

MEDICAL MONITORING STATION (MMS)

Managed Care Organization Information Sheet

In preparation for the surge of COVID-19 cases and the strain on hospitals in the New Orleans region, the State of Louisiana has established a Medical Monitoring Station (MMS) in the Earnest N. Morial Convention Center to ease the burden on acute care hospitals and provide a safe and comfortable place for COVID-19 positive individuals to isolate. This document is to help Managed Care Organizations (MCOs) understand which patients qualify for transfer to the MMS; the process to initiate transfer of these patients; how MCOs can assist MMS case managers in patient plans; and provide answers to frequently asked questions.

As a Medical Monitoring Station, patient care capabilities are limited to basic medical services such as taking vital signs, provision of over-the-counter medications, administering limited amounts of oxygen, and making available an isolated environment outside of the hospital setting.

To qualify for a transfer, patients must:

- Be referred by a physician, PA, or NP (working in a clinic, Urgent Care, ED, hospital, or other healthcare setting with authorized providers)
- Come from LDH Region 1, Region 3, or Region 9
- Have a documented positive COVID-19 test
 - Persons Under Investigation (PUIs) pending test results cannot be accepted. Please refer to the Personal Housing Unit (PHU) Information Sheet for these patients. The PHU located in Lot F of the Ernest N. Morial Convention Center and is exclusively available for symptomatic individuals with pending COVID-19 tests.
- Not meet any of the exclusion criteria described below.

Exclusion criteria include the following:

- Lacks a documented positive COVID-19 test
- Age < 18
- Suicidal/ Homicidal / Violent

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Exclusion criteria continued:

- Behavioral issue or disability requiring a 1:1 sitter
- Altered mental status with delirium
- Acute change in mental status
- Alcohol dependence with possibility of progression to alcohol withdrawal
- Open wounds requiring more than once daily dressing changes
- Requires suctioning
- Requires aerosolizing interventions (nebulizers, CPAP, BIPAP, ventilator)
- Needs continuous telemetry monitoring
- Manifests critical or severe illness:
 - Altered mental status
 - Respiratory distress
 - Worsening respiratory status with
 - Respiratory rate > 24
 - Oxygen saturation < 91% on 3L NC (Note: a physician-to-physician discussion must occur for all patients with SaO₂ 92-93% on 3L NC)
 - Mean arterial pressure (MAP) < 65
 - Requires vasopressors
 - Unable to take PO medications or food (unless patient has a PEG tube) or has persistent vomiting
- Hospice or palliative care patients with life expectancy < 14 days (Note: a physician-to-physician discussion must occur to accept any hospice or palliative care patient)

Instructions for initiating patient transfer:

Call (504) 323-1719. This is an Acadian Ambulance Call Center that is working directly with the MMS located at the Ernest N. Morial Convention Center. They will verify the patient meets the established criteria, and if so, accept the patient for transfer to the MMS. All patients must be transported by Acadian Ambulance. This transport is free of charge to the patient.

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Physician-to-physician discussions must occur for any patients with SaO₂ 92-93% on 3L NC and for any hospice or palliative care patient before they will be accepted. This will be coordinated by the Acadian Ambulance Call Center during the transfer discussion.

The caller will also be asked the following questions at the time of transfer request:

- Patient Name
- Patient DOB/ Age
- Is this a bariatric patient?
- Does the patient have mobility issues?
- Does the patient have an oxygen requirement?
- Is the patient a diabetic on insulin?
- Is the patient in custody/currently incarcerated?
- Is the patient DNR/DNI?

All healthcare providers are required to provide the following for any patient transferred to the Convention Center MMS:

- Patients transferred from the inpatient hospital setting must be sent with a 14-day supply of all medications and medical supplies.
- Patients referred by a clinic, urgent care, or ED must have 14 days worth of all medications and medical supplies e-prescribed, phoned in to, or faxed to the CVS at 800 Canal Street, New Orleans, LA 70112. Phone: 504-528-7099, Fax: 504-528-7871.
 - Specify “MMS patient” in the sig line
 - Rx’s received 8AM-3PM will be delivered the same day.
 - Rx’s received after 3PM will be delivered the next day by 11AM.
 - Medications that must be obtained more urgently after normal hours can be e-prescribed, phoned in to, or faxed to the CVS at 4950 W Esplanade Ave, Metairie, LA 70006. Phone: 504-888-9000. Fax: 504-888-7601.
- Name and phone number of referring physician/PA/NP

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- Patient face sheet
- Documentation of a positive COVID-19 test result
- If coming from the inpatient or ED setting:
 - Discharge summary
 - Code status paperwork
 - Walker or cane as needed for mobility
 - Hospital arm band left on patient (please do not cut it off)
 - Notify the patient's family of their transfer to the MMS

MMS Discharge Checklist:

Clinical Criteria:

- Patient is at his/her baseline oxygen saturation
- Improvement in illness signs and symptoms (cough, SOB, and oxygen requirement)
- Able to provide self-care or someone else is able to provide care during a 14 day from symptoms onset quarantine.
Mitigated transmission risks
 - Patient symptom free for 3 days and is at least 7 days since onset of symptoms OR
 - Patient is improving and does not require oxygen but is not symptoms free. Can provide self-quarantine for period no less than 14 days since the day of symptoms onset OR
 - Able to receive care by a person/place with access to adequate PPE and safe care measures (or by someone already recovered from COVID-19)
 - Ability to adhere to home isolation instructions and risk of transmission to persons with immunocompromising conditions in the home

Discharge Contingencies:

- Verified and documented contact number for patient and primary support person;
- Ensure active phone service, voicemail functioning, and language preference correctly documented as delineated by intake.

