



**STATE OF MONTANA
CORONAVIRUS
PHASE TWO REOPENING
FREQUENTLY ASKED
QUESTIONS**

State Emergency Operations Center
Joint Information Center (JIC)

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THIS DOCUMENT REFERS TO PHASE 2 OF MONTANA’S REOPENING, BEGINNING JUNE 1. NO DATE HAS BEEN SET FOR PHASE 3.

Phase Two Reopening FAQs

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Further Resources

- Link to Governor's [Directive](#)
- State Business Inquiry Hotline: 1-800-755-6672
- State General COVID-19 Hotline: 1-888-333-0461
- Tourism Informational Hotline: 1-800-847-4868
- Emergency Housing Assistance Program: COVID19HousingAssist@mt.gov
 - Phone: 406.841.2840, TDD: 406.841.2702, Toll Free: 800.761.6264
- Website, details and maps: COVID19INFO@MT.GOV
- Follow Montana Dept. of Disaster & Emergency Services on social media:
 - [Facebook: Montana Disaster and Emergency Services](#)
 - [Instagram: Montanades406](#)
 - [Twitter: Montana DES](#)

I don't have a question, but I would like to voice my concerns/comments about COVID-19 related issues to the Governor's Office. Where do I send my comments?

For information on where to send comments/concerns for the Governor's Office [click here](#).

Who are the Coronavirus Task Force members in Montana? What about the Coronavirus Relief Fund Advisory Council members?

The Coronavirus task force is led by Adjutant General Matthew Quinn, as director of the state Department of Military Affairs and, currently, other members include the directors/administrators of the Disaster and Emergency Services division, Department of Military Affairs, Department of Administration, Department of Commerce, Department of Labor and Industry and Department of Public Health and Human Services, as well as the governor's budget director and chief of staff. The state medical officer is Dr. Gregory Holzman.

As for the Coronavirus Relief Fund Advisory Council, members and more information can be found on page 3 of the [Coronavirus Relief Fund Advisory Council Report](#).

Does the state have Behavioral Health resources for people struggling during the pandemic?

DPHHS has a website for COVID-19 resources for individuals, families and providers [here](#). Also, funding has been made available to behavioral health providers. Find out more details [here](#).

How can I help the state's COVID-19 response effort?

Thank you for your interest in helping the state with the COVID-19 response. Montana's largest need is for Registered Nurses, Licensed Practical Nurses, Paramedics, EMTs, CNAs and contact tracers, however, other positions are also available. Visit <https://dphhs.mt.gov/publichealth/phep/mhmas> to find out more information about paid volunteering.

How do I become a contact tracer?

[Click here](#) for frequently asked questions about becoming a contact tracer. For information on the steps to become a contract tracer, [click here](#).

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Definitions

Vulnerable Individuals/Populations: people over 65 years of age; people with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, or asthma; and people whose immune system is compromised, such as by chemotherapy for cancer or other conditions requiring such therapy. [April 22 Directive for Phase 1, page 4]

Places of Assembly: A building (excluding dwelling units) or outdoor space, or portion thereof, in which persons may gather that require individuals to be in close proximity to each other and lack the ability to easily adapt to required social distancing and sanitation practices before each individual use. [Phase 1 FAQs]

Active cases are those that have not been released from isolation by public health authorities until they are determined to be free of disease or unlikely to be able to transmit following current [CDC guidelines](#).

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Map, Statistics and Reopening Phases

Why do the state and county COVID-19 cases not always match up?

Local public health authorities release individuals from the "active case" category and share that information with state health officials. Notification of state health officials may not occur immediately and local and state maps may be updated on different schedules. For example, some jurisdictions may update their data several times a day, others only once. The state map is updated each morning and, as a result, slight differences in data are reflected at any given time. This is an ongoing process and every reasonable effort is made to ensure consistency.

[For current tracking of COVID-19 impacts click here.](#) Additional [demographic information](#) is available here.

There are new cases in my county but the active cases number went down. What's going on?

Active cases are those that have not been released from isolation by public health authorities. When those cases are determined to be free of disease or unlikely able to transmit following current [CDC guidelines](#), they will be taken off the list as an active case and be moved to "recovered" on the map tally. After a case is moved from "active" to "recovered," it will also remain on the map on "total confirmed cases." There are also instances where case investigations may take some time to determine residency or to confirm the diagnosis and it is possible that a case may be added that is no longer active as a result of the difficulty of the investigation. The latter can result in someone added to the case count, but not considered an active case. In addition, it's important to note that the actual number of active cases reported in a given county may not change day-to-day, but that doesn't mean the list isn't being updated. As individuals are removed from 'active' status, others are being added, so the actual number may remain static. This work is ongoing.

With the phased reopening, do officials worry about upticks in COVID-19 cases?

Yes. With widespread testing and testing of close-contact cases (contact tracing), we expect to see new cases. As the Governor stated in his June 11 press conference, these cases serve as a reminder that we cannot get complacent and that, if unchecked, this virus can spread quickly and quietly. In Montana, local and tribal public health are working carefully to perform contact tracing to get exposed individuals into quarantine and eliminate chains of transmission to keep the virus under control.

Is it possible that instead of moving to Phase 3, we may move back to Phase 1 if Montana sees more cases?

The phased re-opening approach is data dependent. The Governor's Office is waiting to see the impact of Phase 2 before considering next steps forward.

When will Phase 3 start?

The phased re-opening approach is data-dependent, meaning that the data from the previous phase dictates when the next phase will be possible. The Governor's Office is waiting to see the impact of Phase 2 before considering a date for Phase 3.

Won't allowing out-of-staters into Montana lead to an increase in COVID-19 cases?

Montana is slowly opening to visitors and the health and safety of our citizens and visitors is top priority. Visitors are required to follow all state and local restrictions and [guidelines](#). To protect the health and safety of Montanans and travelers to our state, some services and destinations may be limited. According to state epidemiological data, travel associated cases account for about 5% of total cases in Montana since the onset of the pandemic. A majority of cases in Montana come from household contacts, other close contacts, clusters, and community spread.

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The information I want isn't on the map. Can I request it be added or sent to me?

The map is comprised of data that we find to be most useful for our partners and the public. We receive a sizeable number of requests for different data sets and information and are unable to fill individual requests at this time.

However, DPHHS has demographic information posted on [their website](#) and releases weekly reports on "Interim Analysis of COVID-19 cases in Montana," which is the link located on the top of that page. Further information you are looking for may also be available on the [GIS Data List](#).

Due to HIPPA/privacy laws and rapidly changing information, we do not make the raw data public or offer this information in any other format.

If you have questions regarding an individual county's/tribe's data and data-tracking that is not on the [DPHHS website](#), [GIS Data List](#) or on [the map](#), please reach out to that county's/tribe's health department to request further information.

Why are we worried about COVID-19? Is it any different than the seasonal flu?

Influenza (Flu) and COVID-19 are both contagious respiratory illnesses, but they are caused by different viruses. COVID-19 is caused by infection with a new coronavirus (called SARS-CoV-2) and flu is caused by infection with influenza viruses.

Currently, there are seven known coronaviruses that can infect and cause disease in humans, including the virus that causes COVID-19. Four of these viruses circulate commonly around the world and cause a common cold, but sometimes, coronaviruses evolve and become a new human coronavirus. These are called novel coronaviruses. Diseases caused by recent novel coronaviruses include Severe Acute Respiratory Syndrome (SARS), Middle East Respiratory Syndrome (MERS), and Coronavirus Disease 2019 (COVID-19).

While COVID-19 spreads in similar ways to the seasonal flu and can produce similar symptoms, novel coronaviruses have not previously circulated in humans and nobody has immunity. Because of this, COVID-19 has the potential to infect more people and cause more death and severe illness than the seasonal flu. The CDC [estimates](#) that during the 2019-2020 flu season, there were 24,000 - 62,000 deaths from the seasonal flu in the US. From February through July 2020, more than 146,000 Americans have died from COVID-19. [For current tracking of COVID-19 impacts click here](#). Additional [demographic information](#) is available.

In addition, scientists are still learning about how COVID-19 makes people sick and the long-term impacts of infection. Even young and healthy people can have severe cases of COVID-19, and those who only had mild or moderate cases of COVID-19 may continue to experience impacts to their health after they recover. Additional information about differences between flu and COVID-19 can be found [here](#).

I have heard that 98% of people who get COVID-19 recover and this is all a huge overreaction. What are the known health implications at this time?

We are learning more about the health consequences of COVID-19 all the time. What we know now is that many people are hospitalized and remain sick for several weeks. Although the long-term results are unknown, the seriousness of COVID-19's effect on a given individual is unpredictable. Moreover, while it

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is true that overall, the rate of death due to COVID-19 is estimated at 1 or 2 percent of those who contract it, older adults, people with underlying medical conditions, and people of color (including African Americans and American Indians) experience higher rates of death than does the general population. (For reference, see <https://www.cdc.gov/mmwr/volumes/69/wr/mm6928e1.htm>.)

COVID-19 can easily spread from person to person and the number of cases within a community can explode quickly. Limiting the spread of COVID-19 is essential to prevent hospitals and frontline medical workers from becoming overwhelmed with more patients than they have resources.

The information on the map appears to old, incorrect, or the map is not loading correctly. What do I do?

Different browsers work more or less well with the map if the page is not refreshed regularly and the cache is not cleared. Please try refreshing your browser and clearing your cache.

We also suggest viewing the map on a computer instead of a phone. If you are still experiencing difficulties with the map, please email us at covid19info@mt.gov and include a screenshot of what you are seeing..

Does the number of people getting tested include retests?

No, an individual’s positive test result is included only once. If someone receives follow-up testing to confirm the results of a COVID-19 test, a second positive result will not be recorded as a separate case.

Are the confirmed cases on the state’s COVID-19 tracking map all laboratory confirmed and is each one reported once?

Yes. The number of positive cases is reported on the state COVID-19 tracking map only once. These are listed under “total confirmed cases.” However, all tests are included in the total tests number. Confirmed cases are determined through laboratory testing. In some situations, medical providers conduct additional tests as needed.

Where can data be found regarding hospital capacity and resources in Montana?

Information regarding hospital capacity and resources is available here:
<https://dphhs.mt.gov/publichealth/cdepi/diseases/coronavirusmt/demographics>

How is it possible that the total number of beds in Montana's biggest hospitals reduced during the spike in COVID-19 cases?

