

Navigating Coronavirus Series Pandemic Primary Pearls

May 12, 2020

This webinar series brought to you by













Today's Presenters

- Holly Biola, M.D. MPH, FAAFP
 Lincoln Community Health Center
- Yun Boylston, M.D.
 Burlington Pediatrics
- Zack Feldman, M.D., FAPA
 Raleigh Psychiatric Associates

Holly Biola, M.D. Lincoln Community Health Center

Steps we tried to take in Phase 1:

- Proper protection Masks for all patients & staff; full
 PPE for those doing resp. assess or testing; Shields for
 Front desk staff
- 2. Keep patients home train up team to do Video visits while doing phone visits
- 3. Screeners out front- URI symptoms or elevated temperature keeps you out of the building

Steps we tried to take in Phase 1:

- 4. Social distancing for patients (take phone #s and send to car to wait, waiting room chairs 6ft apart, marks on floor for queueing)
- 5. Social distancing for staff (Zoom meetings, Lunch apart, screeners 6 ft apart)
- 6. Interpreters call into exam room

Steps we are taking in Phase 2:

- 1. Video visits whenever possible (staff trained, at-elbow tech help from SuperUsers in each dept).
- 2. Hybrid visits- even for in-person visits consider having provider do some of the visit over the phone.
- 3. Providers reviewing charts 1 week ahead of time to say Video/Telephone/In-person then CMA calls to see if patient agrees.
- 4. Book Harvest making age approp. "to go" bags. (No more open shelves of books.)

Surprises

- Discussed "Well AM, Sick PM"... the two are difficult to separate for kiddos and ?asymptomatic spread?
- Parents of babies were NOT WILLING to come in. (We are trying Saturdays WCC only starting soon.)
- Larger clinics may want to focus on spreading In-person visits throughout day to limit # pts in bldg
- We have procedural sessions. For those sessions may need to limit another provider to 100% virtual.

New Jobs/Duties created by COVID-19:

- Screeners
- Bouncers
- Swabbers
- Symptom follow-up-ers
- PPE Tracker
- Clean Docs/Dirty Docs
- Video Visit Tech support
- Schedule Reviewers (determine visit type)

Looking ahead

Figure out which of our patients are missing:

- Who doesn't have access to video?...phone?
- Who doesn't have transportation?
- Who did we see for chronic condition or WCC in 2019 who has not been in yet this year?
- For whom could we do Home Visits (presuming providers can be tested for immunity)

Looking ahead – Informational needs

- As more lose jobs/insurance, need to update pts' info
- Changing landscape for food/resources for needy.
- Plans for testing Clinic staff looking for guidance on when to start that, for who, and on what periodicity.
- Training needed around who can be managed virtually versus in-person for scheduling staff.
- At what point (in terms of prevalence) could we go back to letting anyone who wants in-person visit to have one?

Yun Boylston, M.D. Burlington Pediatrics



LEADERSHIP AND INNOVATION IN THE AGE OF COVID-19

PRACTICE PRIORITIES

Patients
Work Family
Local Community

FINANCIAL PRIORITIES

Bolster Revenue Streams
Reduce Expenses
Cash Flow
Sustainability

#1: TELEHEALTH

24%

of all visits within 10 days of practice-wide deployment

- Achieving Scale
- Timely Billing Feedback
- HIPAA
- Integration with Current Workflows
- Behavioral Health Visits
- Virtual Walk-In



Our Telehealth system is up and running! We are doing our part to help keep our patients and their families safe and healthy during COVID-19 and we are so excited to now offer Telehealth visits! Watch this quick video to see just how easy Telehealth is with Burlington and Mebane Pediatrics!







WELCOME TO



Virtual Waiting Room

By your side for a healthy future

* ***

#2: COMMUNICATIONS STRATEGY

- Timely, Transparent Dialogue
- Practice Zoom Huddles
- Shared Goals
- Collaborative Solutions
- HR Informational Sessions







Employee Benefits

WE ARE COMMITTED TO OUR WORK FAMILY

WE ANTICIPATE A TEMPORARY REDUCTION IN WORK HOURS

NO ONE IS BEING LAID OFF

Burlington Pediatrics PA | 5.12.20



#3: SOCIAL MEDIA

- Reassure and Guide Families
- Update on Practice Changes
- Educate about New Services
- Share Community Efforts

Burlington Pediatrics, NC Published by Yun Boylston [?] - March 22 at 7:00 PM - € This video describes recent changes in our office policy and advice to help protect your family and ours.



