

The individual and the visitor may have close and personal contact during the visit.

The individual and visitor must maintain physical distance during the visit.

\*CDC Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic recommendations may change

# COVID-19 Expanded Visitation Rules

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- Visits are permitted where adequate space is available as necessary to ensure physical distancing between visitation groups and safe infection prevention and control measures, including the individual's room.
- A facility must ensure equal access by all individuals to personal visitors, end-of-life visitors, and essential caregivers.
- A facility must ensure a comfortable and safe outdoor visitation area for outdoor visits, considering outside air temperature and ventilation.

# Essential Caregiver Visits

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An ICF must allow essential caregiver visits. The following requirements apply to essential caregiver visits.

- Up to two essential caregivers can be designated per individual and up to two essential caregivers can visit each individual at the same time.
- An essential caregiver visit is not allowed if the visitor has signs or symptoms of COVID-19 or an active COVID-19 infection.
- Essential caregiver visits can occur outdoors, in the individual's bedroom, or in another area in the facility that limits visitor movement through the facility and interaction with other individuals.
- Essential caregivers do not have to maintain physical distancing between themselves and the individual they are visiting but must maintain physical distancing between themselves and other persons in the facility.
- An ICF is no longer required to maintain a separate record of the essential caregiver visit or verify the identity of the essential caregiver at each visit.

# Essential Caregiver Visits

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An ICF must develop and enforce essential caregiver visitation policies and procedures, including:

- a written agreement that the essential caregiver understands and agrees to follow the applicable policies, procedures, and requirements;
- training each designated essential caregiver on infection control measures, hand hygiene, and cough and sneeze etiquette;
- expectations regarding using only designated entrances and exits as directed, if applicable; and
- limiting visitation to the area designated by the facility;
- inform the essential caregiver of applicable policies, procedures, and requirements;

# Essential Caregiver Visits

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(cont.)

- maintain documentation of the essential caregiver's agreement to follow the applicable policies, procedures, and requirements;
- maintain documentation of the essential caregiver's training on infection control measures, hand hygiene, and cough and sneeze etiquette;
- maintain documentation of the identity of each essential caregiver in the individual's records; and
- prevent visitation by the essential caregiver if the essential caregiver has signs and symptoms of COVID-19 or an active COVID-19 infection.



# Salon Services Visits

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The following requirements apply:

- The salon services visitor must pass screening for COVID-19 symptoms.
- The salon services visitor must agree to comply with the most current version of the Minimum Standard Health Protocols – Checklist for Cosmetology Salons/Hair Salons, located on [open.texas.gov](https://open.texas.gov); and
- A salon services visit may be permitted for all individuals with COVID-19 negative status.



# Salon Services Visits

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- The visit may occur outdoors, in the individual's bedroom, or in another area in the facility that limits visitor movement through the facility and interaction with other persons in the facility.
- Salon services visitors do not have to maintain physical distancing between themselves and each individual they are visiting, but they must maintain physical distancing between themselves and all other persons in the facility.
- Rules no longer require the ICF to maintain a separate record of the salon services visit or verify the identity of the salon services visitor at each visit.
- Rules no longer require the ICF to have a testing strategy for salon services visitors.



# Salon Services Visits

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(cont.)

The intermediate care facility must develop and enforce salon services visitation policies and procedures, which include:

- a written agreement that the salon services visitor understands and agrees to follow the applicable policies, procedures, and requirements;
- training each salon services visitor on infection control measures, hand hygiene, and cough and sneeze etiquette;
- expectations regarding using only designated entrances and exits, as directed; and
- limiting visitation to the area designated by the facility.



# Salon Services Visitors

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The ICF must:

- inform the salon services visitor of applicable policies, procedures, and requirements;
- maintain documentation of the salon services visitor's agreement to follow the applicable policies, procedures and requirements;
- maintain documentation of the salon services visitor's training on infections control measures, hand hygiene, and cough and sneeze etiquette;
- document the identity of each salon services visitor in the facility's records; and
- cancel the salon services visit if the salon services visitor fails to comply with the facility's policy regarding salon services visits or applicable requirements in this section.



