





### **COVID-19 Webinar for Medicaid Providers**

April 9th, 2020

Shannon Dowler, MD
Chief Medical Officer, NC Medicaid

Tom Wroth, MD, MPH
President, Community Care of North Carolina

Hugh Tilson, JD, MPH
Director, North Carolina AHEC

# **Agenda**

- Welcome & Logistics
- Medicaid Clinical Policy Update
- Telehealth: Experience from the Field
- Resources and Support
- Questions

# **Webinar Logistics**

# **Medicaid Policy Changes**

### **Last Round Telehealth Provision Reminder**

- Services delivered through local education agencies (LEAs)
- Services delivered through children's developmental service agencies (CDSAs)
- Diabetes self-management education
- Dietary evaluation and counseling
- Medical lactation
- Research-based behavioral health treatment for autism spectrum disorder

# **NEW! TELEHEALTH PROVISIONS 4/10/20**

- Optometry clinical services
- Patient BP Monitoring(and devices)

Code	Description (See 2020 CPT Code Book for Complete Details)
99473	Self-measured blood pressure using a device validated for clinical accuracy; patient education/training and device calibration
99474	Separate self measurements of two readings once minute apart, twice daily over a 30-day period (minimum of 12 readings), collection of data reported by the patient and/or caregiver to the physician or other qualified health professional, with report of average systolic and diastolic pressures and subsequent communication of a treatment plan to the patient.

### Post Partum Visit

- May be completed with Telehealth for appropriate patients

Codes	Description (See 2020 CPT Code Book for Complete Details)						
59430	Postpartum care only - separate procedure						

- Pregnancy Medical Home risk assessments S0280-81
  - May be done through Telephonic OR Telehealth

### **Automatic BP Monitors for RPM**

- HCPCS code A4970 added for Medicaid and NCHC coverage effective March 30, 2020 (Special Bulletin #29)
- Medical necessity for patient to monitor BP from home
- Prescriptions can be filled by Durable Medical Equipment (DMEPOS) suppliers and home health agencies
- No prior authorization required
- Downloadable list of enrolled DMEPOS providers with location and contact info available here:

<a href="https://medicaid.ncdhhs.gov/providers/programs-services/medical/durable-medical-equipment">https://medicaid.ncdhhs.gov/providers/programs-services/medical/durable-medical-equipment</a>

### OTHER POLICY DEVELOPMENTS

#### In place now:

- 90 day supply of stimulants and buprenorphine for appropriately identified patients
- Eligibility will not be terminated during State of Emergency
- Co-Pay elimination for COVID related care

#### In Place Very Soon:

- Family Planning annual exam requirement waived (Effective 4/13/20)
- Medication Delivery by Mail/Service(Effective Date Pending)

#### In Development: Fiscal Analysis and/or Authority Issue:

- Rate change for reimbursement for telephonic care "COVID Differential" (TBD; retro to 3/10/20)
- Evaluation of PMPM increase for Medical Homes during state of emergency(TBD)
- Communication to beneficiaries on how and why to engage in telehealth(TBD)
- BCCCP Eligibility inclusion from outside provider diagnoses(TBD)

