



Coronavirus Updates for  
Virtua Health Affiliated Practices

Webinar #11

*Updated 4/28/2020*



# Agenda & Panelists

- Introductions
- Latest Numbers
- Are We Peaking?
- High Risk Patient Outreach Update
- Telehealth Billing
- Follow up of COVID + Patients Discharged from Virtua ED and Hospitals
- News You Need to Know
- Q & A

## Panelists:

Andrew Cohen, MD  
Tarun Kapoor, MD  
Elliott Wilson  
Erin Merendino  
Gina Pimentel, MSW/LSW

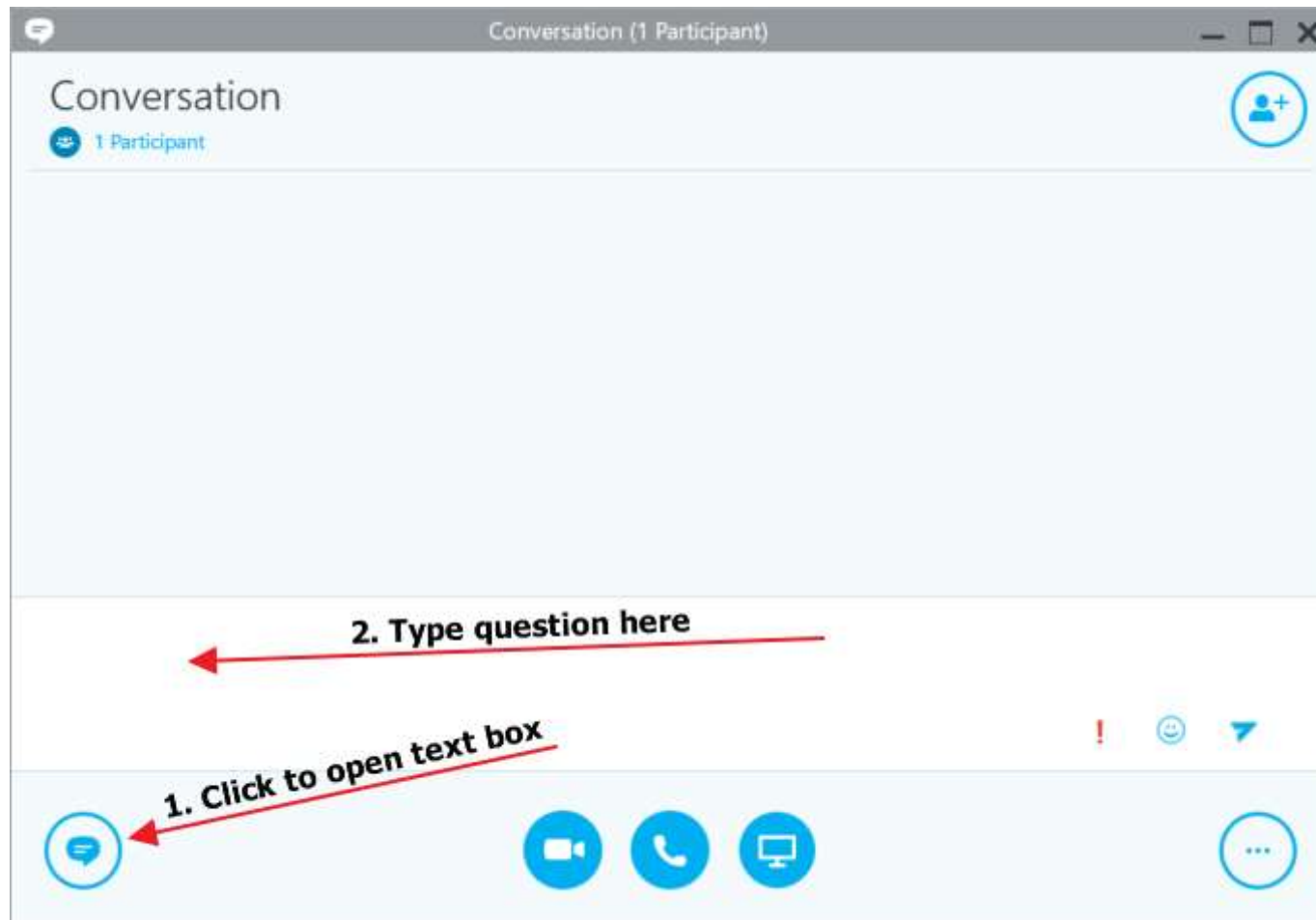
Medical Director VPP, LHN  
President, VPP  
Director, Digital Health  
Director, Coding  
Manager, Social Work