At the request of the hospitals, a change was made to report only beds that are actually staffed to more accurately reflect the number of available beds. Some hospitals have more beds, but many lack sufficient staff to use all beds. This is often because hospital staff are on leave due to COVID-19 infection or quarantine. We therefore only report the number of beds actually available for use.

Where does the information included in the COVID-19 Hospital Occupancy and Capacity in Montana report come from?

All the information included in the COVID-19 Hospital Occupancy and Capacity in Montana report, such as the statewide bed use and capacity and ICU beds and ventilators available at each hospital is reported

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every day to the Department of Public Health and Human Services. The information provided by each hospital is then used to create the report that is updated online at the end of each day.

What percentage of COVID-19 tests in my community have come back positive?

The Centers for Medicaid and Medicare Services (CMMS) compiles data on COVID-19 test positivity rates by county and releases that data bi-weekly. Download the latest report by clicking here: <https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg/>

Why are cases reported by county instead of by city or zip code?

Montana's public health system is structured such that every county has a county health department. These departments serve entire counties, rather than certain zip codes, cities, or reservations. This structure also helps protect confidential personal information that might otherwise be identifiable, especially in smaller communities.

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Masks/Face Coverings

WHO IS REQUIRED TO WEAR A MASK

Are masks mandated in all Montana counties?

Yes. As of November 20, masks are required in all Montana counties regardless of case count.

Who is not required to wear a mask?

- Children under the age of five. All children between the ages of two and four, however, are strongly encouraged to wear a face covering in accordance with the provisions of this Directive. Children under the age of two should not wear a face covering;
- persons consuming food or drinks in an establishment that offers food or drinks for sale;
- persons engaged in an activity that makes wearing a face covering impractical or unsafe, such as strenuous physical exercise or swimming; persons seeking to communicate with someone who is hearing impaired;
- persons giving a speech or engaging in an artistic, cultural, musical, or theatrical performance for an audience, provided the audience is separated by at least six feet of distance; persons temporarily removing their face covering for identification purposes;
- persons required to remove face coverings for the purpose of receiving medical evaluation, diagnosis, or treatment; or
- persons who have a medical condition precluding the safe wearing of a face covering.

What if I have a medical condition that prevents me from wearing a face covering?

We advise that if you are unable to wear a face covering due to a medical condition, you discuss further options with your primary care provider. Other options such as face shields may be an acceptable alternative, although they do not provide equivalent protection to face coverings. While face coverings are particularly important in settings where people are close to each other or where social distancing is difficult to maintain, maintaining social distancing and practicing good hygiene habits (such as handwashing) are also an important part of stopping the spread of COVID-19. We also suggest you request accommodations if needed, including curbside pick-up, attending events remotely, etc.

If I have already recovered from COVID-19, am I exempt from the face covering mandate?

No, you are not exempt from the face coverings mandate. [The CDC recommends](#) that all people, whether or not they have had COVID-19, wear masks.

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TYPES OF MASKS AND THEIR EFFECTIVENESS

What requirements does a cloth mask need to meet?

The [CDC advises](#) that cloth masks:

- fit snugly, but comfortably, against the side of the face
- completely cover the nose and mouth
- are secured with ties or ear loops
- include multiple layers of fabric
- allow for breathing without restriction
- can be laundered and machine dried without damage or change to shape

What is the science behind the effectiveness of wearing a cloth mask?

[The CDC states](#) that cloth masks are recommended as a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the mask coughs, sneezes, talks, or raises their voice. This is called source control. This recommendation is based on what we know about the role respiratory droplets play in the spread of the virus that causes COVID-19, paired with [emerging evidence](#) from clinical and laboratory studies that shows masks reduce the spray of droplets when worn over the nose and mouth. COVID-19 spreads mainly among people who are in close contact with one another (within about 6 feet), so the use of masks is particularly important in settings where people are close to each other or where social distancing is difficult to maintain.

Protection offered by face masks depends on how consistently the mask is worn, if it is worn properly (to include covering the nose), and how the mask is constructed can cause variation on how well the disease is able to spread. It is very important to keep in mind that face masks are a supplement, and not a substitute, to other protective measures. If people wear masks properly, but stop cleaning or sanitizing their hands, or stop maintaining a 6-foot distance from others, the total amount of protection may be diminished. No protective measure is guaranteed to provide 100% protection; these behaviors work in conjunction with one another to further reduce the likelihood of transmission. We expect that there will still be new cases; however, we want to reduce the number of new cases so they don't overwhelm our ability to provide necessary medical attention.

Can a face shield be worn instead of a mask?

A face shield may be worn in public spaces when a mask is not feasible. Face shields do not provide equivalent protection to face masks. People who interact with a person who is hearing impaired may not be able to wear a mask and thus a face shield would be appropriate. Here are some considerations for individuals who must wear a face shield instead of a mask:

- Although evidence on face shields is limited, the available data suggest that the following face shields may provide better source control than others.
- Face shields that wrap around the sides of the wearer's face and extend below the chin.
- Hooded face shields.
- Face shield wearers should wash their hands before and after removing the face shield and avoid touching their eyes, nose and mouth when removing it.

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- Disposable face shields should only be worn for a single use and disposed of according to manufacturer instructions.
- Reusable face shields should be cleaned and disinfected after each use according to manufacturer instructions or by following CDC face shield cleaning instructions.
- Plastic face shields for newborns and infants are NOT recommended.
- We encourage individuals who cannot wear a mask due to an immunocompromising condition, to continue to self-isolate to avoid exposure.

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OBTAINING A MASK

What requirements must a mask meet?

“Face covering” means a fabric, paper, or disposable face covering that covers the nose and mouth and which does not have an exhalation valve. The term “face covering” includes face shields.

Who is responsible for providing masks for the public to wear?

Businesses are responsible for providing face coverings for their employees and volunteers. A member of the public when entering a business will need to provide their own face covering.

Can my business be reimbursed for purchasing masks?

Businesses that need to purchase protective gear like masks and hand sanitizer may be eligible for reimbursement through the Montana Business Adaptation Program. Organizations may be reimbursed up to \$10,000 for eligible expenses. Apply at COVIDRELIEF.MT.GOV.

Where can I buy a mask that was produced in Montana?

A list of Montana produced sewn face masks, 3D Printed Face-masks, Plastic Injection Molded Face-masks and Plastic Face Shields can be found [here](#). Alternatively, you can also [make your own masks](#).

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REQUIREMENTS FOR MASKS IN INDOOR SPACES

What indoor locations are face masks required to be worn?

“Indoor space open to the public” means any indoor space, whether publicly or privately owned, where the public has access by right or invitation, express or implied, whether by payment of money or not. In addition, “indoor spaces open to the public” include, but are not limited to lobbies, common areas, elevators, bathrooms, meeting rooms, or other spaces where people gather. The term includes all modes of public or commercial transportation. The term does not include private residences that are not open to the public.

Employees, volunteers, and contractors in public-facing workspaces are required to wear face coverings.

Who is responsible for making sure people wear masks in indoor public places?

All businesses, government offices, or other persons responsible for indoor spaces open to the public shall require and take reasonable measures to ensure that all employees, contractors, volunteers, customers, or other members of the public wear a face covering that covers their mouth and nose at all times while entering or remaining in any indoor spaces open to the public

Is signage required to tell the public entering indoor public places that masking is required?

All points of entry open to the public shall have a clearly visible sign posted stating: “Mask or face covering use required for ages five and older.”

Can plexi-glass barriers be used instead of wearing a mask?

No. Partitions that effectively create an enclosed barrier within an indoor space may render masks unnecessary but should be reviewed and approved by the local health authority prior to implementation.

How does the mask mandate affect religious services?

During services, speakers may remove their masks while speaking to the attendees. All attendees should wear a mask during the service, including while singing. Servers should wear a mask and recipients should remove the mask to receive communion.

Do children and employees in daycares, summer camps and day camps need to wear masks?

No, because daycares, summer camps and day camps are not open to the public, employees and children are not required to wear masks, however it is strongly recommended wherever possible. Children under 2 should not wear masks at any time.

Parents should wear masks when they drop off/pick-up their children from daycare, summer camp or day camps.

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RESTAURANTS AND OTHER BUSINESSES

Do my employees need to wear a mask?

Employees that are public facing are required to wear a mask. At the time and the place you are in contact with the public is where you need a mask. Wear a mask for the specific interactions.

If a partition effectively creates an enclosed barrier within an indoor space between the public and the employee, it may render masks unnecessary, but should be reviewed and approved by the local health authority prior to implementation.

Employees that are not public facing while in their office or workspace do not need to wear a mask. However, these employees should wear a mask when arriving and exiting the workplace. See Section 1 of the [Directive on masks](#) for the definition of business.

Whom and in what situations do people need to wear masks in restaurants?

Masks are required while entering and exiting the restaurant, using the restroom, or otherwise walking through the inside of the business. However, masks do not need to be worn while consuming food or drink and seated at the table inside. Patrons using outdoor seating are encouraged to wear masks and must wear a mask if they must enter the business. Servers should wear masks at all times. Restaurants can adopt more restrictive policies.

As a business owner, what can I do if someone comes into my business and says they cannot wear a mask due to a medical condition?

Businesses may ask how to accommodate an individual's disabilities. Options may include: having face shields on hand to provide to disabled customers, offering curbside pick-up or offering services via phone or online.

If accommodations cannot be made and individuals are unable to comply with requirements necessary for safe operation, individuals may be asked to leave the business. The ADA governs accommodations of this sort but does not preclude asking customers about health information. HIPAA and the Fourth and Fifth Amendments are also inapplicable to conversations related to face-coverings in businesses.

Do servers in drive-thrus and coffee kiosks need to wear masks?

Yes. Kiosks and drive-thrus fall under the definition "space open to the public" due to the fact that kiosks and drive-thrus serve the public. If you are serving and interacting with the public a mask must be worn. Patrons who remain in their car are not required to wear a mask though it is strongly encouraged when interacting with the kiosk/drive thru employees.

Do you have to wear a mask while in restaurant outdoor seating areas?

Masks are required while entering and exiting the restaurant, using the restroom, or otherwise walking through the inside of the business. However, masks do not need to be worn while seated at the table consuming food or drinks inside the restaurant. Patrons using outdoor seating are encouraged to wear masks and must wear a mask if they have to enter the business. Servers should wear masks at all times. Restaurants can adopt more restrictive policies.

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Do cooks on the cook line need to wear masks if a kitchen is public facing?