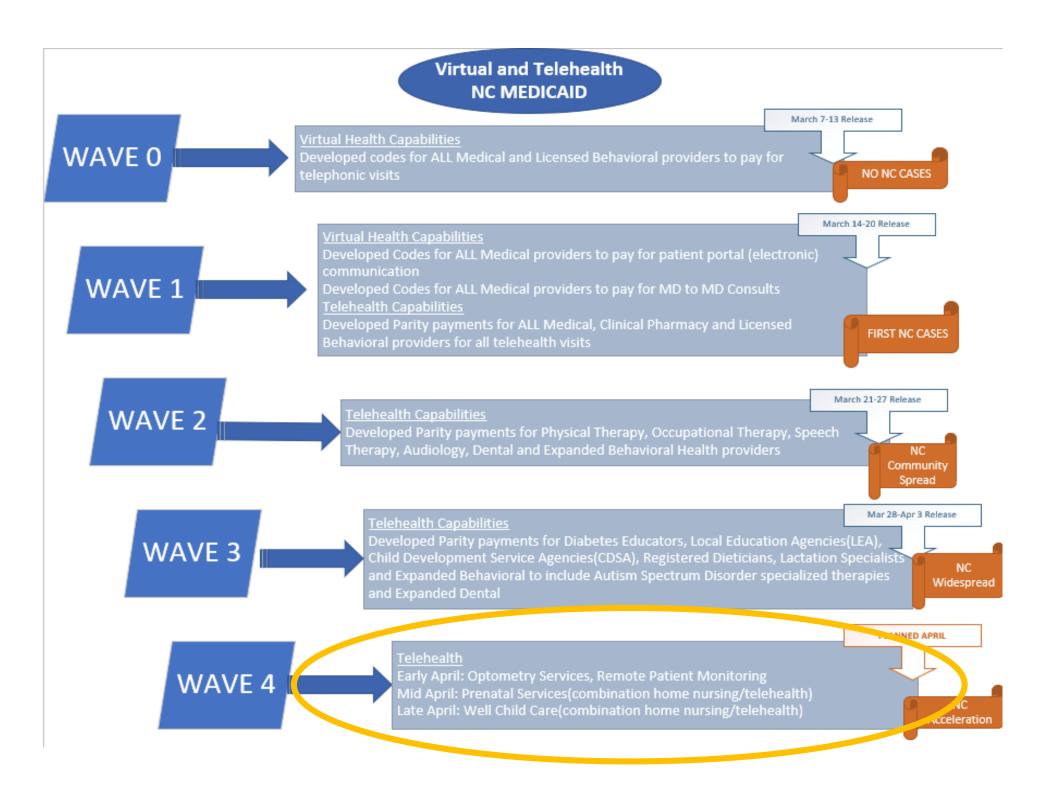


TABLE 1. PRESCRIBERS (MEDICAL AND BEHAVIORAL HEALTH)									
SERVICE	APPLICABLE PROVIDERS	RATE CODE OR PROCEDURE	MODIFIERS & POS	SOURCE BULLETIN					
TELEMEDICINE									
Office or Other Outpatient Service and Office and Inpatient Consultation	Advanced practice midwives     Clinical pharmacist practitioners     FQHCs, FQHC Look-Alikes & RHCs*     Nurse practitioners     Physicians     Physician assistants     Psychiatric nurse practitioners	99201, 99202, 99203, 99204, 99205, 99211, 99212 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99251, 99252, 99253, 99254, 99255	Reported with usual place of service (POS)  Modifiers GT & CR  Services that are not COVID-19 related should continue to be billed in accordance with NC Medicaid clinical coverage policy 1H, telemedicine/telepsychiatry  POS 50 (FQHC) or 72 (RHC)	Special Bulletin COVID-19 #34: Telehealth Clinical Policy Modifications – Definitions, Eligible Providers, Services and Codes					
		RHCs only: T1015	Modifiers GT & CR						
VIRTUAL PATIENT COMMUNICATIONS									
Telephone Evaluation and Management	Advance practice midwives     FQHCs, FQHC Look-Alikes & RHCs*     Nurse practitioners	99441, 99442, 99443, G2012	Reported with usual place of service (POS)     Modifier CR	Special Bulletin COVID-19 #34: Telehealth Clinical Policy Modifications – Definitions,					
	Physicians     Physician assistants	*FQHCs, FQHC Look-Alikes and RHCs only: G0071	POS 50 (FQHC), 72 (RHC)     Modifier CR	Eligible Providers, Services and Codes					
Online digital Evaluation and Management	<ul> <li>Advance practice midwives</li> <li>FQHCs, FQHC Look-Alikes &amp; RHCs</li> <li>Nurse practitioners</li> <li>Physicians</li> <li>Physician assistants</li> </ul>	99421, 99422, 99423	Reported with usual place of service (POS)     Modifier CR						
Interprofessional Assessment and Management	Consulting physicians bill for services requested by a physician, physician assistant, nurse practitioner or certified nurse midwife	99446, 99447, 99448, 99449	Reported with usual place of service (POS)     Modifier CR						

