

COVID-19 Vaccination Requirements for Health Care Providers and Suppliers



If you are one of the following Medicare or Medicaid providers or suppliers, the CMS staff vaccination requirement applies to you:

- Ambulatory Surgery Centers
- Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services
- Community Mental Health Centers
- Comprehensive Outpatient Rehabilitation Facilities
- Critical Access Hospitals
- End-Stage Renal Disease Facilities
- Home Health Agencies
- Home Infusion Therapy Suppliers
- Hospices
- Hospitals
- Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Long Term Care facilities
- Programs for All-Inclusive Care for the Elderly Organizations (PACE)
- Psychiatric Residential Treatment Facilities (PRTFs)
- Rural Health Clinics/Federally Qualified Health Centers

How do I meet this requirement?



Phase 1 Requirements

Facilities must have **all policies and procedures in place** for ensuring staff are fully vaccinated, providing exemptions, and tracking staff vaccinations.

Staff at all health care facilities included within the regulation must have received, at a minimum, **the first dose of a primary series or a single dose COVID-19 vaccine** prior to staff providing any care, treatment, or other services for the facility and/or its patients.

Phase 2 Requirements

Staff must be fully vaccinated (with the exception of those who have been granted exemptions from the COVID-19 vaccine or for those staff for whom the COVID-19 vaccination must be temporarily delayed, as recommended by CDC).

How is this requirement enforced?



Onsite Survey Reviews for:

- Plan for vaccinating all eligible staff to meet thresholds listed above
- Plan to provide accommodations to those who are exempt
- Plan for tracking and documenting staff vaccinations
- Facility is out of compliance and subject to citations if the above is not met



Facility Citations
Based on severity of deficiency

Opportunity to come into compliance



If facility does not return to compliance, it is at risk for additional enforcement actions, including losing Medicare or Medicaid payment