Yes. Even cook staff who do not see or interact with the public are strongly encouraged to wear masks if social distancing cannot be achieved. Businesses should consider all the risks and unique circumstances and implement appropriate policies.

Do kitchen staff (i.e. folks that are behind the scenes not interacting with the public, cooks, dishwashers, etcetera) need to wear a mask? What if they can social distance?

If kitchen staff are public facing, they need to wear a mask.

Cook staff are urged but not required to wear masks, even if they are not public facing. Mask wearing ensures the health and safety of all citizens. Businesses should consider all the risks and unique circumstances and implement appropriate policies.

Some body art procedures like piercings and tattoos are done on the face. Does the masking requirement essentially prohibit these procedures? What about for aestheticians?

The individual conducting the procedure must wear a mask, but if it would be impractical for the individual receiving the procedure to wear a mask, exemption 3 or the Directive applies.

Do children and employees in daycares need to wear masks?

No, because daycares are not open to the public, employees and children are not required to wear masks; however, it is strongly recommended wherever possible. Children under 2 should not wear masks at any time.

Are employees exempt from wearing a mask if they are working in an environment where they are operating machinery where a mask can get stuck or pull a person into a machine?

Wearing a mask is not required if it is impractical or unsafe to do so. However, alternatives such as face shields should be considered.

Are masks required while transporting clients in a car?

Yes. Businesses, including guides, offering transportation services to their customers shall require and take reasonable measures to ensure that all employees, contractors, volunteers, customers, or other members of the public wear a face covering while in the business' vehicle. "Indoor space" includes all modes of commercial transportation.

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MASKS REQUIRED IN OUTDOOR SPACES

Are face coverings required outdoors?

For any organized outdoor activity where social distancing is not possible or is not observed, sponsors shall require and take reasonable measures to ensure that all persons attending an organized outdoor activity wear a face covering that covers their mouth and nose at all times.

What constitutes an organized outdoor activity?

“Organized outdoor activity” means any gathering of more than 25 people for an activity or event organized or sponsored by a business or person, or that takes place on the property of a business or person. This includes, but is not limited to, outdoor theatrical or music performances, fairs, markets, festivals, parades, carnivals, rodeos, sporting or athletic events, beer gardens, weddings and receptions, or parties.

This section applies only where the nature of the organized outdoor activity makes it impracticable for all attendees to maintain at least 6 feet of physical distance from each other, or any organized outdoor activity where attendees are not observing at least 6 feet of physical distance from others.

Are masks required at large gatherings that aren’t “organized outdoor activities”?

If participating in an outdoor gathering of more than 25 people, whether or not in the context of an organized outdoor activity, all individuals except those covered by section 4 of this Directive must wear face coverings while in attendance where it is either not possible to maintain 6 feet of physical distance at all times, or where attendees are not observing social distancing of at least 6 feet of physical distance from others.

Are groups of less than 25 people outside required to wear masks?

As of November 20, outdoor gatherings involving fewer than 25 people do not-absolutely require face coverings. Face coverings are nonetheless required where social distancing is either not possible (crowded back patio with standing room only, for example), or where it’s not being practiced (outdoor wedding setting where people are bunched together in space).

What is an outdoor event “sponsor”?

“Sponsor” means any business or person who organizes or sponsors an organized outdoor activity, or who allows the activity to take place on their property.

Due to the weather, an outdoor event I hosted is now indoors. Do I need to change our COVID-19 mitigation strategy?

Yes. If the gathering involves fewer than 25 people, they may not have needed to wear face coverings while outside and engaging in proper social distancing. Once the event is moved indoors, attendees must wear face coverings.

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The face covering directive applies to indoor spaces that are open to the public, regardless of occupancy/group size. The term does not include private residences that are not open to the public, but does apply to both privately and publicly owned spaces that are open to the public by right or invitation. As of November 20, events involving more than 25 people should consult with their local health department to make a plan to promote social distancing. Event cutoff threshold is at the discretion of community leadership based on current circumstances in that community.

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ENFORCEMENT

What do I do if someone refuses to wear a mask who comes into a public space I am responsible for?

Businesses, other persons responsible for indoor spaces open to the public, and sponsors of organized outdoor activities are entitled to reasonably rely in good faith on the representations of employees, volunteers, contractors, customers, visitors, or members of the public regarding the applicability of the exceptions in section 4 of the Governor's Directive. Reasonable, good faith reliance on such representations is an affirmative and complete defense to any enforcement proceedings brought pursuant to this Directive.

Does a person with a medical condition that prevents wearing a face covering need to show businesses proof of that medical condition?

No, customers do not need to provide proof of a medical condition. Even so, businesses may refuse entry to individuals without a face covering even if the individual states that they have a medical condition that prevents wearing a face covering. Businesses may ask about how to accommodate an individual's disability. Customers can request reasonable accommodations including but not limited to face shields, curbside pick-up, and over-the-phone or internet transactions. Individuals and businesses alike should be aware that there are no exemption cards being issued by the State of Montana or any other government agency.

For more information about the Americans with Disabilities Act, visit ADA.gov or call the ADA Information Line at 800-514-0301 (voice) and 800-514-0383 (TTY).

The Governor's Office strongly recommends that for the duration of Phase II reopening, vulnerable individuals continue to adhere to stay-at-home guidance.

Do businesses need to enforce the mask mandate?

Business owners must require masks and must enforce the directive, but the manner of enforcement--whether by denying entry, refusing service, or asking people to leave--is within their discretion. That is, how they choose to enforce is their choice; whether they enforce is not.

Also, business owners are allowed to ask why someone isn't wearing a mask. They can ask about how to accommodate a disability; if an individual refuses accommodation or it is not possible to accommodate them, business owners may nonetheless ask the customer to leave. Business owners do not need proof that an individual has a disability and we don't recommend asking for proof. But asking questions and engaging is entirely appropriate.

Does the governor have the legal right to mandate masks?

The legislature has delegated to the Governor authority to respond to emergencies. During a declared state of emergency, the Governor may "control ingress and egress to and from an incident or emergency or disaster area, the movement of persons within the area, and the occupancy of premises within the area." Section 10-3-104(2)(c), MCA.

In responding to the emergency, the Governor "shall use the services and facilities of the existing officers and agencies of the state, and all officers and agencies shall cooperate with and extend their

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services and facilities to the governor as the governor may request in the carrying out of the purposes of” the emergency response statutes. Section 10-3-305(2), MCA.

Does the mask mandate apply on private property?

The jurisdiction of state and local public health agencies extends to both public and private property. The Directive applies to indoor spaces that are open to the public, and to outdoor gatherings of more than 25 people where social distancing is either not possible or is not being practiced regardless of whether the gathering occurs on public or private property.

How do I report violations of COVID-19 directives?

The public can now notify health officials of violations of COVID-19 directives by using the Consumer Complaint Form used to report food borne illnesses and other public health and safety issues. Concerns submitted through the website will be reviewed by DPHHS and sent to the appropriate local authority for review and investigation. The information received will allow the state to track cases with numerous complaints and follow up on the most egregious ones. The Consumer Complaint Form is now available at: <https://dphhs.mt.gov/publichealth/FCSS/ConsumerComplaintForm>.

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COVID Relief Grants

Are there business relief grants available that I can still apply for?

Not at this time. The federal government set the deadline for all CARES Act funding to be spent by December 30, 2020 . For this reason, there was not time to accommodate opening another application cycle.

If you would like to see more COVID-19 business relief grants offered through CARES Act funding, please contact your U.S. Congress Representative (Rep. Greg Gianforte) and Senators (Senator Jon Tester and Senator Steve Daines) to make this request.

My employer told me to come back to work but the health department told me to quarantine, who do I listen to?

With few exceptions, the provision in CARES called the Families First Coronavirus Response Act (FFCRA), requires employers with less than 500 employees to provide up to 80 hours of paid sick leave when their employee is sick, seeking a diagnosis, or has been told to quarantine by a local health official. You can obtain general information about an employer's obligations by clicking this [LINK](#).

Additionally, the USDOL site has a number of frequently asked questions that will help you understand how to apply the law in a variety of scenarios, those can be found [HERE](#).

Employers receive 100% reimbursement for paid leave pursuant to the act. Health insurance costs are also included in the credit. Reimbursement should be quick and easy to obtain through an immediate dollar-for-dollar tax offset against payroll taxes. Where the sick leave payments are in excess of the payroll taxes and a refund is owed, the IRS will send the refund as quickly as possible.

An employer may not discharge, discipline, or otherwise discriminate against any employee who takes paid sick leave under the FFCRA. An employee who feels they qualify for this paid sick leave and has not been paid for it may file a wage claim by completing the form found [HERE](#).

I applied for a relief grant but haven't heard anything back. What should I do?

There has been an overwhelming response to the grant programs and staff are working around the clock trying to review and evaluate those applications. If you are concerned, you can send an email inquiry to reliefapps.covid@mt.gov, and someone will get in touch with you.

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Employment

I am in the high-risk / vulnerable category. Do I have to return to work?

Vulnerable individuals should continue to adhere to the stay-at-home guidance. For more information see page 4 of the [Phase 2 Directive](#)

Can an employer require their employee quarantine for two weeks before returning to work after an out of state trip?

If the employee has COVID-19 symptoms, the [Equal Employment Opportunity Commission has stated](#) they can be kept away from the office under a direct threat analysis. If the employee is asymptomatic (showing no symptoms of COVID-19), an employer cannot mandate an employee's actions beyond the workplace. However, an employer can request an employee not come into work for 14 days.

Does my employer have to pay me while I am quarantined?

An employee may be entitled to Emergency Paid Sick Leave or Emergency Family & Medical Leave under the Families First Coronavirus Response Act. You can find more information [here](#) and [here](#). In addition, an employee may be eligible for unemployment insurance during quarantine. Unemployment insurance benefits vary depending on an individual's circumstance. [Reference our Unemployment Insurance Division](#) webpage for further information regarding unemployment insurance in a COVID-19 related layoff.

Can I require my employees to be tested for COVID-19?

The ADA requires that any mandatory medical test of employees be "job related and consistent with business necessity." Applying this standard to the current circumstances of the COVID-19 pandemic, employers may take steps to determine if [employees entering the workplace have COVID-19](#) because [an individual with the virus will pose a direct threat](#) to the health of others. Therefore an employer may choose to administer COVID-19 testing to employees before they enter the workplace to determine if they have the virus.