Health Plans	VIRTUAL HEALTH				TELEHEALTH						
	Telephonic Medical	Telephonic Behavioral	E-Visit (portal)	MD:MD Consult	Payment Parity (E&M)	Prior Authorization Required	Originating Site Limitations	Distance Site Limitations	PT/OT/ST	Policy Reference	Billing Codes
Aetna	See Policy	See Policy	Yes	Yes	Yes	No	No	No	See Policy	<u>Link</u>	Link Check Navinet for latest
Ambetter of NC	Yes	Yes	Yes	No	Yes	No	No	No	Yes	<u>Link</u>	
BCBSNC	Yes	Yes	Yes	No	Yes	No	No	No	Yes	Link	<u>Link</u> <u>Link</u>
BCBSNC FEP	Yes	Yes	Yes	No	Yes	No	No	No	Yes	Link	
Cigna	Yes	Yes	Yes	Yes	Yes	No	No	No	Yes for commercial	<u>Link</u>	<u>Link</u>
FirstCarolinaCare	Yes	Yes	Yes	No	Yes	No	No	No	Yes	Link	
Humana	Yes	Yes	No	No	Yes	No	No	No	No	Link	
Medicare	Yes	Yes	Yes	Yes	Yes	No	No	No	No	Link	
NC Medicaid	Yes	Yes	Yes	Yes	Yes	No	No	No	Yes	<u>Link</u>	<u>Link</u>
NC State Health Plan	Yes	Yes	Yes	No	Yes	No	No	No	Yes	<u>Link</u> <u>Link</u>	
UnitedHealthcare	Yes	Yes	Yes	Yes	Yes	No	No	No	Yes	Link Link Link	
WellCare	Yes	Yes	Yes	Yes	Yes	No	No	No	Yes	<u>Link</u>	Link

# Telehealth: Experience from the Field

# **Telehealth Experiences**

- Implementation
- Workflow pearls and tips
- Enabling patients to connect
- Addressing barriers

### **Common Barriers to Implementing Telehealth**

#### **Patient Barriers**

- Aversion to technology
- Lack of internet access
- Limited data/minutes on smartphone
- Fear of the unknown
- No privacy in home
- Unsure how to set up
- Concerns about cost

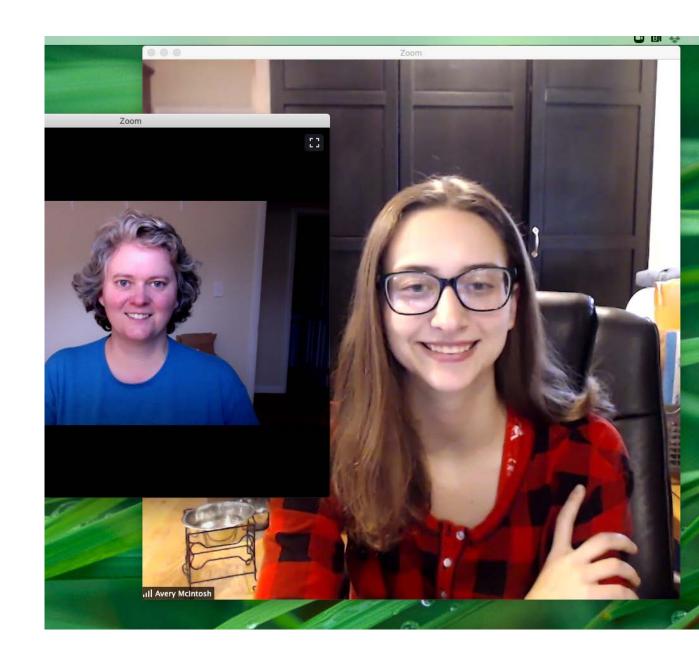
#### **Provider Barriers**

- Compliance with Medicare rules
- Legal concerns
- Implementation process setting it up and documenting visits
- Low confidence in performing a physical exam remotely
- Workflow uncertainty how to get vitals or labs
- HIPAA concerns
- Lack of admin support
- How to choose a vendor and evaluate the investment

