Mission

Ensure access to testing for all Vermonters who need it and prioritize testing for those who need it most during times of resource scarcity or outbreak situations. This guidance allows Vermont to continue to perform a high volume of testing every day, while ensuring access for priority groups.

Background

The State will work by region to ensure consistent access, including responding to changes in the spread of the virus, such as in an outbreak. The Vermont Department of Health alone cannot meet the statewide need for COVID-19 testing – Vermont needs health care providers and facilities across the state to collaborate in the testing effort. While this document lays out a general framework for statewide testing, not every community has the same mix of providers, and regional strengths and differences should be considered to allow for sustainable testing for the duration of the COVID-19 response. Additionally, the framework for who orders tests, conducts the testing and pays for tests may be different in outbreak response situations.

Vermont continues to work towards the overall goal of quickly identifying, and containing, the presence of COVID-19 in our communities. Achieving this goal requires continuing the necessary volume of tests to have basic monitoring in place and preserving capacity to respond to outbreaks when they occur. Simultaneously, there is a focus on frequent testing in higher risk situations, such as congregate living. By building capacity for prioritized testing everywhere in the state, we are also building capacity to be flexible in response to new needs in the future, such as with increased travel or new reopening phases.

Unless indicated by the Vermont Department of Health for particular epidemiologic response, this testing guidance recommends limiting widespread assurance testing and focusing testing resources on those who have potential risk of exposure, clinically indicated cause to suspect COVID-19 infection, or heightened medical risk. Changes in testing technology, prevalence rates, risk of false positives, supply of test kits, availability of staff or other factors may change that recommendation. This does not replace clinical judgment. Clinicians who have reason to believe that an individual should receive a COVID-19 test, even if they fall outside of designated priority categories, may order those tests.

The Health Department will conduct all contact tracing for all known positive COVID-19 cases. The Health Department will also continue to lead on messaging to the general population about prevention, testing, and quarantine guidance.

For the purpose of this document, "testing" when used generally refers only to PCR diagnostic testing, and not antigen or serology testing.

Who should get tested?

- **Anyone with symptoms of COVID-19** should contact a primary care provider or be connected to primary care through a Federally Qualified Health Center (FQHC). This will allow for appropriate symptom management and overall care. Primary care providers can refer patients to hospital testing locations or test them within their own facilities.

- **People in quarantine** due to exposure to someone who has tested positive for COVID-19, or people in quarantine due to travel who wish to end quarantine early with a negative test. These people should be referred to primary care or an FQHC to discuss testing options and symptom monitoring.

- **People working in health care or congregate care settings** may need to be tested at regular intervals per Health Department guidance (health care settings, long-term care facilities, Department of Corrections, colleges and universities). Implementation of this testing (i.e. ordering, swabbing and delivering results) will be completed by relevant entities depending on the situation.

- **Patients scheduled for a procedure or surgery** involving airway management may need to be tested prior to the procedure (see Inpatient/Outpatient Medical Services for more details). These patients should be referred by their provider to the hospital or health care setting for testing to ensure timely reporting of results.

- **Patients being referred to congregate psychiatric settings** from a hospital Emergency Department must be tested and receive a negative result before they are transported. These tests are collected at the Emergency Department, labelled as priority specimens, and processed by the University of Vermont Medical Center (UVMMC) and the Health Department Laboratory.

- **Patients for whom** a provider determines a test is warranted.

Should patients who do not fit in the above categories be tested?

- Patients who do not fit in the above categories and for whom the provider does not see a clinical, health, or exposure related reason to test are the lowest priority for testing and should only be tested when and if there is capacity to complete that testing.

Who should *not* be tested?

- **People who tested positive previously and had symptoms of COVID-19** do not need to be retested except when determined to be necessary by a health care provider. People in this situation should isolate until they are symptom free for 72 hours and it has been at least 10 days since symptom onset. Neither a negative test for COVID-19 nor a letter from the Department of Health should be required to return to work.

- **People who tested positive previously and did *not* have symptoms of COVID-19** do not need to be retested except in special cases. People should isolate for 10 days since the date of their positive test. If they develop symptoms during that time, they should isolate until they are symptom free for 72 hours and it has been at least 10 days since symptom onset. Neither a negative test for COVID-19 nor a letter from the Department of Health should be required to return to work.

Who collects the sample?

The Health Department will continue to schedule pop-up testing sites to meet the ongoing need but assistance from partners will be necessary to provide sustained routine testing across the state. When reducing or moving Health Department testing sites, Health will work with local health care providers on how to maintain testing capacity. The Health Department has a [map](#) of all non-Health Department-run COVID-19 testing sites in the state on its website.