# Screening Refresher

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As per the [ICF COVID-19 Emergency Response Mitigation](#) rules, all ICFs must screen each employee or contractor for the following criteria before entering the facility at the start of their shift:

- fever, defined as a temperature of 100.4 Fahrenheit and above, or signs or symptoms of a respiratory infection, such as cough, shortness of breath, or sore throat;
- other signs or symptoms of COVID-19, including chills, new or worsening cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea;
- any other signs and symptoms as outlined by the CDC in Symptoms or Coronavirus at [cdc.gov](https://www.cdc.gov);
- contact in the last 14 days with someone who has a confirmed diagnosis of COVID-19, is under investigation for COVID-19, or is ill with a respiratory illness, regardless of whether the person is fully vaccinated, unless the person is entering the facility to provide critical assistance; or
- testing positive for COVID-19 in the last 10 days.

Staff screenings must be documented in a log kept at the facility entrance, and must include the name of each person screened, the date and time of the evaluation, and the results of the evaluation. Staff who meet any of the criteria must not be permitted to enter the facility.



# Screening Refresher

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As per [ICF/IID Expansion of Reopening Visitation Emergency](#) rules, all facilities are required to screen all visitors for signs or symptoms of COVID-19 in accordance with the screening criteria listed in the ICD COVID-19 Emergency Response Mitigation rules (except emergency services personnel entering the facility or facility campus in an emergency).

Visitor screenings must be documented in a log kept at the entrance to the facility, which must include the name of each person screened, the date and time of the screening, and the results of the screening. The visitor screening log may contain protected health information and must be protected in accordance with applicable state and federal law.

A visitor may not participate in a visit if the visitor has signs and symptoms of COVID-19 or active COVID-19 infection.

# CDC Guidance

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CDC guidance for healthcare settings (including ICF/IIDs) updated as of September 10, 2021.

[Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#)



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# CDC Guidance

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Key info for ICFs:

- No changes to the PPE recommended for the care of individuals with suspected or confirmed COVID-19 infection.
- Quarantine no longer recommended for fully vaccinated individuals with exposure to COVID-19 or those residents who have had COVID-19 infection in the prior 90 days.

Reminder: There may be circumstances when Transmission-Based Precautions (quarantine) for these individuals might be recommended (e.g., patient is moderately to severely immunocompromised, if the initial diagnosis of COVID-19 might have been based on a false positive test result).



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# CDC Guidance

CDC guidance as of September 1, 2021:

- In areas with substantial and high transmission, CDC recommends that everyone (including fully vaccinated individuals) wear a mask in public indoor settings to help prevent spread of Delta and protect others.
- Fully vaccinated people might choose to wear a mask regardless of the level of transmission, particularly if they are immunocompromised or at increased risk for severe disease from COVID-19, or if they have someone in their household who is immunocompromised, at increased risk of severe disease or not fully vaccinated.

[Interim Public Health Recommendations for Fully Vaccinated People](#)



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# Quarantine Guidance

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For individuals who require quarantine:

The CDC still endorses the 14-day quarantine period but has also provided alternate options:

- 10-day quarantine, without testing
- 7-day quarantine, with a negative COVID-19 test result **on or after day 5**

CDC guidance: [Science Brief: Options to Reduce Quarantine for Contacts of Persons with SARS-CoV-2 Infection Using Symptom Monitoring and Diagnostic Testing](#)

# COVID-19 Reporting

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ICF/IIDs are **only required** to report to HHSC within 24 hours of:

- a facility's first positive case of COVID-19, or
- a new positive case of COVID-19 after a facility has been without a new case of COVID-19 for 14 days or more.

Facilities **should not** report COVID-19 positive cases to HHSC outside of the two reportable events listed above. Additionally, the reportable events listed above **do not** include an individual that was admitted to the facility with an active COVID-19 infection or a individual that developed COVID-19 while in quarantine upon being admitted to the facility.

# COVID-19 Reporting

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If a facility has a **new** reportable COVID-19 positive case, and **has not reported** a COVID-19 positive case to HHSC **within the past 14 days**, the facility must:

- report the case to HHSC Complaint and Incident Intake (CII) through the Texas Unified Licensure Information Portal (TULIP) or by calling 1-800-458-9858 within 24 hours of the confirmed positive result; and
- complete and submit Form 3613-A Provider Investigation Report within five days from the day a confirmed case is reported to CII. The provider investigation report can be submitted:
  - ❖ via TULIP
  - ❖ by email at [ciiprovider@hhs.texas.gov](mailto:ciiprovider@hhs.texas.gov); or
  - ❖ by fax at 877-438-5827

# COVID-19 Reporting

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Providers must contact their local health department or DSHS if they receive a positive test result for their facility.