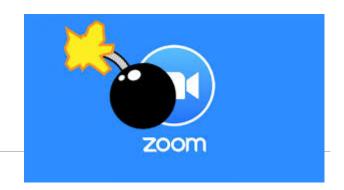
# Dr. Steve North Eleanor Health

# **Zoom for Telehealth**

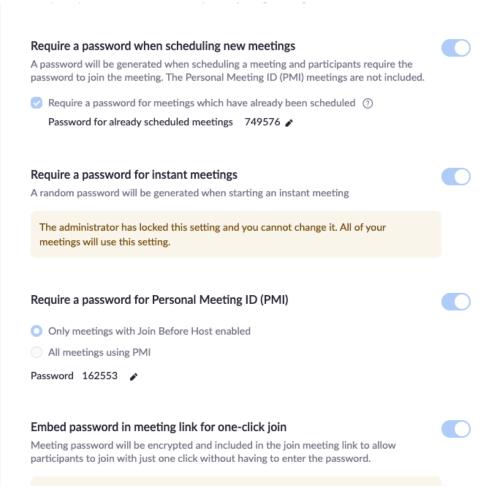
- Freestanding platform
- Your patients may already be using it for the rest of their life
- Both free and HIPAA compliant versions
- No easy schedule integration



### **Preventing Zoom Bombing**

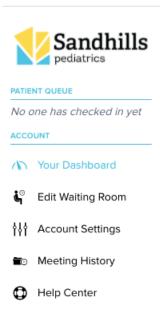


Waiting room  Attendees cannot join a meeting until a host admits them individually from the waiting room. If Waiting room is enabled, the option for attendees to join the meeting before the host arrives is automatically disabled.   Choose which participants to place in the waiting room:  All participants  Guest participants only ?	
Course participants only	
Screen sharing Allow host and participants to share their screen or content during meetings	
Who can share?	
○ Host Only ○ All Participants ②	
Who can start sharing when someone else is sharing?	
O Host Only All Participants ?	

