

Novel Coronavirus 2019 (COVID-19) Provider Frequently Asked Questions

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The purpose of this document is to offer healthcare providers and facilities with frequently asked questions and answers that may be used to assist in responding to inquiries from their communities. All COVID-19 HAN messages can be found on the [COVID-19 Healthcare Providers](#) webpage. To sign up to receive HANs via email, contact Health.Alert@nh.gov.

PLEASE NOTE: New or updated information appears in orange text.

TESTING

Who should be tested for COVID-19 using RT-PCR?

Any person who is experiencing even mild symptoms of COVID-19 should be tested. These symptoms include, fever, cough, congestion, shortness of breath, muscle aches, chills, new significant fatigue, or loss of taste or smell. In addition anyone over the age of 60, healthcare workers, those with underlying health conditions, household members of vulnerable populations listed previously, child care staff, or employees who cannot avoid prolonged close contact with peers or the general public may be tested. Asymptomatic individuals may also be tested. Anyone tested for COVID-19 should isolate pending test results.

People who have mild symptoms of COVID-19, even if not tested, should stay home until:

At least 10 days have passed
since symptoms first appeared

AND

At least 1 day (24 hours) has
passed since recovery*

**Recovery is defined as a resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms.*

*People who do **not** have symptoms but have been notified that they may have been exposed:*

- through close contact with a person with COVID-19 or a person likely to have COVID-19 (without testing); or,
- any persons who have traveled outside of NH, ME, VT, MA, RI or CT:
 - Stay home ([self-quarantine](#)) for 14 days from the last day of potential exposure.
 - It can take up to 14 days from the time someone is exposed to develop symptoms of COVID-19.
 - May be tested for COVID-19, however, a negative test result will not change the need for a person to self-quarantine.

I am a medical provider and I want to get my patient tested for COVID-19. Where can I send them? The NH DHHS has established new testing locations and a mobile testing team to increase the availability of COVID-19 testing in New Hampshire. The Community-Based COVID-19 Testing Program features fixed drive through testing locations in Claremont, Lancaster, Plymouth, Tamworth, Rochester, Concord, Milford, Keene, Londonderry, New Hampton, and Portsmouth. You can order polymerase chain reaction (PCR) testing for any patient with COVID-19 symptoms (see below) at one of these stations by sending in a completed test requisition form to the NH DHHS COVID-19 Coordinating Office via fax (603-271-3001) or email (covidtesting@dhhs.nh.gov), or by having the patient complete the online [COVID-19 Test Request](#) form.

- o The NH DHHS COVID-19 Coordinating Office will then call the patient directly to schedule an appointment at one of the fixed testing site locations.
- o If a patient is unable to drive to one of the stations due to a disability or physical barrier, NH DHHS will schedule a visiting nurses association (VNA) to go to the patient's home to collect the specimen. Specimens collected at the fixed testing site locations will be sent to Quest Laboratories for processing.

To submit specimens to the NH PHL for COVID-19 testing:

1. Complete a [NH PHL Requisition](#). For shorter turnaround times, consider creating a PHL LabOnline account and filling out the on-line requisition. For more information, email PHL_LIMS_Group@dhhs.nh.gov
2. To send specimens to the NH PHL, collect NP/NS/OP swab and put into *viral transport media (VTM)* or *sterile saline*.

[CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons Under Investigation \(PUIs\) for Coronavirus Disease 2019 \(COVID-19\)](#)

How do I get test results from specimens submitted for testing by the NH Public Health Laboratories?

The NH PHL will not release any test results over the phone. All results will be faxed to the facility indicated in the Submitter Information section of the [NH PHL Requisition](#) as soon as they are finalized. Individuals should contact the healthcare provider who ordered the test to receive their results.

How are COVID-19 tests paid for?

NH has issued an order that requires health insurers to cover services associated with testing for COVID-19. Health insurance companies must provide coverage, prior to application of any deductible and without cost sharing, for the initial healthcare provider visit and test for their members who meet the CDC criteria for testing, as determined by the insured's healthcare provider. For more information visit <https://www.nh.gov/insurance/consumers/health-insurance-coronavirus-faq.htm>

What about point-of-care antigen testing?

NH DPHS recommends that outpatient and ambulatory care facilities look to bring on point-of-care antigen testing for SARS-CoV-2 in order to facilitate rapid testing of patients with [symptoms of COVID-19](#), preferably with the more sensitive test platform (i.e., the Quidel Sofia SARS Antigen test).