As an employer, can I ask my employee if they have COVID-19 or COVID-19 symptoms? Can I ask for a doctor's note as proof?

Yes, HIPAA pertains to patient protected information between a medical facility and a patient. It does not apply to the employer/employee relationship. Employers can most certainly ask employees if they have COVID-19 or COVID-19 symptoms. You may require a doctor's note, but please be aware that many doctor's offices are already stretched to capacity and may be unable to meet this request.

Can I use antibody testing as a method of determining whether an employee can return to work?

In light of recent CDC guidelines on testing for COVID-19, the use of antibody testing as a method of determining whether an employee can return to work could be a violation of state and federal discrimination laws that control an employer's ability to conduct medical examinations.

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What steps do I need to take as an employer if I have an employee test positive for COVID-19?

If you have questions about close contacts to the employee and if anyone else in your business needs to isolate, please contact your local health department.

The CDC advises to close off areas used by the person who is sick (companies do not necessarily need to close operations, if they can close off affected areas) and wait 24 hours before you clean or disinfect (if 24 hours is not feasible, wait as long as possible).

Once the area has been appropriately disinfected, it can be opened for use. Workers without close contact with the person who is sick can return to work immediately after disinfection. If more than 7 days pass since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.

Where can I find more information regarding the work environment and COVID-19?

The Department of Labor and Industry (DLI) [FAQ page](#), may be useful in answering your employment related questions. It is updated regularly.

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Housing

Can I evict my tenant for nonpayment?

No. Please refer to the [CDC Order](#) and [FAQ guidance](#), which temporarily halts residential evictions.

What do I do if I am being evicted due to nonpayment?

The Montana Department of Commerce partnered with the Montana Legal Services Association (MLSA) to form the Montana Eviction Intervention Project, a program that will provide civil legal assistance for Montanans facing evictions as a result of the COVID-19 pandemic. The program will continue to assist Montanans who are facing an eviction and need legal assistance until December 30, 2020. For more information visit MONTANALAWHELP.ORG or call 1.800.666.6899.

How do I prove I am a member of a vulnerable population to prevent foreclosure or disconnection?

An individual who seeks the protection of these provisions to prevent a foreclosure or disconnection after June 1, must make a basic showing to their bank, landlord, or utility that they:

- (1) are sheltering in place under this order, and
- (2) are a member of a vulnerable population, and
- (3) have been financially impacted as a result of the COVID-19 outbreak.

What rules do I have to follow to foreclose or disconnect service if taking these actions against a member of a vulnerable population?

Before moving forward with a foreclosure or disconnection against an individual who is a member of a vulnerable population, the entity initiating foreclosure or disconnection must provide adequate notice of the opportunity to seek the protection of this Directive by making the showing described above.

I can't pay my rent/mortgage. Is there any help for this?

The Emergency Housing Assistance Program is now closed to new applicants. This is to allow Montana Housing staff to process all applications that have been received prior to November 10 and before the federal deadline to spend CARES Act dollars, December 30, 2020. If you're concerned about the ability to make your monthly rent or mortgage payment, we encourage you to work with your landlord, lender, and/or learn about available resources at housing.mt.gov.

Can I increase rent for my tenants/can my landlord increase rent during the COVID-19 state of emergency?

Yes, unless the tenant is a member of a vulnerable population, who has suffered a significant financial hardship as a result of the outbreak AND remains sheltered at home. If that is the case, the rent protections of the March 30 and April 13 Directives continue for individuals who are sheltering in place, vulnerable, and have suffered a financial hardship. All three criteria must be present to obtain protection from a rent increase. The protection from increases for these individuals does not apply to previously agreed increases or reasonable increases reflecting the size of the unit, number of tenants or guests, or services provided by the landlord. For more details on the scope of these protections, please consult the March 30 and April 13 Directives.

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My landlord is showing my home, what are the requirements for COVID-19 mitigation during showings?

There are not restrictions in place for showings, although face coverings are highly recommended. This is a discussion that should occur between landlord and current tenant to try and find the most agreeable solution for all parties. However, before a showing, it is recommended to open doors and turn on lights to avoid contact of frequently touched surfaces.

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Restaurant/Bar/Brewery/Distillery/Casino Guidance

What is the required closure time for bars, restaurants, casinos, distilleries and breweries?

Restaurants, bars, and casinos must close their doors and have all patrons out by 10:00 p.m. Businesses may reopen after 4 a.m. Breweries and distilleries are to follow existing laws on closing time.

Can restaurants still operate curbside pick-up, drive-thru service, and delivery after 10pm?

Yes. As of November 20, restaurants, bars and casinos will be required to close their doors and have all patrons out by 10:00 p.m. Businesses may reopen after 4 a.m. This guidance applies to indoor/outdoor dining spaces, not delivery, drive-thrus, and curbside pick-up.

Why is there an earlier closing time than 2 a.m. for bars?

Requiring an earlier closing time protects public health and slows the spread of the virus. Health officials and industry representatives recommended the earlier closing time option as part of the ~~when the Montana~~ reopening plan ~~was~~ developed in late April.

Does the 25-person limit on public gatherings apply to bars, restaurants, breweries, distilleries, and casinos?

No, capacity in all restaurants, bars, breweries, distilleries, and casinos must be limited to 50 percent of normal operating capacity to allow for adequate group spacing.

Is bar seating open during phase 2?

Bar seating within 6 feet of a well or taps, any area where drinks are passed to servers, ice machines, or other areas used to prepare or serve food or beverages is prohibited. Patrons should maintain 6 feet of social distancing, shared/community items should be eliminated, and commonly touched surfaces should be frequently cleaned/disinfected.

Is restaurant counter seating "bar seating"?

Yes, these guidelines apply to bar seating in restaurants, breweries, distilleries, and bars.

Are there specific guidelines for poker rooms?

Beginning Friday, June 5, 2020, poker rooms are allowed in Phase 2 with the same goals of the bar seating with the following specifications:

- 1) Poker rooms must require everyone to sanitize their hands upon entering or reentering the card room.
- 2) Limit the number of available seats to six players in order to create some spacing between them.
- 3) Players will verbalize all bets and the dealer will physically handle all chip transactions.
- 4) All poker staff will wear masks, poker staff will sanitize and or wash hands in between each cash transaction.
- 5) Poker staff will sanitize tables, chairs, chips and cards with disinfectant products every day and they will use steam for the fabric on the chairs and the vinyl covering on the tables.

What are the social distancing guidelines for seating?

Establishments must provide for 6 feet of physical distancing between groups and/or tables by:

- o Increasing table spacing, removing tables, or marking tables as closed;
- o Providing for a physical barrier between tables; or
- o Back-to-back booth seating provides adequate separation.

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Bars stools should be spaced 6 feet apart. If a group of 6 or less comes in and requests to be seated together, a staff member can group seat together and then re-space to 6ft once the group leaves.

Is standing at the bar allowed?

All patrons should have a place to sit; no standing and mingling is allowed at the bar or elsewhere. Individuals who are actively participating in a bar game and able to socially distance from tables of 6 people or fewer may stand as part of participation in the game. Equipment for bar games should be kept behind the bar and wiped down with an [EPA approved](#) disinfectant between uses. Equipment that cannot be kept behind the bar should be cleaned by staff between participants.

What if 6 feet cannot be maintained between patrons and servers/staff using well areas or taps?

A physical barrier or closing wells may be used to protect servers/staff, but the barrier must be at least 36 inches high and offer enough protection to prevent employee exposure to droplets from anyone seated within 6 feet of either side of the serving area.

Wells taken out of use should be marked with a sign to remind staff.

Can patrons order "to-go" at a bar/order alcohol at concession stands?

There may be a designated area at the bar, away from other customers, wells, taps, prep-stations where patrons may place and receive orders. Six feet of social distancing should be maintained by all patrons of separate parties and only one customer may use this space at a time. Patrons may grab their drink or order and then return to their seats. (See above if 6ft cannot be maintained.)

All-beverage and beer licensees must:

- Sell for off-premises consumption prior to closing time.
- Sell alcoholic beverages in original packaging* for delivery, curbside, drive-up or take-out. This includes growlers with beer and table wine.
 - *Original packaging means the sealed container in which a manufacturer packages its product for retail sale. It includes bottles, cans, kegs, and growlers, but does not include lines or piping carrying product from a manufacturer's premises to a retailer's premises.
- Sell alcoholic beverages in individual servings** for take-out ONLY and the buyer assumes liability of local or state regulations regarding open container laws.
 - ** Individual serving means not more than 16 ounces of beer, not more than 2 ounces of liquor, not more than 7 ounces of wine, or a proportional combination thereof (for example, 1 ounce of liquor mixed with 8 ounces of beer).

Can bars offer "shake-a-day"?

No shake-a-day unless dice and cup can be disinfected in-between patrons.

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What are the phase 2 sanitary guidelines for bar areas?

Bar stools and counter space must be disinfected between patrons; no reusing drink coasters unless they can be disinfected between patrons and no refilling glasses, new glass is needed for each order; no community items including peanuts or other foods unless they can be served in individual containers.

Are bar games such as billiards, pool, shuffle board, darts, etc. allowed and can participants stand while playing?

Individuals who are actively participating in a bar game and able to socially distance from tables of 6 people or fewer may stand as part of participation in the game. Equipment for bar games should be kept behind the bar and wiped down with an [EPA approved](#) disinfectant between uses. Equipment that cannot be kept behind the bar should be cleaned by staff between participants.

Is Karaoke allowed?

Karaoke is not prohibited by the directive. Karaoke is offered in many forms depending on the establishment. Individual establishments should work with their local health departments to ensure social distancing can be maintained, and that equipment can be cleaned properly between patrons.

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Travel

What are the guidelines for visiting/travelling to Montana?

The health and safety of our citizens and visitors is our top priority. While visiting our state please be prepared for some new protocols and safety precautions.

There is no longer a 14-day travel-related quarantine in place. Governor Steve Bullock is asking visitors to do their part prevent the spread of COVID-19, which means taking the same social distancing and sanitation precautions as Montanans.

Before travelers hit the road, they should “Know before you go.”

- Know the local public health guidelines before arriving to their destination
- Understand some services and destinations may be limited
- Stay home if they’re sick

When travelers are on the road, they should:

- Wear a mask – face coverings are required in certain indoor spaces and for certain organized outdoor activities
- Maintain social distance (at least 6 feet apart)
- Wash their hands and use hand sanitizer
- Avoid touching their face
- Cover coughs and sneezes

For more information go to VISITMT.COM.