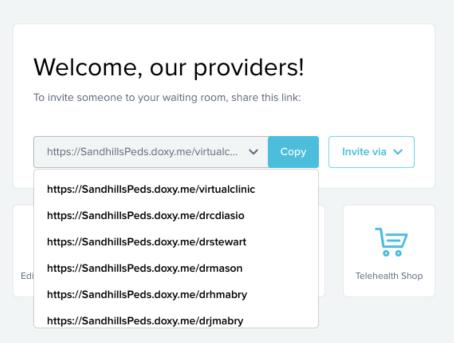


### Dr. Christoph Diasio Sandhills Pediatrics

# Doxy.Me



Logout





Pre-call Test

HEL

# Dr. Karen Melendez Support, Inc.





Everyone must be positioned to work at the top of their license



**Reminder Calls** 



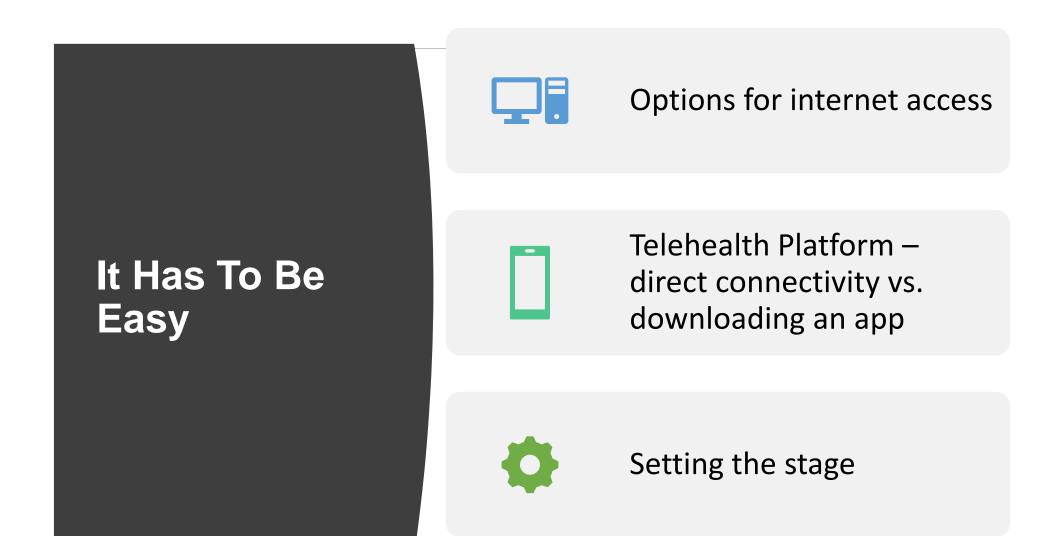
Preparing patients for the tele visit



Starting notes



Keeping the day's schedule going/backfilling appointments



### Dr. Viviana Martinez-Bianchi

Duke Department of Family Medicine and Community Health
Duke Family Medicine Residency Program Director
World Organization of Family Doctors' Executive

### **Disclosure**

- Comments shared are my own personal opinion
- Passionate about improving health and decreasing health disparities

### **Common Barriers to Implementing Telehealth**

#### **Patient Barriers**

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### **Common Barriers**

#### **Patient Barriers**

- Lack of internet access
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- Concerns about cost

#### Social Determinants Of Poor Health

#### Possible Options:

- NCMEDICAID to provide phone cards with increased data.
- Office to align a person to help set up.
- Information for patients on how to set up
- County/state wide free internet?

### **Common Barriers**

#### **Patient Barriers**

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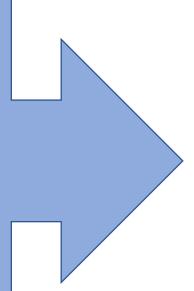
#### **Set up Telehealth Navigators**

- Train a care manager team to help patients navigate the technology, downloading apps, setting up system (IPhone vs Android glitches for example)
- Should be cost free to those who can't afford this, It will cost the state more on the long term if access is limited

- Advocacy for clear and appropriate Medicare rules and policies that guarantee work done will be paid
- Legal advice and regulations that understand the limitations of care without in-person exam-
- Sharing of templates and dot phrases via the office of Medicaid

### **Provider Barriers**

- Compliance with Medicare rules
- Legal concerns
- Implementation process setting it up and documenting visits

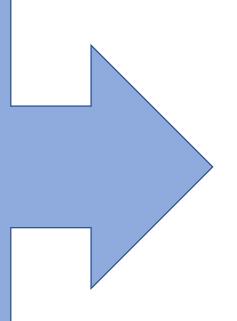


- Guidance videos can be performed by those already implementing telehealth sharing tips on remote physical exam
- Multiple examples in the literature that can be used
- Some patients do have BP machines, thermometers, pulse ox, glucometer and can show results during telehealth exam.
- Have patient walk around if short of breath, show rash, etc

#### **Provider Barriers**

- Low confidence in performing a physical exam remotely
- Workflow uncertainty – how to get vitals or labs

 Verbiage during the exam, at the beginning of it, needs to include asking the patient whether they are in a place where it is safe to speak, and where information will be kept confidential



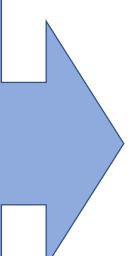
#### **Provider Barriers**

HIPAA concerns

- Administrative support is needed to get this off the ground. Both to help with patient barriers and to help with scheduling patients.
- Could office of NCMEDICAID assign support for practices in need?
- Volunteer force? Potential for medical, PA and nursing students who are currently without much to do

#### **Provider Barriers**

Lack of admin support



Many vendors out there, and some already set up. We need to learn from experience, reports of early users who share problems and glitches. Have two options with video possibilities. A primary and a backup combination. (i.e: Jabber and browser combo).