There are currently two point-of-care SARS-CoV-2 antigen tests that have received FDA Emergency Use Authorization (EUA) and are able to provide rapid results (within 15 minutes) when testing a symptomatic person for COVID-19:

- [Quidel Sofia SARS Antigen FIA](#)
- [BD Veritor System](#)

For additional information on point-of-care antigen testing read our [Health Alert Network Coronavirus Disease 2019 \(COVID-19\) Outbreak, Update #20: Recommendations on Antigen Testing](#)

CLEANING AND DISINFECTING

How do I clean and disinfect in a healthcare setting?

CDC provides [Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#)

- Ensure that environmental cleaning and disinfection procedures are followed consistently and correctly.
- Routine cleaning and disinfection procedures (e.g., using cleaners and water to pre-clean surfaces prior to applying an EPA-registered, hospital-grade disinfectant to frequently touched surfaces or objects for appropriate

contact times as indicated on the product's label) are appropriate for SARS-CoV-2 in healthcare settings, including those patient-care areas in which aerosol-generating procedures are performed.

- Refer to [EPA-registered disinfectants](#) that have qualified under EPA's emerging viral pathogens program for use against SARS-CoV-2.

RISK-RELATED CONCERNS

What should healthcare personnel (HCP) do if they had a potential exposure to COVID-19?

The CDC offers [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease \(COVID-19\)](#). This interim guidance is intended to assist with assessment of risk, monitoring, and work restriction decisions for healthcare personnel with potential exposure to COVID-19.

What is Multisystem Inflammatory Syndrome in Children (MIS-C)?

Multisystem Inflammatory Syndrome in Children (MIS-C) is a condition that causes inflammation in many parts of the body. Many children with MIS-C have had the virus that causes COVID-19. Protect your child from COVID-19 by taking preventative actions such as washing or sanitizing hands often, avoiding those who are sick, practicing social distancing, having children over the age of 2 wear a cloth face covering in public settings, and frequently cleaning and disinfecting high-touch surfaces. For more information on MIS-C, visit the CDC's "Information for Healthcare Providers about Multisystem Inflammatory Syndrome in Children (MIS-C)" webpage: <https://www.cdc.gov/mis-c/hcp/>

TRAVEL-RELATED CONCERNS

Healthcare providers should:

- Advise patients to defer all cruise ship travel, including river cruises, worldwide.
- Explain that their return travel to the United States may be impacted, and formal quarantine procedures may be implemented if confirmed cases are identified on board.
- Explain that appropriate medical care or medical evacuation may not be available internationally.
- Explain that some countries may refuse docking or disembarkation if there are known or suspected cases on board.
- For patients who still intend to cruise, advise them to
 - Stay in their cabin and notify the onboard medical center immediately if they get sick with fever, new or worsening cough, or trouble breathing during their cruise.
 - Stay home for 14 days after returning from travel, practice social distancing, and monitor their health both during travel and after they return. Social distancing means staying out of crowded places, avoiding group gatherings, and maintaining distance (approximately 6 feet or 2 meters) from others, when possible.
- Advise patients that any travel outside of New England (NH, MA, ME, VT, RI, CT) will be required to quarantine for 14 days upon return.

HEALTHCARE FACILITIES

How should visitors and staff be screened and protected upon entering a healthcare facility?

DHHS recommends that all visitors and staff entering a healthcare facility be screened for symptoms and be provided with a washable (reusable) cloth face covering to wear in order to reduce asymptomatic/pre-symptomatic transmission of COVID-19 while in the facility.

Is it better to wear a cloth face covering or commercial facemask?

- A commercial, disposable face mask is likely more effective for this purpose, so if supplies are adequate, a commercial, disposable face mask can be used instead.
- Anyone wearing a cloth face covering must regularly perform hand hygiene and avoid touching their covering and face to avoid contaminating their hands and contaminating surfaces if they are pre- or asymptotically shedding virus.
- Clearly communicate that a cloth face covering is NOT personal protective equipment (PPE). It protects others in case the wearer is pre-symptomatically or asymptotically shedding virus.

What type of PPE should a healthcare worker wear when caring for a patient with suspect/confirmed COVID-19?

The healthcare worker caring for a patient with suspect/confirmed COVID-19 should:

1. Remove their cloth mask.
2. Secure the cloth mask in a plastic bag.
3. Conduct hand hygiene.
4. Don usual COVID-19 PPE which includes (at a minimum): surgical face mask; eye protection; gown; and, gloves.
5. An N95 or higher level respirator should be used for patients undergoing aerosol-generating procedures.

For additional information on PPE recommendations please reference [Health Alert Network #18](#).

How should I report positive COVID-19 test results?