Are there road closures or park closures in Montana?

The June 1 reopening of Montana’s tourism amenities and services will be gradual. It’s important to understand what is open and closed before arriving in the state. [Click here for detailed information on Glacier National Park.](#)

Visitors to Montana should be aware travel restrictions related to the COVID-19 pandemic may vary on the seven Indian reservations in Montana. As tribal governments continue to assess public health risks, travel restrictions may change at any time depending on current conditions. [Click here for detailed information on Indian Country.](#)

Are there resources for local businesses to help educate residents and visitors on safe travel best practices?

Montana Aware is a statewide effort designed to help Montana’s tourism partners and local businesses slow the spread of COVID-19 by promoting safety measures for those traveling in the state.

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As part of this initiative, the Montana Office of Tourism and Business Development has developed a toolkit of resources to help you educate residents and visitors on safe travel best practices. The toolkit can be found [here](#).

If I travel outside of Montana for any reason, do I need to quarantine upon return to Montana? (residents)

No. As of June 1, the provisions of the March 30 Directive requiring quarantine for nonwork-related arrivals in Montana is no longer in effect (see Phase 2 Directive, page 5).

If I want to vacation or otherwise travel into Montana, am I subject to a quarantine period or other restrictions? (non-residents)

No. As of June 1, the provisions of the March 30 Directive requiring quarantine for nonwork-related arrivals in Montana is no longer in effect (see Phase 2 Directive, page 5).

Can visitor centers reopen?

Visitor centers can open in Phase 2 with reduced capacity of 75%, strict adherence to physical distancing guidance, and following CDC sanitation protocols

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Public Gatherings, Social Events and Holidays

Are there limitations on public gathering sizes?

Any public gatherings or events where it is not possible to practice social distancing or where social distancing is not being practiced must be strictly limited to include 25 people or fewer. If you are planning an event with more than 25 people you should consult with your local public health office on a plan to implement adequate social distancing.

Though the group size limit applies only to public gatherings and events involving more than 25 people where social distancing is not possible or observed, Montanans are urged in the strongest terms to limit their involvement in any in-person gatherings of 15 or more people—including private gatherings inside a home. Such gatherings are a significant contributor to the spread of the virus.

Montanans are urged to practice social distancing in any gathering of any size outside their own household.

Does the 25 person limit to public gatherings include houses of worship?

No. The guidance taking effect November 20 to limit group sizes to 25 does not apply to houses of worship which remain subject to the 50 person limit provided in Phase Two and only where social distancing cannot be observed. Faith leaders are urged to continue to ensure that social distancing is possible and practiced for all in-person services, and to encourage the use of virtual services where possible.

Are private holiday parties exempt from the Governor's directives?

No. The jurisdiction of state and local public health agencies extends to both public and private property. Gathering in groups of more than 25 is not advised. If you are nonetheless planning an event with more than 25 people you should consult with your local public health office on a plan to implement adequate social distancing. Event cutoff threshold is at the discretion of community leadership based on current circumstances in that community. The face covering directive applies to indoor spaces that are open to the public, and to outdoor gatherings of more than 25 people where social distancing is not possible or is not being practiced regardless of whether the gathering occurs on public or private property.

I am getting married and have 25 people invited to my wedding. Do I need to reduce the number/cancel it?

Groups greater than 25 are not advised. However, if you are planning an event with more than 50 people you should consult with your local public health office on a plan to implement adequate social distancing. Event cutoff threshold is at the discretion of community leadership based on current circumstances in that community (see Phase 2 Directive, page 4)

Do events that take place using bar/restaurant outdoor facilities such as patios, volleyball courts, etc. but not within the bar/restaurant count against the capacity limit of the venues?

Yes. Patrons using outdoor facilities will count against the 50% capacity limits of the venue during Phase 2. Venues that wish to expand their outdoor capacity for special events such as tournaments, celebrations and other functions should consult with their local health office to work out a plan for how to maintain social distancing and enhanced cleaning procedures.

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What is the guidance for dance floors?

Events over 25 people should consult with their local health department to make a plan to promote social distancing. In all group settings, individuals should follow the best practices available to prevent the spread of COVID-19 such as wearing a mask, washing your hands frequently or using hand sanitizer, and staying 6 feet apart when possible. This answer does not apply to bars where all patrons should have a place to sit and no standing and mingling is allowed at the bar or elsewhere.

My organization hosts a Thanksgiving potluck every year. Can we still do that this year?

Yes, however, we recommend cafeteria style service (i.e. no self service) or using a menu card and volunteers to fill plates. Face coverings must be worn unless at your table eating. Seating should be spaced to allow 6 feet between tables. Events over 25 people should consult with their local health department to make a plan to promote social distancing.

My organization hosts a Thanksgiving dinner for food insecure community members. Can we continue with this service?

Yes, follow the guidelines for restaurant re-opening including, no buffet style food service, servers must all wear masks and patrons must wear masks until seated and eating or drinking. Seating should be spaced to allow 6 feet between tables. Events over 25 people should consult with their local health department to make a plan to promote social distancing.

Are there guidelines and recommendations for how to celebrate the holidays?

Montanans are strongly encouraged to [follow guidelines and recommendations from the Centers for Disease Control and Prevention \(CDC\)](#) while celebrating the holidays this year. For Thanksgiving activities, the CDC recommends celebrating with people in your household. If however, Montanans choose to spend the holiday with non-household members, the CDC recommends:

- Wearing a face covering with two or more layers, which covers your nose and mouth and fits snugly against the sides of your face;
- Staying at least 6 feet away from individuals who do not live with you;
- Washing your hands with soap and water for at least 20 seconds;
- Using hand sanitizer with at least 60 percent alcohol when you are unable to regularly wash your hands;
- Eating outdoors if possible; opening the windows if eating outdoors is not possible
- Limiting the number of guests to the greatest extent possible
- Planning in advance to set celebration expectations;
- Cleaning and disinfecting frequently touched surfaces and items between uses;
- Bringing your own utensils, dishes, and food to any gathering;
- Using single-use and disposable items;
- Limiting travel to the greatest extent possible
- [Please refer to the CDC website for additional guidance](#)

What activities are recommended/not recommended for the holidays?

Information is available on the CDC website specific to upcoming holiday gatherings [here](#). However, please note that the Governor's directives can be supplemented by more restrictive local measures put into place by county authorities. For this reason, additional questions should be directed to local county health departments.

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Nursing Homes, Assisted Living Facilities and Senior Centers

Are visitations allowed in senior and assisted living facilities?

Yes. Montanans requiring care in senior and assisted living facilities have access to limited visitation, subject to stringent safety and health measures. As stated in the Governor's Directive from July 13:

Nursing homes and skilled nursing facilities may allow visitors provided they comply with the following conditions and first give notice of the following safeguards to residents and family members:

- Visitation should be conducted in accordance with the strict screening, physical distancing, sanitation, hygiene, and other infection control protocols set forth in the [CMS](#) and [CDC guidance](#) applicable to nursing homes.
- Before permitting visitation, facilities should review the applicable [CDC](#) and [CMS guidance](#) and ensure that they are able to follow the recommendations contained therein.

For more information, the CMS Toolkit on State Actions to Mitigate COVID-19 Prevalence in Nursing Homes can be found [here](#).

Assisted living facilities may allow visitors provided they comply with the following conditions and first give notice of the following safeguards to residents and family members:

- Visitation must be conducted in accordance with the strict screening, physical distancing, sanitation, hygiene, and other infection control protocols set forth in the Department's July 13, 2020 Notice of Adoption of Temporary Emergency Rules.
- Before resuming visitation, all facilities must have conducted—at a minimum—a single baseline COVID-19 test of all residents and staff (including volunteers and vendors who are in the facility on a weekly basis), and the facilities must have implemented an internal plan for weekly re-testing of all staff.

Can senior centers open during Phase 2?

The Phase Two directive recommends vulnerable individuals such as senior citizens continue to adhere to the stay-at-home guidance. If a local senior center chooses to open in Phase Two, they should consult with their local public health officials to develop a plan that ensures proper social distancing and sanitation guidelines. An incident response plan for cleaning and sanitizing regarding a positive COVID-19 case should be created prior to opening.

Should patrons/workers be screened before coming into the senior center?

Patrons' and workers' forehead temperatures should be taken with infrared thermometers before entering the facility and/or be screened for symptoms (more than 100°F suggests possible fever). Patrons with fever, shortness of breath, a cough, or other COVID-19 symptoms must refrain from using the facility.

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Can food be served at senior centers during Phase 2?

Yes, however:

- Designate specific dining times for patrons with underlying health conditions only, where fewer seats are available and more than 6 feet can be maintained
- A specific cleaning plan should be implemented with employees trained in proper sanitation practices. Please consider using the guidance document: [FACILITY PLAN FOR CLEANING, SANITIZING & DISINFECTING](#). This document can be found at <https://dphhs.mt.gov/publichealth/fcss>.
- Centers must provide for 6 feet of physical distancing between groups and tables by:
 - Only allow 6 seats per table
 - All surfaces must be cleaned between patrons, including tables and chairs
 - Drinks and food must be served to patrons at a table; no self-service buffets
 - Table items including condiments, menus, napkins, and décor should be removed from tables unless they can be adequately cleaned between patrons
 - Single use utensils are recommended when possible
 - Reusable items must be cleaned before and after each use
 - Signage should be posted with the following or substantially similar wording: “Members with fever, shortness of breath, a cough, or other COVID-19 symptoms must refrain from using this facility” and “maintain 6 feet distance between people”
- Increasing table spacing, removing tables, or marking tables as closed, or
- Providing a physical barrier between tables

What guidelines do patrons at senior centers need to follow?

- Testing centers are now available for voluntary testing; we recommend all employees and patrons get tested when possible
- Maintain 6 feet distance between other patrons and workers
- Wear face mask when possible
- Sanitation and hygiene procedures
- COVID-19 symptom awareness

What guidelines do workers at senior centers need to follow?

Testing centers are now available for voluntary testing; we recommend all employees and patrons get tested when possible. Furthermore, workers should be trained to:

- Minimize contact time with patrons when possible
- Wear face mask when possible
- Wash hands when contaminated or suspect contamination
 - Follow normal use and disposal procedures for single-use gloves
 - Stay home if ill
- Report illness symptoms to supervisor

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High School Sporting Events

What are the guidelines for high school sports ?