Per DSHS, the information must be reported by the provider, regardless of whether the lab reports. This is in order to link the report to the geographical area where the person lives, which may be different than where the testing occurs. This enables accurate tracking and analysis, as well as the appropriate deployment of resources.

If providers suspect a case of COVID-19, they should contact the local health department/authority, or DSHS if a local health department is not available. Test results from the local health department do get reported to DSHS. The notification to the LHD is sufficient.



# COVID-19 Vaccine Resources

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HHSC Long-term Care Regulation published [COVID-19 Vaccine Frequently Asked Questions \(PDF\)](#)

HHSC & DSHS have published [Long-term Care COVID-19 Vaccination Options \(PDF\)](#)

CDC COVID-19 vaccine resource pages:

- [Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States](#)
- [COVID-19 Vaccine FAQs for Healthcare Professionals](#)
- [COVID-19 One-Stop Shop Toolkits](#)
- [Vaccine Recipient Education](#)

# Updated CDC Guidance for LTC Facilities on Accessing COVID-19 Vaccine – Sept. 2021

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The Centers for Disease Control and Prevention has recently updated resources for long-term care facilities on how to help residents and staff access COVID-19 vaccines:

- [Vaccine Access in Long-term Care Settings](#)
- [Care Administrators and Managers: Options for Coordinating Access to COVID-19 Vaccines](#)
- [Jurisdictions Can Ensure COVID-19 Vaccine Access for Staff and Residents in Long-term Care Settings](#)

# COVID-19 DSHS

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## Panelist

David Gruber

Associate Commissioner for Regional and Local  
Health Operations

DSHS

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# COVID-19 Medicaid/CHIP Division

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## Panelist

Dana Williamson

Director, Policy Development and Support

Medicaid/CHIP Division



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Kristi Miller

Manager, Policy Development Support

Medicaid/CHIP Division

# COVID-19 Q&A

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## Panelist

Kirsten Notaro, MA  
ICF Policy Specialist  
Policy, Rules and Training  
Long-term Care Regulatory

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- COVID-19 Q&A
- Live Q&A



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# COVID-19 Q&A

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## Question:

How do the new visitation rules change general visitation requirements?

## Answer:

The facility **must**:

- offer a complete COVID-19 vaccination series
- allow ECG, end-of-life, indoor and outdoor visitation
- inform visitors of their infection control policies and procedures related to visitation

The facility cannot require a visitor to provide documentation of a COVID-19 negative test or COVID-19 vaccination status as a condition of visitation or to enter the residence.



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# COVID-19 Q&A

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## Question:

How do the new visitation rules change the requirements regarding physical contact during a visit?

## Answer:

The individual and his or her visitor may now choose whether or not to have close or personal contact based on CDC recommendations.

EGC and end-of-life visitors may have close or personal contact.



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# COVID-19 Q&A

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## Question:

How do the new visitation rules change requirements regarding face masks during visits?

## Answer:

HHSC LTCR removed requirements related to the use of face masks as we cannot mandate the use of face masks.

However, the facility must develop and implement infection control policies which may include the use of masks.



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# COVID-19 Q&A

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## Question:

What administrative requirements were removed for essential caregiver visits?

## Answer:

The facility does not have to verify the identity of the essential caregiver at each visit.

The facility does not have to keep a separate visitation log for essential caregivers.

Essential caregivers must still be screened at each visit for screening criteria and the essential caregivers for each individual must be documented in their files.



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# COVID-19 Q&A

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## Question:

What administrative requirements were removed for salon services visits?

## Answer:

The new rules removed requirements related to individually logging each salon services visitor.

Rule no longer requires the facility develop a testing strategy for the salon services visitor.

Salon services visitors must still be screened at each visit for screening criteria and the salon services visitor for each individual must be documented.



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# Questions?

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For more information:

<https://hhs.texas.gov/services/health/coronavirus-covid-19/coronavirus-covid-19-provider-information>

Email: [LTCRPolicy@hhs.texas.gov](mailto:LTCRPolicy@hhs.texas.gov)

Phone: 512-438-3161



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# Thank you!

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