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Discharge Contingencies continued:

- Confirm ability to manage ADL/iADLs with degree of support at home
- Confirm patient has resources/social support to receive:
 - Food Services (SNAP benefits, Meals on Wheels)
 - Medications(at least 14-day supply)
 - Housing
 - Transportation
 - Oxygen
 - Other Home Services
 - Financial Support
- Perform DME needs assessment and consider sponsorship from hospital if item unable to be delivered or obtained by primary support person

Discharge Medications / Supplies

- Review home medications patient was admitted with and confirm meds administered during MMS stay and confirm quantity of medication left over.
- Verify medication needs with CVS and patient.
- Verify appropriate follow up labs, appointments, dialysis and other needs, as indicated.
- Ensure patient discharged with mobility resources as they were provided by hospital:
 - Wheelchair
 - Walker
 - Crutches
 - Cane
- Provide a surgical mask as available to infected patients who are discharging home (instructions for use in discharge instructions)

Transportation

- Provide a surgical mask as available to infected patients who are discharging home (instructions for use in discharge instructions)
 - Ambulance (infected person should wear mask in vehicle)
 - Personal pick-up
 - Other

MEDICAL MONITORING STATION (MMS)

Frequently Asked Questions

What types of services are provided at the Convention Center MMS?

- An isolated environment for COVID-19 positive patients
- Twice daily vital signs monitoring
- Blood glucose monitoring for diabetic patients
- Oxygen and titration up to 3L via nasal cannula for oxygen saturation >91%
- Food services and other feeding needs as provided with the patient
- Bedside care—assistance with feeding, toileting, and ambulation
- Administration of medication provided
- Refills of medications through outpatient pharmacy delivery
- Refills of medical supplies through outpatient pharmacy delivery
- Limited in-house over-the-counter medications
- IV fluid intervention, if needed (bolus only)
- Limited emergency IV medications
- Dialysis transportation for patients with already-established dialysis regimens
- Onsite paramedics to initiate care and transport of decompensating patients
- Limited nursing, nurse practitioners, physicians, and EMTs
- Temporary housing

What types of services are NOT provided at the Convention

- Center MMS?
- Labs (blood, urinalysis, etc.)
- Diagnostic imaging
- Physical therapy
- Occupational therapy
- Suctioning (i.e. for patients with tracheostomies)
- Chemical/ physical restraint
- Ventilator support
- On-site pharmacy
- On-site medical supplies
- End-of-life care

Frequently Asked Questions

Who can refer a patient?

Any physician, PA, or NP working in a clinic, urgent care, ED, or hospital can refer a patient for acceptance/transfer. The patient MUST have a documented positive COVID-19 test to be accepted.

Who do I call to transfer a patient?

Exclusively the Acadian Call Center at (504) 323-1719 will coordinate all patient transfer acceptances and dispatch of units.

Can patients drive themselves to the MMS or be dropped off?

No. All patients must be transported by Acadian, which is free of charge to the patient.

What are the hours of patient admission/ transfer acceptance?

Transfers are accepted 24/7.

Who is the accepting physician?

Dr Wright Hartsell, MD is the accepting physician for all patients transferred to the MMS.

How is the nursing report given?

No nursing report will be required. A paper copy of the discharge summary should be included with the patient on transfer to include any information needed by the receiving team.

Are patients with pending COVID tests accepted?

No. All patients admitted to the facility must be confirmed positive for COVID-19 to reduce the risk that a COVID-19-naive patient is infected through nosocomial infection. At this time, the requirement is met only by a positive rtPCR test result for the patient. If you are seeking services for a patient with a pending COVID-19 test, please contact the PHU at 225-465-9183.

Frequently Asked Questions

Can a patient be sent to the MMS for the sole purpose of self-isolation?

Yes. Patients with mild illness who are COVID-19 positive and have a need for assistance with self-isolation can be referred to the MMS.

How will medications and medical supplies be supplied for patients?

Patients transferred from the inpatient hospital setting must be sent with a 14-day supply of all medications and medical supplies.

Patients referred by a clinic, urgent care, or ED must have 14 days worth of all medications and medical supplies e-prescribed, phoned in to, or faxed to the CVS at 800 Canal Street, New Orleans, LA 70112. Phone: 504-528-7099, Fax: 504-528-7871.

- Specify “MMS patient” in the sig line
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Are hospitals expected to send oxygen-dependent patients with a supply of oxygen?

No. Oxygen is supplied by the Convention Center MMS.