## Leadership Support on the Call:

Donna Antenucci, RN  
Rachael Perritt, Pharm D  
Judy Low, RN  
Kevin McCrea  
Erica Schetter  
Carol Lynn Daly  
Fran Germano-Yucel

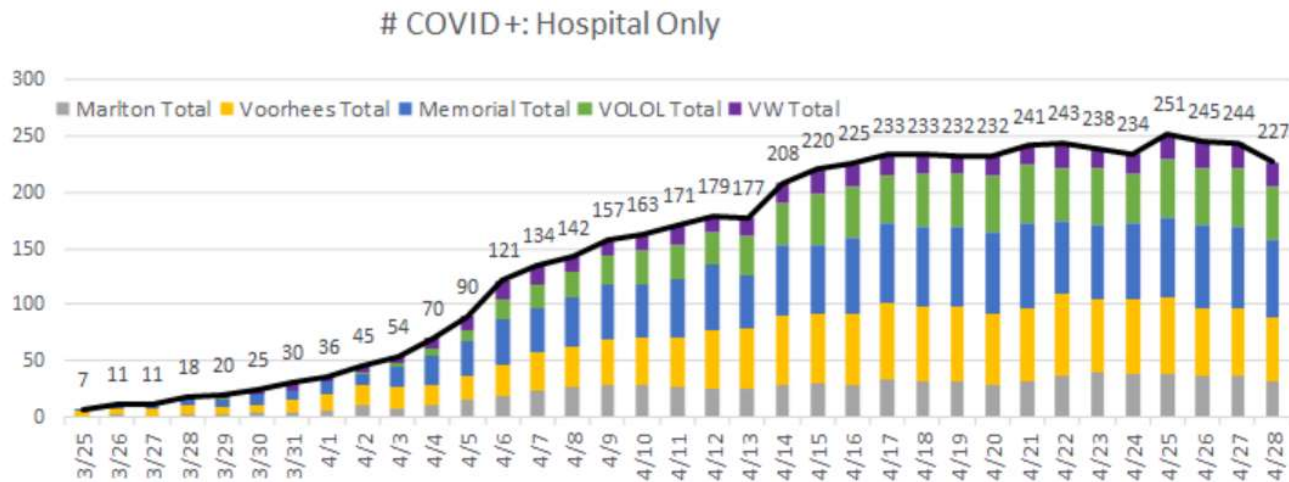
VP CIN, President LHN  
Mgr. Amb. Clinical Pharmacy  
Manager, Care Coordination  
Director, Analytics  
Director, Provider Relations  
Director, Comm. & Marketing  
Manager, Accounting