On July 27, Montana High School Association released guidance for the return to fall activities. Below are a few highlights that apply to all sports; however, it is recommended you review the entirety of their [guidance](#):

- Workouts/practices should be conducted in “pods” / “bubbles” of participants with same players working out together to limit overall exposure.
- Before, during and after the contest, players, coaches, and administration should wash and sanitize their hands as often as possible.
- No out of state competition or teams traveling from out of state for competition, unless it is in a dual format and approved by the MHSA Executive Director.
- Always maintain social distancing of 6 feet while on the field/court of play when possible.
- Everyone must have their own beverage container that is not shared. Safe handling practices should be adhered during hydration, which includes refilling, retrieval and identification of water source.
- Time-outs (if applicable) may be extended to a maximum of two minutes in length for safe hydration practices. Social distancing requirements must always be followed.
- Cloth facial coverings are allowed for players, coaches and officials. Facial coverings must be a single solid color and unadorned. Face Coverings must be worn per the Governor’s directive.
- Gloves are permissible for all players, coaches and officials.
- The ball should be cleaned and sanitized throughout the contest / event as recommended by the ball manufacturer.
- Administrators must limit the number of non-essential personnel who are on the field/player surface area throughout the contest.
- Attendance at MHSA events is dependent on host site and local health department guidelines and restrictions.
- A family’s role in maintaining safety guidelines for themselves and others is very important. Make sure your child and immediate household members are free from illness before participating in practice and competition (if there is doubt stay home). Provide personal items for your child and clearly label them.

Do players need to wear face coverings? What about referees?

Face coverings must be worn per the Governor’s directive. Cloth face coverings are permissible and must be a single solid color and unadorned.

Who enforces these guidelines?

Schools must follow the Governor’s Phase Directives, State and Local Health Department Directives regarding fan attendance (limits, social distancing, enforce the mask requirement, facility cleaning, sanitizing, etc.), travel requirements (bus maximum numbers and mask wearing, etc.) and MHSA sport specific requirements.

Officials are not responsible for monitoring activities on the sidelines, such as social distancing, hand washing, symptoms of illnesses and other such issues. This monitoring remains with the coaching staff and school personnel.

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Will fans be able to attend sports events?

The attendance of fans at regular season contests will be determined by the school in consultation with their local health department authority. Schools may have to submit a plan for fan attendance to their local health department for approval. Local health department requirements will differ, and schools need to consult their local health authority and be ready to submit a plan for approval if required.

I am a referee--- where do I find more information?

Guidance for officials can be found [here](#).

Are the schools still having winter sports for the 2020-2021 season?

Yes. The Montana High School Association (MHSA) and The National Federation of High School Associations believe the continuation of sports and other activities is crucial to the growth, development, and mental and emotional wellness of our Montana youth.

What are the guidelines for winter sports/activities?

For winter activities, school’s will follow these MHSA requirements along with the Governor’s directives and the directives from their local health departments. The safety and well-being of student activity participants is paramount. The requirements can be found at <https://www.mhsa.org/coronavirus>. These requirements attempt to reduce the possibility of transmission of coronavirus for student activity participants and for coaches, officials and fans of MHSA activities.

When do winter sports begin?

All winter sports practices will begin on December 7th. First contests can be played on January 2nd (change from the previous January 4th date) if the required number of practices for that sport is met.

I still have questions, who do I contact?

If you still have questions after reading the requirements, both general and sport specific, at <https://www.mhsa.org/coronavirus>, please contact Brian Michelotti at bmichelotti@mhsa.org

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Pools

Can public swimming pools open?

Yes, all public swimming pools (pools, spas, hot springs, water parks, competition pools, etc.) can open, but must follow the standards for healthy behaviors and a healthy environment (see information on these practices under the question "what are the healthy behaviors and healthy environment guidelines pools must follow?")

Do I need an employee to monitor and control the occupancy of my public swimming pool?

Yes. COVID-19 guidance requires the facility to monitor the use of the pool to maintain social distancing and keep the bather load at 75% or less. The facility should develop a plan that works best for their business operations. Examples of plans that facilities have implemented include:

- 1) Having front desk personnel in a position to easily see and control access to the pool
- 2) Monitoring facilities remotely (for facilities with camera systems)
- 3) Locking the pool room door with a sign indicating that all pool users must check in at the front desk to access the pool.

There are other options that may meet the intent of the guideline and specific questions about what may work for your facility can be directed to your local health jurisdiction.

I'm unsure if my facility is covered in the pool guidance. What guidance should I follow?

The guidance for pools is in the updated [Appendix B](#) of the Governor's directive. The guidance applied to all facilities licensed as a pool or spa in the state.

Do people have to social distance in pools/are there occupancy guidelines?

Yes, occupancy cannot exceed 75 percent capacity of normal bather load. Patrons must observe social distancing requirements (6 foot spacing between unassociated patrons (i.e. not family members) and 6 foot spacing.

The facility must reduce their total occupancy if they are unable to observe these social distancing requirements.

Can youth swim classes resume?

Yes, if social distancing is maintained between groups, during classes, drop off, and pickup.

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Can lap swimmers pass closer than 6 feet from each other in neighboring lanes?

Yes, swimmers can pass closer than 6 feet from each other in neighboring lanes.

What are the healthy behavior, environment and operation guidelines pools must follow?

Healthy Behaviors

- Encourage all staff and patrons to wash their hands often and to cover coughs and sneezes.
- Encourage the use of cloth face coverings when not able to practice social distancing.
 - Do not wear cloth face coverings when in the water or humid environments as it can make breathing difficult!
- Educate staff and patrons on the symptoms of COVID-19.
- Post signs with the following, or substantially similar, language at all entrances to the facility.
 - “People with fever, shortness of breath, a cough, or other COVID-19 symptoms must refrain from using this facility.”
 - “Observe social distancing in this facility. No loitering in common areas.”
- Ensure adequate amounts of soap, hand sanitizer, paper towels, tissues, and no-touch trash cans are available.

Healthy Environment

- Clean and Disinfect frequently touched surfaces at least daily and shared objects each time they are used.
- Determine which disinfectant will work best for your facility. Some surfaces can be damaged by harsh cleaning chemicals.
 - [List N disinfectants approved by the U.S. Environmental Protection Agency](#)
 - Pool water is not an approved sanitizer or disinfectant.
- Develop procedures to identify and separate used furniture and equipment from clean. Examples include:
 - Labeled bins for used pool toys and floats that need to be disinfected before use by another person.
 - Monitor deck furniture to clean between users.
- Ensure safe and correct use and storage of all disinfectants.
- Ensure indoor ventilation systems are operating efficiently and providing adequate air exchange.
- Increase circulation of outdoor air as much as possible.
- Survey facility water systems to ensure they are safe. Long shutdowns could require taking steps to minimize the risk of Legionnaires' disease.
- Use physical barriers or visible cues to provide areas that facilitate a 6-foot separation between patrons. Examples include:
 - Lane markers, or floating lane lines to separate pool areas
 - Separation of deck tables and lounge chairs
 - Tape on the deck and sidewalks to designate waiting areas, or staging zones.
 - Mark stairs and walkways with directional arrows for incoming and outgoing traffic
- Monitor use of shared community spaces like locker rooms to avoid crowding and facilitate separation

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- Discourage the sharing of items such as food, equipment and toys that cannot easily be disinfected between users

Healthy Operations

- Front desk/gate attendant must track occupancy, incoming and outgoing, to ensure maximum occupancy does not exceed 75 percent capacity of normal bather load;
- Patrons must observe social distancing requirements.
 - 6 foot spacing between unassociated patrons (i.e. not family members);
 - 6 foot spacing between groups
- The facility must reduce their total occupancy if they are unable to observe these social distancing requirements.
- Educate staff on the symptoms of COVID-19 and advise them to stay home when ill.
- Conduct health assessments of all staff as they come on shift.
- Lifeguards that are actively lifeguarding must not be expected to monitor handwashing, use of cloth face coverings, or social distancing of others.
- Follow certification agency recommendations for lifeguard rescues, and first aid during the pandemic.
- Youth swim classes
 - Social distancing facilitated between groups, during classes, drop off, and pickup.

Where can I find more information?

<https://www.cdc.gov/coronavirus/2019-ncov/community/parks-rec/aquatic-venues.html>

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Positive COVID-19 Cases and Close Contacts

What does close contact mean?

A close contact is someone who was within 6 feet of a confirmed or probable case of COVID-19 for longer than 15 minutes during the case's infectious period. Other examples of what might make them be a close contact include:

- Direct physical contact with the person
- Contact with a person's respiratory secretions (such as coughing in someone's face or sharing drinking glasses)
- Staying overnight at a household with someone who is infectious, and no precautions were taken to isolate the infectious person.

PLEASE NOTE: This definition is for informational purposes only and should not be used to determine whether an individual is a close contact or not. If you have questions on whether you are considered a close contact to someone with COVID-19, please consult your primary care physician or local/tribal health department.

What do I need to do if I'm a close contact?

- Anyone who has been deemed a close contact by a medical provider or local/tribal health department needs to be quarantined.
- Anyone who has been deemed a close contact by a medical provider or local/tribal health department should be tested for COVID-19 if local resources to do so are available. This doesn't allow them to stop their quarantine, but it does identify asymptomatic or pre-symptomatic people who need further assessment.
- It is important for them to self-monitor for symptoms of COVID-19, even after a negative test. If they become symptomatic, they will need to be tested again.
- Work with the local health department on when they can be released from quarantine and return to work.

During contact tracing, will my identity as a positive COVID-19 case be kept confidential?

During contact tracing, confidential information is protected by local health officials. Individuals that meet [the CDC criteria as a close contact](#) are notified by local public health officials that they have been exposed to a positive case and are told to self-quarantine for 14 days after last known contact and monitor their health for symptoms.

How long are you considered contagious after getting COVID-19?

[The CDC states](#) that you can be around others after:

- 10 days since symptoms first appeared and
- 24 hours with no fever without the use of fever-reducing medications and
- Other symptoms of COVID-19 are improving.

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PLEASE NOTE: This definition is for informational purposes only and should not be used to determine whether an individual is contagious or not. The final determination of whether someone is considered contagious or not should be decided by a primary care physician or local/tribal health department

How do I quarantine?

