

COVID-19

CORONAVIRUS DISEASE

VISION: To improve the health of all Texans.

MISSION: TMA supports Texas physicians by providing distinctive solutions to the challenges they encounter in the care of patients.



Physicians Caring for Texans

Current Face Mask Requirements and Other COVID-19 Policies

JUNE 1, 2021

The following questions and answers help clarify appropriate use of face masks, screening, and quarantines in physicians' offices.

Answers are based on Centers for Disease Control and Prevention (CDC) recommendations:

Q: Do vaccinated patients visiting my office still need to wear a face mask?

A: Patients, physicians, and staff, regardless of their vaccination status, should continue to wear a face mask for source control in health care facilities. CDC guidance on for whom masking is not appropriate, such as those younger than age 2 or those who cannot wear one safely, still applies.

(CDC, [Interim Public Health Recommendations for Fully Vaccinated People](#), May 13, 2021; CDC, [Guidance for Wearing Masks](#), April 19, 2021)

Q: Do vaccinated staff still need to wear a face mask?

A: In general, fully vaccinated staff members should continue to wear a face mask while at work. However, these staff members could dine and socialize together in break rooms and conduct in-person meetings without masks or physical distancing. If unvaccinated personnel are present, everyone should wear a mask, and the unvaccinated individuals should physically distance from others.

(CDC, [Updated Healthcare Infection Prevention and Control Recommendations in Response to COVID-19 Vaccination](#), April 27, 2021)

Q: Do staff exposed to COVID-19 still need to quarantine?

A: Fully vaccinated staff members who are asymptomatic do not need to be restricted from work following their exposure. Unvaccinated staff should follow [quarantine recommendations](#) based on their personal protective equipment usage at the time of exposure. Symptomatic individuals diagnosed with COVID-19 should follow the [CDC's symptom-based criteria](#) for return to work.

(CDC, [Updated Healthcare Infection Prevention and Control Recommendations in Response to COVID-19 Vaccination](#), April 27, 2021)

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Q: Do I still need to screen staff for COVID-19 symptoms and exposure?

A: Fully vaccinated staff members may be exempt from expanded screening testing. However, vaccinated individuals should have a viral test if they are symptomatic, have a higher-risk exposure, or work in a setting experiencing an outbreak. Asymptomatic staff with a higher-risk exposure, regardless of vaccination status, should have a series of two viral tests for COVID-19 infection. In these situations, testing is recommended immediately and five to seven days after exposure. Individuals COVID-19 infection in the past 90 days do not need to be tested if they remain asymptomatic, including those with a known contact.

(CDC, [Updated Healthcare Infection Prevention and Control Recommendations in Response to COVID-19 Vaccination](#), April 27, 2021)

Answer based on Texas Medical Board (TMB) safe-practice standards:

Q: Does the TMB still require minimum COVID-19 safe practice standards?

A: No. The minimum COVID-19 safe practice [standards](#) created in April 2020 expired in October 2020, and physicians and practices are no longer are required to implement the safety measures, which included wearing N95 masks and face shields when within 6 feet of a patient, and screening patients for potential COVID-19 symptoms before any encounter. See details in the *Texas Medicine Today* article, [“TMB No Longer Requiring Practices to Follow COVID-19 Safe-Practice Standards.”](#) (TMA, March 9, 2021)

Answer based on governor’s executive order:

Q: Can practices still require masking for all patients, vaccinated or not?

A: The language of the governor’s May 18, 2021, executive order, [EO-GA-36](#), does not indicate it applies to private entities such as physician offices, including those that receive public funding such as Medicaid or Medicare. Unlike [EO-GA-35](#), which did contain explicit language making it applicable to private entities receiving public funds,¹ EO-GA-36 only refers to governmental entities and officials.

Also, the statutes suspended by EO-GA-36 do not evidence an intent to restrict private entities, as the statutes relate to actions by governmental entities and officials.²

¹ See EO-GA-35, *Relating to COVID-19 vaccines and the protection of Texans’ private health information* (April 25, 2021) (“Any public or private entity that is receiving or will receive public funds... shall not require...”).

² See Tex. Gov’t Code §418.1015(b) (governor’s appointed emergency management director); Tex. Gov’t Code §418.108 (Declaration of Local Disaster); Tex. Health and Safety Code, Ch. 81, Subchapter E (Control Measures); Tex. Health and Safety Code Ch. 121 (Local Public Health); Tex. Health and Safety Code Ch. 122 (Powers and Duties of Counties and Municipalities Relating to Public Health); Health and Safety Code Ch. 341 (Standards for Sanitation and Health Protection Measure); Tex. Local Gov’t Code Ch. 54 (Enforcement of Municipal Ordinances).

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