# Best Way to Ask a Question



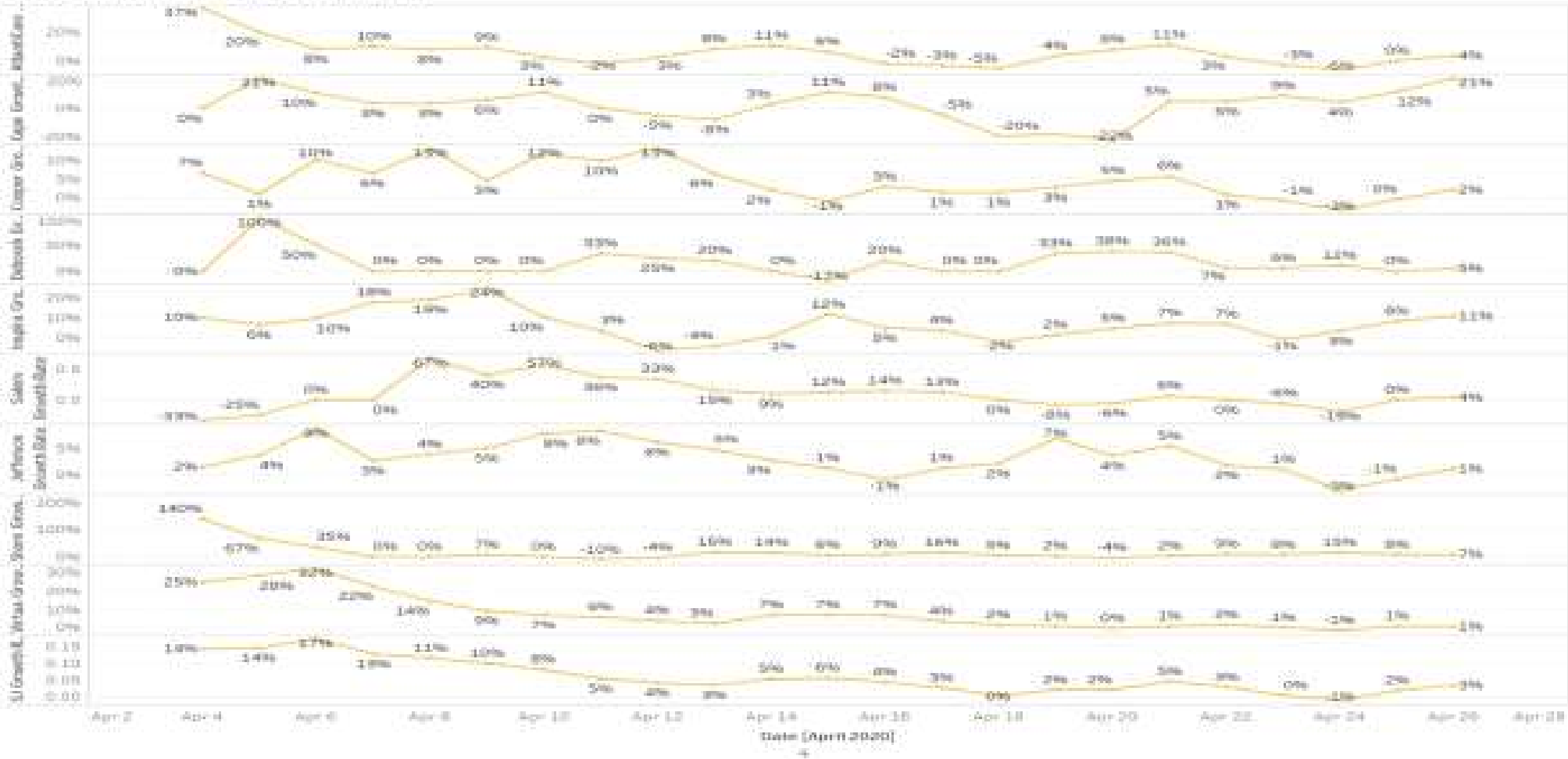
# Latest Covid Numbers

Date	Global	National	State	Regional	Area SNFs	Virtua
4/16 (Webinar 10)	2,078,277	639,664	71,030	3,430	335	225
4/28 (Webinar 11)	3,061,521	988,490	111,188	6,642	938	227
% increase since last meeting	47%	55%	57%	94%	180%	+ 2