How are patients with oxygen requirements cared for?

Patients will have oxygen saturation measured twice daily and oxygen will be weaned based on protocol. We do not have continuous oxygen pulse oximeter monitoring. If the oxygen need increases to more than 3 LPM by nasal cannula, the patient will be transferred to a hospital. We are not able to provide oxygen by other delivery methods or give any nebulized treatments.

Frequently Asked Questions

Are patients with tracheostomy accepted?

We have no capacity for suctioning in the facility, and we are not equipped to contain aerosolized infectious particles. Therefore, we are unable to care for patients with tracheostomies.

Are you able to accept dialysis patients?

Fresenius, DaVita, and DCI have agreed to provide dialysis for COVID patients. All attempts should be made to coordinate dialysis services at one of these companies for a patient discharged with new dialysis needs. We have the ability to transport patients needing dialysis to COVID dialysis clinics near the Convention Center, provided that the patients are ambulatory or can be transported in a wheelchair. We do not have the capability of drawing labs within the facility or weighing patients daily. The staffing ratio will be one LPN or medic per 15 patients, and active management of patients is beyond the capacity of this location.

Is wound care provided?

Basic, once-daily dressing changes can be performed by an LPN, medic, or medical professional school student. Complex wound care such as wound vac cannot be performed. A wound care team will not be available. If a wound progresses, the patient will be transferred to a higher level of care.

Can heart failure patients be cared for?

The MMS does not have the capacity to perform labs, imaging, or active medical management of patients. The MMS can accommodate medication refills and monitoring for clinical deterioration necessitating transfer to a hospital. The MMS not have the capability of measuring daily weights or urine output.

Does the MMS care for Foley / Catch-Dependent patients?

The MMS does accept patients with urinary catheters and need for catheterization. The patient should be sent with 14 days worth of supplies to enable sufficient time to obtain replacements as needed. These supplies will be ordered as would normally be done for outpatients and not supplied by the facility itself.

Frequently Asked Questions

Can incarcerated patients be accommodated?

Yes, however, there is no additional security for these patients. Incarcerated patients must arrive with a security team and handcuffs/restraints, which must be provided for the duration of their stay. Please communicate this information to the patient's security staff/jail for any incarcerated patient being transferred.

Can special diets be accommodated?

The contractor providing meals to patients is able to prepare special diets needed for patients.

Are chaplain services provided at the MMS?

Yes, a chaplain will be available to provide these services at the MMS.

Does the MMS provide counseling services?

THE MMS does not have capacity to provide counseling in person or by telehealth.

What can be done for homeless patients?

Patients without secure housing can be sheltered at the facility and case management will help to coordinate a self-discharge.

Does the MMS provide hospice / palliative care services?

The MMS has limited capacity for active medical management of patients in need variable pain control during disease progression. Staffing ratios will be one LPN or medic per 15 patients. The MMS does not have in-house hospice or palliative care specialists. The MMS is unable to allow visitors in the facility. For this reason, the MMS does not allow any hospice or palliative care patients with a life expectancy less than fourteen days. A physician-to-physician discussion will be coordinated by the Acadian Call Center to discuss the potential transfer of all hospice and palliative care patients to ensure adequate care for accepted patients can be provided.

Frequently Asked Questions

What are the charting capabilities of the MMS?

Only limited paper charting is available at the MMS at this time using forms adapted from those used in emergency shelters during disaster response. The MMS does not have access to remote electronic records at other facilities at this time.

Can the MMS provide telehealth services?

The MMS does not have the capacity to perform telehealth visits.

Will hospitals or primary care physicians be notified of patient discharge from the MMS?

The MMS does not have a process for notifying hospital systems of discharge from the facility. The MMS is actively developing systems to notify primary care providers of discharge to facilitate this transition of care.

How will it be determined which hospital a patient will return to if such transfer is indicated?

Critical patients are taken to the nearest appropriate hospital to meet their clinical needs. Non-critical patients in need of hospitalization can be sent to the hospital of discharge unless that hospital lacks a COVID bed or services needed by the patient (e.g. COVID ventilator, hemodialysis etc.)

What paperwork will be provided to the patient upon discharge?

The MMS uses paper charts. In addition to the hospital discharge paperwork provided by the referring hospital, a brief, hand-written summary of care provided is be sent home with the patient.

Do you have a website?

Please visit <http://ldh.la.gov/index.cfm/subhome/64> for more information and updates on the MMS and PHU.

Frequently Asked Questions

Transfer Checklist:

- Ensure patient qualifies for transfer to the MMS per inclusion and exclusion criteria
- Call the Acadian transfer center at (504) 323-1719
- Address medication needs:
 - Patients transferred from the inpatient hospital setting must be sent with a 14-day supply of all medications and medical supplies.
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- Provide patient face sheet
- Provide documentation of a positive Covid-19 test
- If coming from the inpatient or Emergency Department setting:
 - Discharge summary
 - Code status paperwork
 - Walker or cane as needed for mobility
 - Hospital arm band left on patient
 - Notify the patient’s family of their transfer to the MMS