Quarantine procedures should be set into place through your local/tribal health department. Please call your local/tribal health department to discuss quarantine measures. Measures may include:

- Stay home and avoid travel unless travel becomes necessary.
- Most people cannot work during their quarantine period unless they have a working quarantine agreement with their local health department.
- Wash your hands often and practice good hygiene.
- See if someone can drop off essentials to you, or use home delivery services, when possible.
- Postpone all non-essential medical appointments until quarantine is over, or find an alternate way to attend, such as using virtual visit with your provider.
- Do not use public transportation, ridesharing, or taxis.
- Wear a face covering when you have to be around others.

Is a 14 day quarantine no longer recommended? How long should I quarantine for?

Quarantine procedures should be set into place through your local/tribal health department. Please call your local/tribal health department to discuss quarantine measures and your quarantine time-frame.

The CDC continues to endorse quarantine for 14 days and recognizes that any quarantine shorter than 14 days balances reduced burden against a small possibility of spreading the virus.

However, a 14-day quarantine can impose personal burdens that may affect physical and mental health as well as cause economic hardship that may reduce compliance. Implementing quarantines can also pose additional burdens on public health systems and communities, especially during periods when new infections, and consequently the number of contacts needing to quarantine, are rapidly rising. Lastly, the prospect of quarantine may dissuade recently diagnosed persons from naming contacts and may dissuade contacts from responding to contact tracer outreach if they perceive the length of quarantine as onerous.

CDC now recommends two additional options for how long quarantine should last. Based on local availability of viral testing, for people without symptoms quarantine can end:

- On day 10 without testing
- On day 7 after receiving a negative test result

After stopping quarantine, people should:

- Watch for symptoms until 14 days after exposure.
- If they have symptoms, immediately self-isolate and contact their local public health authority or healthcare provider.
- Wear a mask, stay at least 6 feet from others, wash their hands, avoid crowds, and take other steps to prevent the spread of COVID-19.

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What is the difference between isolation and quarantine?

Quarantine is used to keep someone who might have been exposed to COVID-19 away from others. Isolation keeps someone who is sick or tested positive for COVID-19 without symptoms away from others, even in their own home.

If a close contact is deemed a positive case, they are then moved from quarantine to isolation, meaning they need to isolate themselves from others, even in their own home.

The CDC recommends individuals with COVID-19 isolate for at least 10 days after onset of symptoms because the latest scientific data show most people are no longer infectious 10 days after symptoms begin. This guidance applies those with mild to moderate symptoms of coronavirus, however, the final determination of whether someone is considered contagious or not should be decided by a primary care physician or local/tribal health department.

The CDC recommends individuals quarantine for 14 days after exposure to a COVID-19 positive individual, even if they test negative for COVID-19 or feel healthy, because symptoms may appear 2 to 14 days after exposure to the virus. However, the final determination of whether someone is considered contagious or not should be decided by a primary care physician or local/tribal health department.

How do I self-monitor?

- Measure your temperature twice a day (once in morning, once at night), and record them.
- Watch for cough, difficulty breathing, diarrhea, vomiting, fatigue, malaise, fever, loss of taste or smell, or other symptoms consistent with COVID-19.
- If you develop symptoms of concern, contact your primary care provider, and notify the local health department. Guidance will be given on how to access care safely.
- If you need emergency medical attention, call 911 and notify them that you have been under monitoring for COVID-19.

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When do I need to get emergency care?

Look for emergency warning signs* for COVID-19. If someone is showing any of these signs, seek emergency medical care immediately:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

**This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.*

Call 911 or call ahead to your local emergency facility:

- Notify the operator that you are seeking care for someone who has or may have COVID-19.
- Call ahead. Many medical visits for routine care are being postponed or done by phone or telemedicine.
- If you have a medical appointment that cannot be postponed, call your doctor's office, and tell them you have or may have COVID-19. This will help the office protect themselves and other patients.

If I wear a mask, then can I be around COVID-19 positive individual without becoming a "close contact"?

While research indicates cloth face coverings may help those who are infected from spreading the infection, there is less information regarding whether cloth face coverings offer any protection for a contact exposed to a symptomatic or asymptomatic patient. Therefore, the determination of close contact should be made irrespective of whether the person with COVID-19 or the contact was wearing a cloth face covering. Because the general public has not received training on proper selection and use of respiratory PPE, it cannot be certain whether respiratory PPE worn during contact with an individual with COVID-19 infection protected them from exposure. Therefore, as a conservative approach, the determination of close contact should generally be made irrespective of whether the contact was wearing respiratory PPE, which is recommended for health care personnel and other trained users, or a cloth face covering recommended for the general public. For more information, please see [the CDC's Public Health Guidance for Community-Related Exposure](#).

Other questions

For all other questions, please contact your primary care physician. If you do not have a primary care physician, please contact your [local/tribal health department](#).

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Schools

Are children required to return to school? Are schools required to have an online learning option?

School districts are currently developing plans for a safe return to school this fall. Because Montana is a local control state, these decisions are made at the local school district level and mandated by the school board. Both the Governor's Office and Office of Public Instruction strongly recommend local school districts have an online learning option in their reopening plan.

The Governor's Office and Office of Public Instruction both published school re-opening guidance with this recommendation. OPI's "Reopening Montana Schools Guidance" can be found [here](#). The "Governor's Plan for Reopening Safe and Healthy Schools for Montana" can be found [here](#).

Can school districts provide remote learning to out-of-district students?

Yes, the July 31 directive waives current residency requirements to allow school districts to provide educational services at an offsite instructional setting, including the provision of services through electronic means, to any pupil who (a) meets the residency requirements for that district as provided in § 1-1-215, MCA; (b) resides in the same county as the district; or (c) resides in a school district immediately adjacent to the district.

Are schools going to have money for all the necessary PPE & supplies needed to open in the pandemic? Where is the money coming from?

Schools have been awarded \$41 million through the Elementary and Secondary School Emergency Relief Fund, as well as \$75 million through the Governor's Coronavirus Relief Fund. This funding should help schools purchase PPE. Additionally, Governor Bullock asked Disaster and Emergency Services (DES) to secure bulk PPE for schools, in addition to the PPE they should be purchasing for their own safety efforts.

How do I sign up for home schooling?

For information on homeschooling, please contact your [county superintendent](#). The Office of Public Instruction has more information on homeschooling [here](#).

Are masks mandated in schools?

The July 15 Directive providing for the mandatory use of face coverings in certain settings is hereby amended to require the use of face coverings, as detailed in that directive, in all public and private K-12 schools. All provisions set forth in the July 15 Directive apply to public and private K-12 schools.

The requirements described in the July 15 Directive providing for the mandatory use of face coverings in certain settings and the August 12 Directive providing for the mandatory use of face coverings in all K-12 schools are modified to apply in all counties statewide, whether or not a county has identified four active cases.

Indoor school spaces are considered indoor spaces open to the public. School-related outdoor activities are considered organized outdoor activities.

All provisions of the July 15 Directive remain in effect except as expressly amended by this Directive. The full directive is [here](#).

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Do teachers fall under the public speaking exception for wearing a face covering?

Section 4 of the mask directive provides exceptions for “Businesses, government offices, other persons responsible for indoor spaces open to the public, and sponsors of organized outdoor activities are not required to ensure the following individuals wear face coverings... persons giving a speech or engaging in an artistic, cultural, musical, or theatrical performance for an audience, provided the audience is separated by at least six feet of distance”.

A student or teacher giving a presentation and socially distanced by at least six feet from others would qualify under this exception.

How should school districts handle recess time?

The November 17 directive does not alter existing gathering size requirements for public and private K-12 schools. The Governor’s July 15 Directive states that organized outdoor activities are defined as any gathering of 50 or more people for an activity or event organized or sponsored by a business or person, or that takes place on the property of a business or person. The Governor’s August 12 Directive to include schools clarifies that school-related outdoor activities are considered organized outdoor activities. A gathering of less than 50 people would not be subject to the Directive, though we strongly encourage the use of face coverings when social distancing is not possible. In all other school settings, face coverings are required unless an exception from the July 15 Directive applies (*e.g.*, consuming food, strenuous physical activity, etc.)

Who should families with students with disabilities reach out to for questions on face covering exceptions in schools?

Families should work with local public health officials and local school boards to determine alternate accommodations for students who either cannot or will not wear a face covering in school. The Governor’s July 15 Directive provides exceptions for:

- Persons seeking to communicate with someone who is hearing impaired
- Persons who have a medical condition precluding the safe wearing of a face covering

If accommodations cannot be made and individuals are unable to comply with requirements necessary for safe operation, individuals should consult their local school board. Under the Governor’s Directive, local jurisdictions, including public health officials and school boards, have the authority to be more restrictive if they so choose. Local public health officers, who understand the needs and circumstances of their communities, are often better positioned to make these decisions in consultation with local elected officials, health experts, and school board members.

If children in a school are socially distanced and in seats, can they remove their face coverings?

On August 12, Governor Bullock extended the July 15 Directive requiring face coverings in certain indoor and outdoor settings to include public and private k-12 schools. The August 12 Directive requires students and staff to wear face coverings in all areas of the school. While children are encouraged to wear face coverings at all times, schools may allow children to remove their face coverings if they are seated and socially distanced in a classroom. This is a narrow allowance. Social distancing is defined as having 6 feet of spacing from any other person—in other words, this flexibility is permissible only where such spacing is strictly observed. Doing so may require reduced classroom capacity. The flexibility described here applies only to classrooms where social distancing can occur and when children are seated at their desks. If a teacher is working one on one with a student, both teacher and student must wear a face covering. If students are working in small groups, they must be wearing face coverings.

The flexibility described here is only available where county health departments have not instituted more stringent requirements. Local officials and individual school districts may impose more restrictive

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requirements as they deem appropriate for local circumstances. Here is the relevant language, reproduced in both the July 15 and August 12 Directives: “In the interest of uniformity of laws and to prevent the spread of disease, all inconsistent local government health ordinances or orders are preempted by this Directive, but only to the extent they are less restrictive. Counties, cities, and towns may adopt more restrictive ordinances.”

Would homeschool co-ops (small groups of homeschool families that are signed up ahead of time for courses) be required to wear masks?

Children who are homeschooled in the privacy of their own home are not subject to the Governor’s August 12 Directive. When students come together in alternative settings, they are strongly encouraged to wear face coverings. The Directive extends the mandatory use of face coverings to all public and private school settings in counties with four or more active COVID-19 cases.

What COVID-19 protocols are Montana Universities taking?