# SJ Covid-19 Hospitalization Growth Rate Based on 3 days Moving Avg.

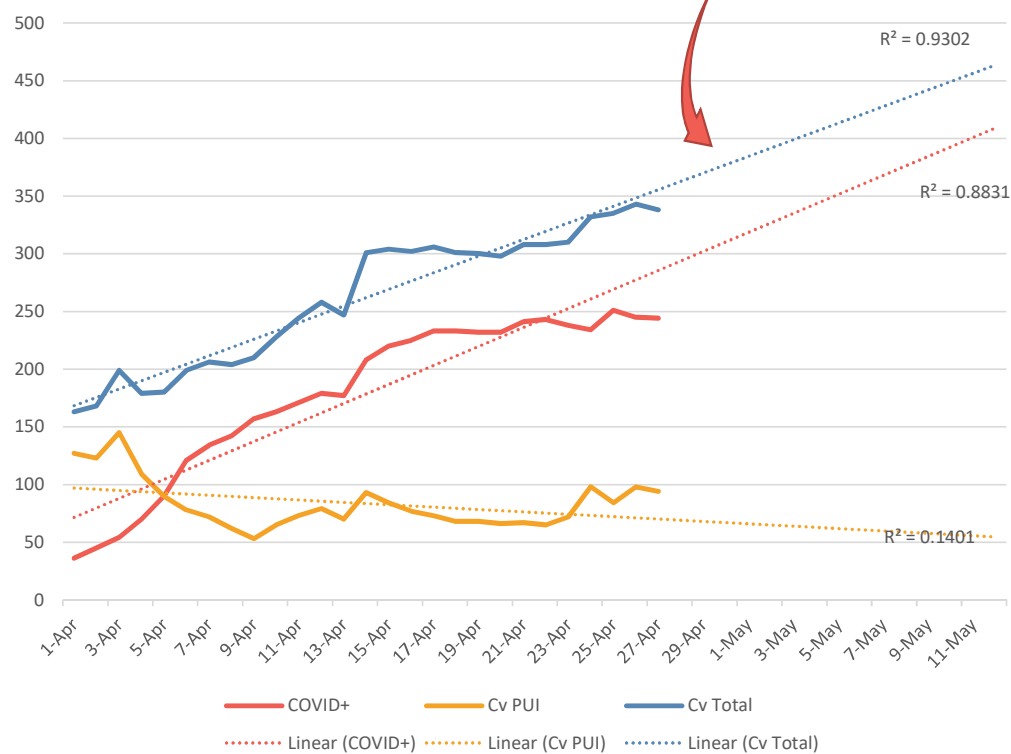
3 Days Moving AVG Growth Rate



# Virtua Internal Trends

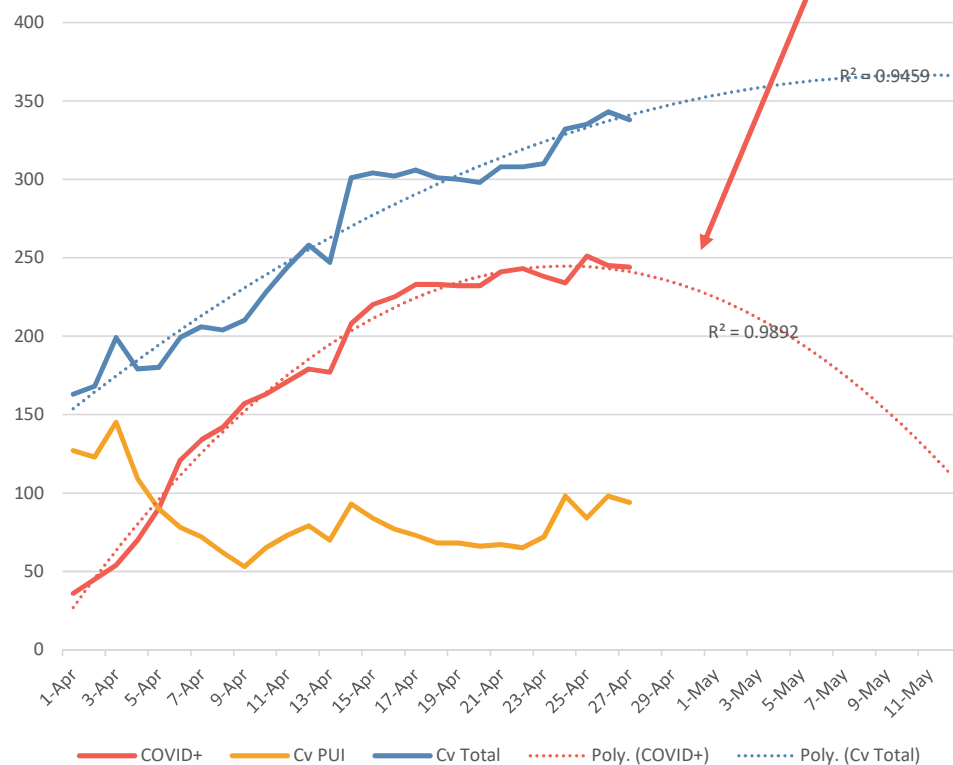
Linear trendlines assume endless growth

Volume with Linear Trendlines



Polynomial trendlines can detect a peak

Volumes with Polynomial Trendlines





# High Risk Patient Outreach Update

# Population and Tactics

**We will be managing 33.9% of high risk >65 yr old lives in South Jersey  
PLUS the 50-64 Employees/Dependents with Multiple CC**

