The New Coronavirus and Practice Management Strategies to Keep Your Practice Alive and Well Q2-Q4 2020
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Questions?

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LIVE WEBINAR

FEATURING:

Louis F. McIntyre, M.D., Moderator; Northwell Health; Immediate Past President, AANA

Brian J. Cole, M.D., M.B.A., Managing Partner Midwest Orthopedics at Rush; First Vice President, AANA

Mark H. Getelman, M.D., Southern California Orthopedic Institute; Second Vice President, AANA

James W. Stone, M.D., Orthopedic Institute of Wisconsin; Treasurer, AANA

Eric C. Stiefel, M.D., Valdosta Orthopedic Associates; Chair, AANA Advocacy Committee

Nicholas A. Sgaglione, M.D., Chair and Senior Vice President, Orthopedic Service Line, Northwell Health; Chair, AANA JBOT and Education Foundation

The New Coronavirus and Practice Management Strategies to Keep Your Practice Alive and Well Q2-Q4 2020
Webinar Agenda

- What cashflow strategies are you employing during the acute phase of the pandemic?
- How have you handled your Human Resource obligations?
- What aspects of your practice are up and running currently?
- Are you planning on accessing federal assistance programs through the CARES Act and if so which ones? Any other sources of short-term capital?
- How are you handling partner compensation during the acute phase?
- How are you handling both salaried and hourly employees’ compensation and PTO during the acute phase and how long are you planning this strategy?
- How are you handling ancillary services during the acute phase?
- Are you employing telehealth services and how are they incorporated into your practice?
- What patient and employee safety measures are you employing right now?
- What do you anticipate the ramp up will look like and how will your practice change?
Tax Credits and Loan Forgiveness Programs
COVID-19 Economic Injury Disaster Loan

Paycheck Protection Program

- Loan application dates April 3-June 30
- Small business up to 500 employees
- Forgiveness period “8 weeks following securing of the loan amount”
- Eligible expenses = Payroll cost, employee benefits and leave, debt refinancing, rent & utilities
- 75% of forgiven amount must be used for payroll
- Loan amount = average monthly payroll X 2.5
- Forgiven amount = based on employees maintaining or quickly rehiring to maintain salary level and FTE

https://covid19relief.sba.gov/#/
COVID-19 Tax Credits

- Employee Sick Leave Credit
  - All employers eligible
  - Dollar for dollar credit on sick leave up to 80 hours per employee
  - Includes family leave for child-care paid at 2/3 regular pay, up to 10 weeks or $10,000

Employee Retention Tax Credit

- Eligible employers with less than 100 employees
- Not available to employers receiving assistance though Paycheck Protection Program
- Eligible time period March 12-Jan 1, 2021
- Eligible employer
  - Demonstrates a “significant decline (<50%) in quarterly gross receipts”
  - OR - Partially suspending operations due to orders from appropriate gov authority
- Max credit amount up to 5,000/employee/year

https://www.irs.gov/coronavirus
EMPLOYEE RIGHTS
PAID SICK LEAVE AND EXPANDED FAMILY AND MEDICAL LEAVE UNDER THE FAMILY'S FIRST CORONAVIRUS RESPONSE ACT

The Families First Coronavirus Response Act (FFCRA or Act) requires certain employers to provide their employees with paid sick leave and expanded family and medical leave for specified reasons related to COVID-19. These provisions will apply from April 1, 2020 through December 31, 2020.

- **PAID LEAVE ENTITLEMENTS**

  Generally, employees covered under the Act must provide employees:

  • Up to two weeks (80 hours) of paid leave based on the eligibility of their regular rate of pay or, in the case of employees at Federal minimum wage, per day:
    - 100% for qualifying reason #1 or 2 below, up to 50% up to 30 days and 50% total;
    - 120% for qualifying reason #3 below, up to 300% daily and 60% total;
  • Up to 12 weeks of paid leave for a family and medical leave paid under the Family and Medical Leave Act (FMLA) for qualifying reason #5 below, up to $2000 daily and $12,000 total.

  A full-time employee is eligible for leave for the number of hours that the employee is normally scheduled to work over that period.