All healthcare facilities and laboratories should be reporting positive test results to the New Hampshire Division of Public Health Services. Information on how to report is located here: <https://www.dhhs.nh.gov/dphs/cdcs/covid19/covid19-reporting-form.pdf>.

LONG-TERM CARE AND ASSISTED LIVING FACILITIES

Does DHHS provide guidance to long-term care and assisted living facilities regarding the management of COVID-19?

Yes, DHHS has published its [COVID-19 Guidance for Long-Term Care Facilities](#). This guidance provides links to updated documents as new information evolves, including:

- [Centers for Medicare and Medicaid Services \(CMS\) Guidance](#)
- [CDC Guidance for Long Term Care Facilities](#)
- [COVID-19 Response Toolkit for Long Term Care Facilities](#)

More information and resources can be found on the [Long Term Care Facilities tab](#) of the DHHS webpage.

What should facilities do for residents with suspect or confirmed COVID-19?

A resident with new-onset suspected or confirmed COVID-19 should be isolated and cared for using [all recommended COVID-19 PPE](#). Place the resident in a single room with a private bathroom if possible pending results of COVID-19 test. Roommates of residents with COVID-19 should be considered exposed and potentially infected. If any resident is suspected or confirmed to have COVID-19, staff should use [all recommended COVID-19 PPE](#) for the care of all residents on affected units (or facility-wide if cases are widespread).

Should individuals with confirmed or suspect COVID-19 be transferred to a hospital?

Transfer to a hospital is only recommended when the individual requires a higher level of clinical care or if the facility cannot adhere to the appropriate infection control procedures.

How do I actively screen residents?

Screen residents at least daily for fever and [symptoms of COVID-19](#), and take their vital signs including pulse oximetry. Immediately isolate anyone who is symptomatic with symptoms that may indicate COVID-19. Ill residents should be screened at least 3 times daily to quickly identify anyone who would require transfer to a higher level of care. For

[Independent Living Facilities and Retirement Communities](#), the CDC advises encouraging residents to establish a “buddy system” to check in on one another (while observing social distancing) and also encourage residents self-observe for any [symptoms of COVID-19](#).

NH DHHS, DIVISION OF PUBLIC HEALTH SERVICES (DPHS) RESPONSE

We care deeply about the health and wellbeing of the people of NH. We are committed to sharing accurate information with the public to ensure the optimal health and wellbeing of all NH residents while also ensuring we uphold the highest privacy standards for individual patients. As an organization we rely on the best available science and evidence-based practices. In rapidly evolving situations such as this we will provide updated information as it becomes available.

NH DPHS has been working closely with the CDC since the first case of COVID-19 was detected in the United States. We are working very closely with our healthcare and public health partners. Visit our website for our [full case investigation and contact tracing plan](#).

In outbreaks such as this, public health recommendations may change. We encourage you to check these key resources frequently for updates:

- [U.S. Centers for Disease Control and Prevention \(CDC\)](#)
- [NH Department of Health and Human Services \(NH DHHS\)](#)
- [NH DHHS Educational Institution Novel Coronavirus 2019 \(COVID-19\) Frequently Asked Questions \(FAQ\)](#)
- [NH DHHS Novel Coronavirus 2019 \(COVID-19\) Frequently Asked Questions \(FAQ\)](#)

KEY CONTACTS

Topic/Inquiry	Contact	Phone/Email
<ul style="list-style-type: none"> General Information www.nh.gov/covid19 Patients without a primary care provider seeking assessment for COVID-19 testing 	2-1-1 New Hampshire	1-866-444-4211 TTY: 603-634-3388
<ul style="list-style-type: none"> Clinical Questions 	Division of Public Health Services Bureau of Infectious Disease Control	603-271-4496
<ul style="list-style-type: none"> Healthcare Surge Personal Protective Equipment (PPE) Supply Issues 	Requests for PPE need to be submitted electronically	mailto:https://prd.blogs.nh.gov/dos/hsem/?page_id=8673
<ul style="list-style-type: none"> Media Inquiries Requests for Media Support 	State of NH Joint Information Center	603-223-6169 JIC@dos.nh.gov
<ul style="list-style-type: none"> Laboratory Courier Service 	NH Public Health Laboratories	603-271-0305
<ul style="list-style-type: none"> Sampling Supplies 	NH Public Health Laboratories	603-271-4605 PHLClinicalKitOrders@dhhs.nh.gov
<ul style="list-style-type: none"> Physician ordered testing for any patient with COVID-19 symptoms 	NH DHHS COVID-19 Coordinating Office	Fax requisition to 603-271-3001 or email covidtesting@dhhs.nh.gov