Montana University System campuses are implementing a broad range of measures to mitigate the spread of COVID-19, including requiring face coverings, social distancing, additional cleaning protocols, installation of hand-sanitizing and washing stations, education campaigns, and many other actions. The Montana University System also has established a [strategic and targeted system](#) for rapid testing, contact tracing and quarantine/isolation to prevent single cases from growing into clusters and preventing clusters from growing into larger outbreaks.

Each MUS campus has links to comprehensive COVID-19 information and resources on its homepage. Links to each can be found [here \[mus.edu\]](#). In addition, the [Montana University System website \[mus.edu\]](#) features system-level COVID-19-related announcements and resources for students, faculty and staff.

Links to additional information:

[COVID-19 Information and Resources](#)
[Coronavirus and Forbearance Info for Students, Borrowers, and Parents](#)

Are college students being counted on the Montana COVID-19 cases map, even if they aren't residents of Montana?

Montana college students who test positive for COVID-19 are counted in the overall state numbers and in the county where he/she attends school.

Is there a protocol in place if there is a COVID-19 outbreak in a school?

Yes. Please [click here](#) for the Governor's Office protocol released on 9.9.2020.

How will I know if there are COVID-19 positive cases in my child's school?

The Department of Public Health and Human Services will post demographic information about positive COVID-19 cases in K-12 schools and at universities every Wednesday (and occasionally more frequently if there is a major event). You can find that information [here](#).

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Is my child's identity and health information safe if the state is posting information about COVID-19 cases in schools?

Yes. The information provided by public health officials does not publicly display health data about individual children or staff. It simply provides parents, teachers, and the interested public with general information if there are positive cases associated with a school. For schools with over 50 students, both the number of students positive and the number of staff positive will be shared along with the name of the school and in which county the school is in. For schools with between 11 and 50 students, the number of students and staff tested positive will be shared, but it will not distinguish between students or staff. For schools with 10 or fewer students, there will be no reporting in order to ensure the protection of individual privacy.

Why doesn't the school data that DPHHS is posting match the information posted on my county health department website?

DPHHS is posting updated school data online by 5 p.m. every Wednesday. The data represents cases reported from the previous week through Friday. Some counties may update their website more often, so it's likely the numbers will not match in every situation. The DPHHS school data is posted [here](#).

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COVID-19 Testing

Where can I get tested for COVID-19?

Contact your [county/local health department](#) about COVID-19 testing in your county. Please keep in mind that currently DPHHS is prioritizing testing at the MTPHL to ensure critical testing needs of patients and providers are met. As a result, testing performed will be prioritized as follows:

Priority 1- Testing supporting response activities:

- a. Symptomatic, regardless of hospitalization
- b. Close Contacts* and Outbreak Investigations coordinated by Public Health Authorities

Priority 2- Testing supporting surveillance/monitoring activities:

- c. Frontline workers (Health Care Workers in high-risk situations, staff of Assisted Living Facilities and Long-Term Care centers participating in surveillance testing)
- d. Residents of selected congregate settings such as group homes, institutions, and other facilities

Other low-priority testing will be conducted as resources allow but may not be a priority for the MTPHL. These include, but are not limited to:

- Testing of asymptomatic people for activities such as travel
- Pre-procedural testing such pre-ops, dental visits and similar activities
- Testing of individuals in the general public who are not symptomatic
- Other individuals who seek testing that do not fit into the priority categories above

*Close contacts are generally identified and referred to providers by local public health officials, but instances of patient referrals may occur. If necessary, consultation with local public health officials, when feasible, if concerns regarding whether or not someone is a valid close contact exist.

My local health department isn't conducting COVID-19 testing asymptomatic individuals at this time.

Where do I go to get tested?

Currently, testing priority is for symptomatic individuals and their close contacts although the state is still supporting asymptomatic community testing on a limited basis.

If your local health department isn't conducting asymptomatic testing at this time and you need testing for other reasons, such as travel, you can request a COVID-19 test from your doctor.

Many insurance companies are offering to cover the cost of COVID-19 testing; however, you should ask your insurance company about their claim policy first. If you are on Medicare or Medicaid, your COVID-19 testing will be covered. Uninsured Montanans should call 406-444-7605 or email HHSPresumptive@mt.gov for information about how to access free testing and treatment.

Why can't I get my test results back sooner so I can get off quarantine?

It's important to observe the entire 14-day quarantine period. Testing too early can provide a false sense of security because the virus may not be detected immediately. That's why the 14-day quarantine is so important. Even if your test is negative and you do not have symptoms, continue to stay away from others (self-quarantine) for 14 days after your last exposure to COVID-19 and follow all recommendations from the health department.

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What steps are being taken to ensure COVID-19 test specimens results are received in a timely manner?

The State Public Health Laboratory continues to process tests 7 days a week, has capacity to run about 1,300 tests a day, and the turnaround time is 1-2 days once the sample arrives to the lab.

The State of Montana has a contract with the Mako lab in North Carolina that has performed with a 1-2 day turnaround time once the sample arrives to the lab.

Montana State University has also begun processing tests, as well as hospitals in Bozeman, Billings and Kalispell.

Why doesn't Montana provide rapid COVID-19 testing, where results are available in minutes instead of days?

The State has distributed rapid testing analyzers (Abbott ID Now) and test kits to facilities across the state to support COVID-19 testing. Test kits are continuing to be supplied to these sites as well as to hospitals that already had these instruments. Additionally, some hospitals and outpatient clinical facilities have other rapid testing instruments that are being used for patient testing. We continue to support point-of-care tests across Montana as resources allow. The federal allocation of testing kits is the limiting factor and Montana has worked with partners to prioritize testing. Montana has distributed 15 Abbott machines across the state.

There are a number of challenges and barriers that Montana and other states are currently facing regarding the existing and new rapid COVID-19 tests that are available or are just being released. One barrier is supply chain shortages of test kits for specific systems.

A second challenge is related to the accuracy of these rapid tests and problems with false negative results. New technology is always emerging that we continue to evaluate. Ensuring high quality rapid testing is just as important as providing it.

The State of Montana continues to process COVID-19 tests daily at the state public health laboratory, and is building up in-state capacity through contracts with Montana State University, hospitals in Bozeman, Kalispell and Billings and with the Mako lab in North Carolina.

How much does testing cost?

Testing is available at no cost for people who don't have insurance or who have a doctor's order to be tested.

People who have insurance should always consult their health plan to make sure a service is covered before seeking any medical treatment. This is especially important to remember now because many insurance companies cover COVID testing if it is medically indicated but not for people without symptoms who haven't been in direct, sustained contact with a person with a confirmed positive test. It's best to call your health care provider first to ask this question to avoid incurring unexpected costs.

Uninsured Montanans should call 406-444-7605 or email HHSPresumptive@mt.gov for information about how to access free testing and treatment, if needed, for the uninsured.

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Why are we testing people without symptoms?

We are learning more and more about this virus every day. While still being investigated, most experts believe individuals can transmit the virus before they have symptoms. We even know of individuals who never show symptoms but can carry the virus. How much of a risk these individuals are to spreading the virus is still unknown. The earlier we can find infected people, the better job we can do to prevent a significant outbreak within our community.

Where do I get tested if I do have symptoms of COVID-19?

If you have symptoms related to COVID-19 (such as shortness of breath, fever/chills, fatigue, muscle or body aches, etc.), please call your primary physician immediately. If you do not have a primary physician, call your local health department. Do not go in for testing without calling first.

Who do I contact if I have questions about COVID-19 testing being offered in my community?

Please call your local health department. A list of County and Tribal Health Departments and their contact information can be found at <https://dphhs.mt.gov/publichealth/fcss/countytribalhealthdepts>.

What type of test is being offered?

A molecular (PCR) test will be done. Although results take a few days to be reported, this is the most sensitive and accurate test for infection of COVID-19. It will let you know if you have the virus (this is a "point in time" test, so it only applies to whether or not you have the virus on the day the test is administered). Remember to continue to practice social distancing and other public health measures to prevent acquiring COVID19.

Are there other benefits to being tested?

Yes. Some people use the test to help plan for a safer visit to family and friends. To do this, it is crucial to avoid possible exposure to the virus between the time of testing and returned negative results. However, it is vital to understand if you have recently been exposed to COVID19, you may test negative but convert to positive within the 14-day incubation period of the virus.

Also, testing those with and without symptoms, and monitoring for early COVID-like symptoms presenting to our clinics and hospital, will help us establish trends and prevalence of COVID-19 in our area. This early information is crucial for us to minimize the impact (safety and economic) of this illness to our community. This kind of information will help the state determine when we can move to Phase 3 of Reopening the Big Sky.

What if I test positive?

As quickly as possible, confirmatory testing will be done to assure the initial test was accurate. During this time, you will be asked to “home quarantine” while we give instruction and encourage testing to those you have had close contact with. If truly positive, our public health team will monitor your symptoms with instructions for further care if needed.

Is the testing painful?

Absolutely not! We will be using the “self-swab” technique where you will be given a swab with instructions to swab the inside of your nose – this is a shallow technique avoiding the pain of deep swabbing.

I have questions regarding COVID-19 testing in nursing homes/assisted living facilities.

For questions regarding testing of Residents and Staff of Nursing Homes and Assisted Living Facilities, click [here](#).

THIS DOCUMENT REFERS TO PHASE 2 OF MONTANA’S REOPENING, BEGINNING JUNE 1. NO DATE HAS BEEN SET FOR PHASE 3.

Where can I get an antibody test?

Antibody tests are available at the Red Cross after blood donations

- View the Red Cross press release [here](#)
- View the Red Cross FAQs regarding antibody testing [here](#)
- For more information, contact your local Red Cross (<https://www.redcross.org/local/montana.html>)

Are there promotional materials available for testing hosts?

- [Montana’s Community Snapshot Testing Initiative](#)
- [Facility plan for cleaning, sanitizing and disinfecting](#)
- Sample Consent Form ([PDF](#) | [Word](#))
- [Fillable social media graphic](#)
- Flyer ([example](#), [fillable form with photo](#), [fillable form/add your own photo](#))
- 4ft x 3ft banners to put at testing sites ([white option](#), [green option](#), [green option that allows you to add your own photo](#))
- 5ft x 1ft banners to put at testing sites ([option 1](#), [option 2](#), [option 3](#))

For the following promotional material requests, please email jic@mt.gov

- PR Assistance for events (ex. press releases and media advisories)
- PSA scripts
- Questions on how to fill out the adobe fillable forms above