- **ELIGIBLE EMPLOYEES**

  In general, employees of private sector employers with fewer than 500 employees, and certain public sector employers, are eligible for two weeks of partially paid sick leave or paid leave for COVID-19 related reasons (see below). Employers who have been employed for at least 30 days prior to the leave request may be eligible for up to an additional 8 weeks of partially paid expanded family and medical leave for reasons #3 below.

- **QUALIFYING REASONS FOR LEAVE RELATED TO COVID-19**

  An employee is entitled to take leave related to COVID-19 if the employee is unable to work, including unable to telework, because:

  1. Is subject to a Federal, State, or local quarantine or isolation orders related to COVID-19;
  2. Has been advised by a health care provider to self-quarantine related to COVID-19;
  3. Is experiencing COVID-19 symptoms and is seeking a medical diagnosis;
  4. Is caring for an individual eligible under clause (1) or (2) described in (2);
  5. Is caring for his or her child whose school or place of care is closed (or child care provider is unavailable) due to COVID-19-related reasons;
  6. Is experiencing any other substantially similar conditions specified by the U.S. Department of Health and Human Services.

- **ENFORCEMENT**

  The U.S. Department of Labor’s Wage and Hour Division (WHD) has the authority to investigate and enforce compliance with the FFCRA. Employers may not fire, discharge, discipline, or otherwise discriminate against any employees who take leave under the FFCRA, files a complaint, or institute or participate in a proceeding under or related to the Act. Employers in violation of the provisions of the FFCRA will be subject to penalties and enforcement by WHD.

AANA
ARTHROSCOPY ASSOCIATION OF NORTH AMERICA
Medicare Advanced Payments

- Eligible for prepayment of amount equal to 100% of the Medicare payment amount for a 3-month period
- Re-payment due after 120 days with full payment due after 210 days
- Recoupment process is automatic = every claim submitted after 120 days offsets total balance due
- Determination/Checks issued within 7 days of application/request

Virtual Health Care Options

- Telemedicine
- Virtual Check in
- E-visit
- Telephone consultation
Telemedicine After COVID-19

- Under direction of President Trump, CMS is expanding this benefit on emergency basis under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act.

- Pay for office, hospital, and other visits furnished via telehealth across the country and including visits originating in patient’s places of residence starting March 6, 2020

- Waive HIPPA compliance for “good faith” practices during COVID outbreak (SKYPE and Facetime OK)
## Virtual Health Care

- **Telemedicine**
  - Synchronous service in real time with audio/video
  - Append Modifier -95 to base code (telehealth for office and outpatient services)
  - Location of service code 02 (telehealth)
  - 99201-05 = new patient =RVU 0.48-2.17 ($46.20-211.28)
  - 99211-15 = est. patient =RVU 0.18-2.11 ($23.37-148.43)

- **Virtual check-in**
  - G2010-12 = 0.18 RVU ($12.28)

- **E-visit (e-mail)**
  - 99421-23 = RVU 0.25-0.8 ($15.53-50.20)
  - Time based 5-10 min, 10-20, >20
  - ”global 7 days”, cannot initiate or proceed another billed E&M service

- **Telephone**
  - 99441-43 = RVU 0.25-0.80 ($13.27-$50.20)
  - Medicare does not reimburse
Established patient contacts office with increasing left knee pain and concerns over scheduling an office visit due to COVID-19 pandemic. A telemedicine appointment is scheduled at patients request. Using real-time audio and video, a detailed history and ROS are obtained from the patient and minimal physical examination elements documented. A diagnosis of osteoarthritis of the knee is documented and recommendations for 800mg IBU BID and therapeutic ice application PRN. After discussion of the plan, it is determined that no office follow up is recommended at this time (MDM). Total time spent during the (MDM & F2F) encounter is 30 minutes.

99213-95 ($76.20)
Established patient contacts office via patient portal email for increased symptoms of knee pain related to diagnosis of moderate knee osteoarthritis. Over a period of 7 days, 3 emailed communications are sent to the patient recommending conservative treatments of OTC NSAID and therapeutic icing. The emails are documented and retained in the patient’s electronic health record. Total time period spent in medical decision making and response is 23 minutes.

99423 ($50.23)
https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes
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