Alexandra "Ali" Cupito, Ph.D., LP, HSP is a behavioral health specialist. She joined Burlington Pediatrics in November and is working to expand the behavioral and mental health program at our practice. We are very fortunate to have Dr. Cupito as part of our team, especially to help support our practice, patients, and community during this time of Covid19. Check out her Tips Video and ... See More



1,239

5,900 People Reached

Engagements Boost

facebook.com/burlingtonpeds





#4: FINANCIAL STRATEGY



REAL-TIME DASHBOARD

ESTIMATES OF REVENUES AND EXPENSES

LEVERAGE OPTIONS

LINE OF CREDIT
PPP
EIDL
BCBS PREPAYMENTS

INCOME MODELING

FINANCIAL POSITION
CASH FLOW

EXPENSE MANAGEMENT

VARIABLE COSTS
CURRENT LIABILITIES



PRACTICE EXPENSE ANALYSIS



PAYROLL

Greatest monthly expense Patients/ Provider ratio



VACCINES

Accounts Payable
Payment deferral options



LAB/ CLINICAL SUPPLIES

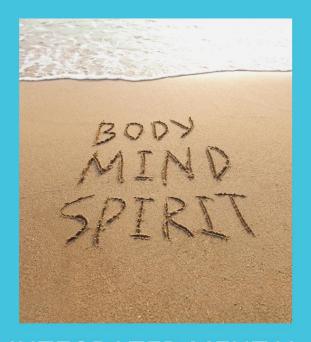
Variable expenses
Correlate with patient volume



OVERHEAD EXPENSES

Target variable costs
Fixed costs (rent, utilities,
facilities maintenance)

CARING FOR OUR COMMUNITY



INTEGRATED MENTAL HEALTH



INCREASE MEDICAID ACCESS



BILINGUAL PROVIDERS AND STAFF

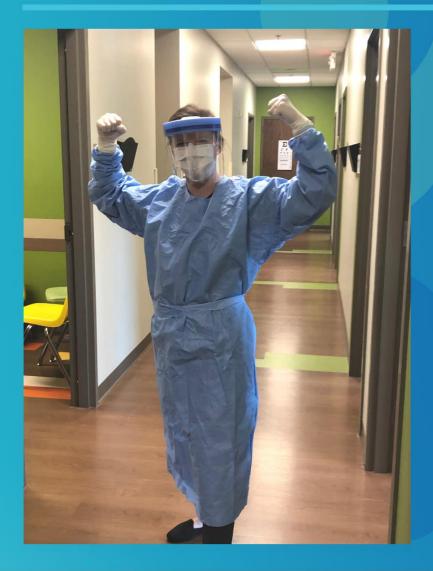
Burlington Pediatrics PA | 5.12.20

GAP OPPORTUNITIES

Vaccines Admini	stered April 20:	19 vs April 202	0		
		Apr-19	Apr-20	2020 as % of 2019	Volume Reduction
DTaP		78	49	63%	-37%
DTaP-HepB-IPV	Pediarix	158	151	96%	-4%
DTaP-IPV	Kinrix	81	40	49%	-51%
Flu		18	79	439%	339%
HiB		177	160	90%	-10%
HPV9	Gardasil	77	34	44%	-56%
Нер А		154	101	66%	-34%
Нер В		5	7	140%	40%
IPV		6	0	0%	-100%
MC4O	Menveo	71	57	80%	-20%
MMR		73	58	79%	-21%
MMRV	Pro-quad	79	39	49%	-51%
MenB		52	63	121%	21%
PCV13	Prevnar	233	211	91%	-9%
Rotavirus		154	145	94%	-6%
TdaP		56	17	30%	-70%
Varicella		77	59	77%	-23%
TOTAL		1549	1270	82%	-18%



NEXT STEPS



Universal Source Identification

Responsive Scheduling

Contribute to the Testing Effort

Reinforce the Medical Home

Burlington Pediatrics PA | 5.12.20

RESOURCES



CLINICAL CARE

AAP
CDC
UNC Health Alliance
Cone Health



BUSINESS

NCPS

CCPN

NCMS

Alamance Chamber

Curi

Office Practicum

Stout Stuart McGowen & King

Americal National Bank & Trust



PUBLIC HEALTH

NCDHHS
Alamance County Health Dept
CDC



Zack Feldman, M.D., FAPA Raleigh Psychiatric Associates

Positive Changes, Silver Linings

- Embracing change
- Telemedicine
- Remote capabilities practice management and phone system
- Engaging with colleagues
- Improving staff communication, sense of teamwork in office
- Engaging with patients

Technology

- Talk to colleagues (inside your organization and outside)
- Change what is needed
- Try not to make unnecessary changes
- Use existing frameworks where possible
- Other things being equal, choose the simplest solution
- Take care of the short-term problems, make longer-term improvements where possible
- Recognize stress of change

Patient Engagement

- Use multiple methods
- Utilize technology but personal outreach works best

Easing of Restrictions

- Still working on specifics but planning a gradual re-opening
- Minimizing number of patients in facility at one time
- Utilizing telemedicine ongoing
- Maintaining positive changes and flexibility

Resources

- Colleagues
 - In your organization
 - Outside your organization (reach out/reconnect)
 - Similar practices
 - Training programs
- Professional organizations
 - Specialty organizations
 - North Carolina Medical Society
- North Carolina Medical Board
- Malpractice carrier/ risk management

Questions?