#### **Provider Barriers**

How to choose a vendor

- NCMEDICAID/ CCNC could help with allowing Telehealth visits to continue at fair pay beyond COVID19 to make investment in telehealth worthwhile long term.
- Problems of access do not end with end of COVID pandemic.
- Much on mental health from the PHC perspective, multiple questions and issues could be taken care of long term, not just in this times of crisis. (i.e. patient with difficulty with transportation

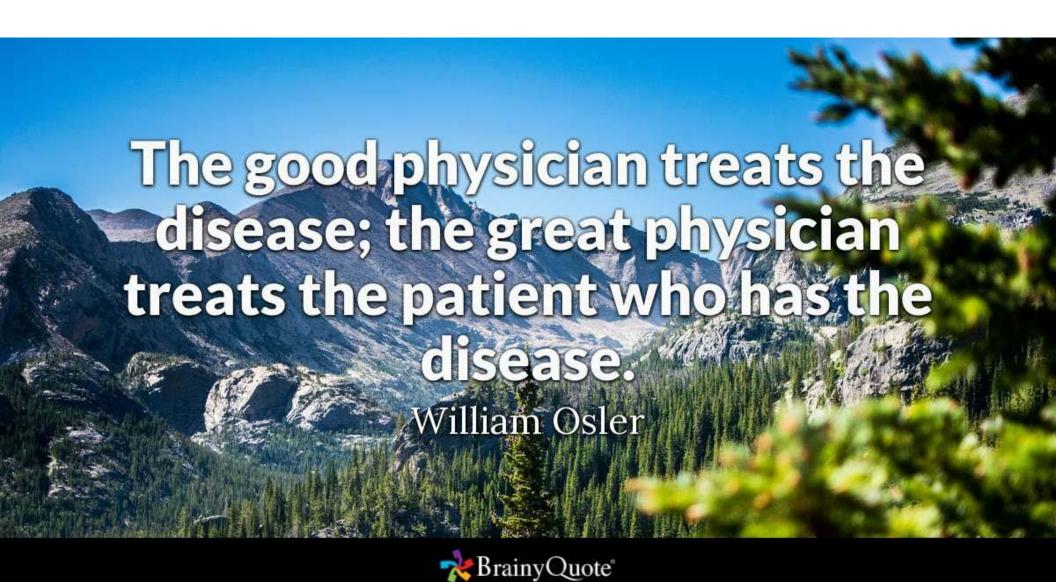
#### **Provider Barriers**

evaluate the investment

# **Dr. Karen Smith**Karen Smith, MD

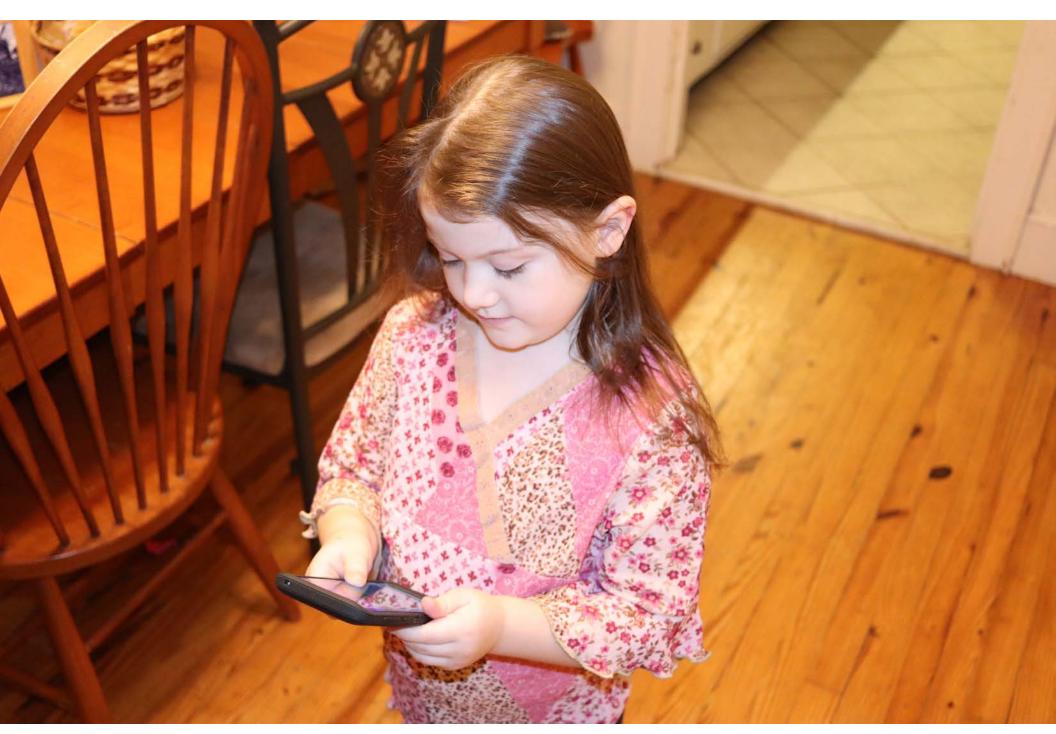
### **Telehealth Strategies**

- 1. Telehealth integration as part of comprehensive healthcare
- 2. Use of internal home resources as a way to navigate a new system of care delivery
- 3. Use of Smartphone, tablet, other devices as communication tools found in the home setting
- 4. Televideo examination strategies









# Where To Get Information and Help

## New: FCC Announces Funding for Telehealth

- COVID-19 Telehealth Program with up to \$200 million to help health care providers provide connected care services to patients at their homes or mobile locations in response to the COVID-19 pandemic
- Additional 3-year Connected Care Pilot Program with up to \$100 million of support to help defray providers' cost of providing telehealth
- Eligible providers consist of teaching hospitals and medical schools, community health centers or health centers caring for migrants, health departments, community mental health centers, not-for-profit hospitals, rural health clinics, skilled nursing facilities or consortia of one or more of the eligible providers types
- More information: <a href="https://docs.fcc.gov/public/attachments/FCC-20-44A1.pdf">https://docs.fcc.gov/public/attachments/FCC-20-44A1.pdf</a>

## **Available Telehealth Vendor Support**

- Several organizations are partnering with vendors to provide telehealth services at no cost to providers for a limited time:
  - CCNC partnering with DocsInk
  - NC Medical Society partnering with Presence
  - NC Community Health Center Association partnering with Doxy. Me

## **CCNC** and AHEC Partnering to Support Practices

## **Telehealth Support**

- How to Get Started
- Evaluating Technology
- Staff Education
- Patient Education
- Workflow Re-design
- Billing & Coding
- Clinical Case Study Examples
- Access to Resources
- Tips for conducting AWV

## **Practice Support Services for COVID-19**

- Providing latest updates from NCDHHS (Medicaid & DPH),
   CMS and CDC
- Financial assistance updates
- COVID-19 and Skills Education
- Operational Efficiency
- Technical Assistance on billing & coding, EHR, HIEA, etc.
- Coordination of Care Issues
- Transitions of Care Management
- Quality Improvement
- Community Resources & Support for SDOH

## **How to Contact Practice Support**

#### **CCNC Practice Support**

Email: <u>CCNCSupport@communitycarenc.org</u> OR

CCPNSupport@communitycarenc.org

Phone: 919-926-3895

Website: <a href="https://www.communitycarenc.org/statewide-operations">https://www.communitycarenc.org/statewide-operations</a>

#### **NC AHEC Practice Support**

Email: <u>practicesupport@ncahec.net</u>

Phone: 919-445-3508

Website: <a href="https://www.ncahec.net/practice-support/what-we-do/">https://www.ncahec.net/practice-support/what-we-do/</a>

## **Healthcare Preparedness Survey for Providers**

- It is critical that DHHS understands the medical staffing resources available and needs identified across the state to prepare for the peak of the COVID-19 outbreak.
- Hospitals regularly report their needs to the Healthcare Preparedness Coalitions but there has not been a way to gather this information from practices, until now.
- Please complete the following brief survey in order to enable DHHS to provide current information and source supplies more effectively.