Health Department Testing – Commissioner of Health is the ordering provider:

- Coordinate community outbreak response with partners on a regional basis - the Health Department may enlist local health care providers during an outbreak situation to assist with testing the population

- Facility outbreak response

- Department of Corrections ongoing testing

- Weekly District Office testing (this space should be reserved for those who cannot access testing through other providers)

- As needed for vulnerable populations

Hospital Testing – ordering provider is either primary care or hospital provider:

- Preventive testing of its own staff

- Pre-procedure testing for patients, see [Inpatient/Outpatient Medical Services](#) for more details (note: pre-procedure patients should NOT be sent to Health Department clinics)

- Symptomatic patients referred by primary care

- Quarantined patients referred by primary care

- Some hospitals may provide specialized testing (e.g., via mobile units, for those experiencing homelessness, nursing homes)

- Patients for whom a provider determines a test is warranted.

FQHC Testing – ordering provider is FQHC provider:

- Preventive testing of their own staff and health care staff who are its patients

- Pre-procedure testing for patients

- Symptomatic patients (if able to test safely)

- Quarantined patients who wish to end quarantine early with a negative test

- Patients for whom a provider determines a test is warranted.

- Some FQHCs may provide specialized testing (e.g., via mobile units, for those experiencing homelessness, nursing homes)

Primary Care Testing – ordering provider is primary care:

- Patients in quarantine who have remained asymptomatic and wish to end quarantine early with a negative test

- Symptomatic patients (if able to test safely)
- Other health care staff (who are the patients of primary care) who need preventive testing
- Patients for whom a provider determines a test is warranted.

EMS Testing – must have ordering provider – when working with Health Department, Health staff must be onsite for clinics:

- Mobile specimen collections for homebound patients and symptomatic patients who are not eligible for other forms of public transportation to access testing sites.

- Augment Health Department staff in outbreak response.

Visiting nurses/home health – must have an ordering provider:

- Mobile specimen collection for homebound patients, and symptomatic patients who are not eligible for other forms of public transportation to access testing sites.

- Support for congregate living testing.

Pharmacy Testing – pharmacist is the ordering provider:

- Individuals in quarantine who wish to end quarantine early with a negative test
    - Particularly travelers and tourists who do not have a primary care provider in Vermont
- Asymptomatic individuals who are concerned they may have been exposed
- Health care staff (e.g. visiting nurses, dentists)

Urgent Care Testing – urgent care provider is ordering provider:

- Pre-procedure testing for patients
- Symptomatic patients
- Patients in quarantine who wish to end quarantine early with a negative test
- Health care staff
- Patients for whom a provider determines a test is warranted.

Colleges – university/college clinician is ordering provider, unless contracting out:

- Students and staff

Which laboratory processes the tests?

Health Department Laboratory

- The Health Department Laboratory is reserved for all Health Department testing (listed above), outbreak response, voluntary psychiatric admissions and Department of Corrections testing.
- Whenever sending a specimen to the Health Department Laboratory, providers must use the Health Department requisition form.

UVMMC

- Receives COVID-19 specimens and triages them for testing either at UVMMC or by an out-of-state laboratory for hospitals and physician offices that are contracted with UVMMC for their reference laboratory testing.

Hospital laboratories

- Some Vermont hospitals have their own laboratories that are used per policies and decisions made by that hospital.

Commercial laboratories

- Commercial laboratories will send specimen collection kits out to providers and process returned specimens. Some hospitals and providers have contracts with these entities.

How do providers access specimen collection kits/testing materials?

Primary care providers and FQHCs

- Through reference laboratories

- Additionally, State Emergency Operations Center and UVMMC are developing a process to fulfill specimen collection requests from primary care practices and FQHCs

Hospitals

- Through reference laboratories and traditional suppliers

- Additionally, the State Emergency Operations Center is exploring ways to coordinate supply acquisition

Pharmacies

- Pharmacies must obtain supplies from a hospital or reference laboratory

Who pays for testing?

Private insurance plans regulated by the Vermont Department of Financial Regulation are required to cover FDA-authorized COVID-19 testing ordered by health care providers based on current clinical guidance without member cost-sharing. Office and hospital charges associated with COVID-19 testing will be covered without member cost-sharing when the primary diagnosis is related to testing.

Tests for uninsured Vermonters can be covered by the HRSA COVID-19 Uninsured Program. This means that for uninsured patients for whom a provider orders a test, HRSA will cover the costs.

Medicaid and Medicare are required to cover in vitro diagnostic products (as defined in Food and Drug Administration (FDA) regulations) for the detection of SARS-CoV-2 or diagnosis of COVID-19, and the administration of those diagnostic products.

What about antigen and serology testing?

The Health Department is continuing to review the accuracy and validity of these tests, and the appropriate implementation of these types of testing platforms.

As of July 27, 2020, the Health Department is not recommending the use of either antigen or serology testing for general use in the population or places of employment.

As serology platforms continue to evolve, the Health Department will select a platform, train laboratory, staff and develop a strategy for testing in Vermont.