**Survey link:** <a href="https://nc-covid19.sirs.unc.edu/healthcare-preparedness">https://nc-covid19.sirs.unc.edu/healthcare-preparedness</a>

# **COVID-19 Triage Plus – Resource for Practices** and their Patients

### Statewide, Inbound Call Center Providing:

- Information on COVID-19
- Clinical Triage by RNs, using latest CDC/NCDHHS guidance
- Care Coordination services
- Open to all NC residents, regardless of payer/insurance

## **COVID-19 Triage Plus Line: (877) 490-6642**

Hours of Operation: 7am – 11pm 7 days a week, including holidays

Please add this number to your practices outbound phone message and your website.

### **Medicaid Resources**

Medicaid COVID-19 website: medicaid.ncdhhs.gov/coronavirus

**Medicaid Special Bulletins:** <a href="https://medicaid.ncdhhs.gov/about-us/coronavirus-disease-2019-covid-19-and-nc-medicaid/covid-19-special-medicaid-bulletins">https://medicaid.ncdhhs.gov/about-us/coronavirus-disease-2019-covid-19-and-nc-medicaid/covid-19-special-medicaid-bulletins</a>

Rates: medicaid.ncdhhs.gov/providers/fee-schedules

NCDHHS COVID-19 website: <a href="https://www.ncdhhs.gov/coronavirus">www.ncdhhs.gov/coronavirus</a>

**Telehealth Billing Code Summary:** <a href="https://files.nc.gov/ncdma/covid-19/NCMedicaid-Telehealth-Billing-Code-Summary-20200407.pdf">https://files.nc.gov/ncdma/covid-19/NCMedicaid-Telehealth-Billing-Code-Summary-20200407.pdf</a>

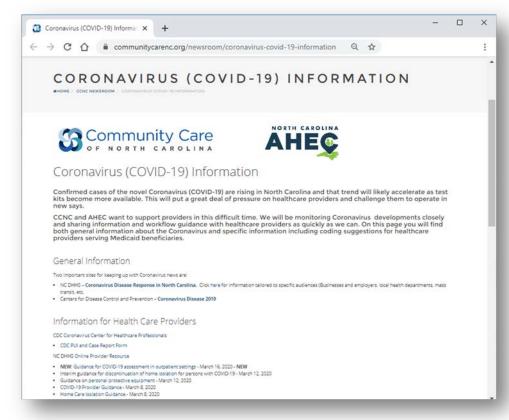
Email for Medicaid-specific questions or concerns: <a href="mailto:medicaid.covid19@dhhs.nc.gov">medicaid.covid19@dhhs.nc.gov</a>

## **CCNC/AHEC** Website

https://www.communitycarenc.org/newsroom/coronavirus-covid-19-information

#### Links for NCDHHS info on:

- General information on COVID-19
- Medicaid coding changes and suggestions for implementing
- Guidance on workflow changes
- Financial assistance
- Webinar recordings



### **COVID-19 Informational Webinar Reminders**

# **New!** Navigating COVID-19: Financial Resources for Practices in the CARES Act

Information for providers available financial resources
Tuesdays from 6-7pm

https://zoom.us/j/131899801

#### **DPH/AHEC Webinars**

DPH provides COVID-19 updates and Q&A with providers Fridays from 12:30-1pm

https://zoom.us/j/705979628

#### NC Medicaid/CCNC/AHEC Webinar

Medicaid policy changes and implementation recommendations Thursdays from 5:30-6:30pm

https://zoom.us/webinar/register/WN\_-B1t8DJXRoOfmZOrOR5LEw

## **Questions?**