<u>Care Coordination Initiatives for High Touch Cohort</u>									
<u>Major Initiatives to be completed by Care Coordinators</u>									
1	Ensuring 90 day med supply/home delivery								
2	Assessing for food insecurity								
3	Clinical pharmacy touch point (Med rec, fall risk, medication concerns)								
4	Make sure patients have scheduled appt upcoming with provider via telemedicine								
5	Polst forms completed								
6	Mental Health Screening - PHQ2/9, GAD 7								
7	Use COVID-19 screening questions and directives to assess current clinical status/risk								
<u>Major Initiatives to be completed by Virtua</u>									
8	Use marketing to help teach patients cures for social isolation (how to use Skype, FT, Facebook)								
9	Set up Jabber for all care coordinators								
10	Change Webinar Series from informational to Action-specific								
11	Continue to maintain excellent clinical quality - set up mobile mammogram, stool card process								



# Results

as of End of Day Monday 4/27

Status	Count	%
Touch Complete	2060	53.49%
Unreachable - No Answer	1161	30.15%
Unreachable - Wrong Number	380	9.87%
Patient Declined	129	3.35%
Not Assessed Yet		
Not Assessed Yet	91	2.36%
(blank)	7	0.18%
Facility Resident	12	0.31%
Unreachable - Complete	8	0.21%
Deceased	3	0.08%
Grand Total	3851	100.00%

PCP Follow up	Count	%
Appointment Scheduled	526	26.00%
Patient Refusal	501	24.77%
Visit Complete	996	49.23%
Grand Total	2023	100.00%

Food Insecurity Response	Count	%
No Food Issues	1926	94.41%
Food Issues	114	5.59%
Grand Total	2040	100.00%

Supportive Care Referral	Count	%
Not Wanted/Needed	1958	94.04%
Referred to Lynn/Shakera	124	5.96%
Grand Total	2082	100.00%

Clinical Pharmacy Followup	Count	%
No	1959	97.37%
Yes	53	2.63%
Grand Total	2012	100.00%



## Telehealth Billing

# Telehealth Billing Key Concepts

- Make Sure to **Document Consent**
  - Include your review of the benefits, risks and alternatives to telemedicine with the patient
  - Include that your solution is HIPAA compliant or otherwise taking advantage of the waivers from the federal government
- Make Sure to **Document Modality** of the Encounter (Phone, Video, etc)
  - Different modalities will require different Place of Service (POS) codes and/or modifiers attached to the billing code
  - Medicare – POS 11 (Office Location) + 95 Modifier
  - Commercial – Dependent on Payer
    - Some using – POS 2 without a modifier
    - Others using POS 11 with GT or GQ modifier
    - Recommending reaching out directly to payers for specific guidance
- **Time Spent vs. Medical Decision Making (MDM)**
  - Many telemedicine encounters can be either MDM or time based
  - For time based at least 50% must be consultative and/or coordinating care
- **New Patient Encounters**
  - Requires an exam
  - Will likely only be able to get to a 99202 due to limited exam
  - Depending on complexity and time spent, could establish patient at a higher level

## Telehealth Waivers Still In Effect

- CMS waivers for geographic and originating site restrictions (Established patients only)
- HIPAA waivers for non-compliant systems like Google Duo/Face Time/Doximity

# Helpful Telehealth Billing Links

- NJ Medicare Carrier
  - <https://www.novitas-solutions.com/webcenter/portal/MedicareJL/pagebyid?contentId=00224506>
- Aetna
  - [https://www.aetna.com/health-care-professionals/provider-education-manuals/covid-faq.html#acc\\_link\\_content\\_section\\_responsivegrid\\_copy\\_responsivegrid\\_accordion\\_9](https://www.aetna.com/health-care-professionals/provider-education-manuals/covid-faq.html#acc_link_content_section_responsivegrid_copy_responsivegrid_accordion_9)
- Horizon
  - <https://www.horizonblue.com/coronavirus-2019>
- UHC/Oxford
  - <https://www.uhcprovider.com/en/resource-library/news/Novel-Coronavirus-COVID-19.html>
- Cigna
  - <https://www.cigna.com/coronavirus/>

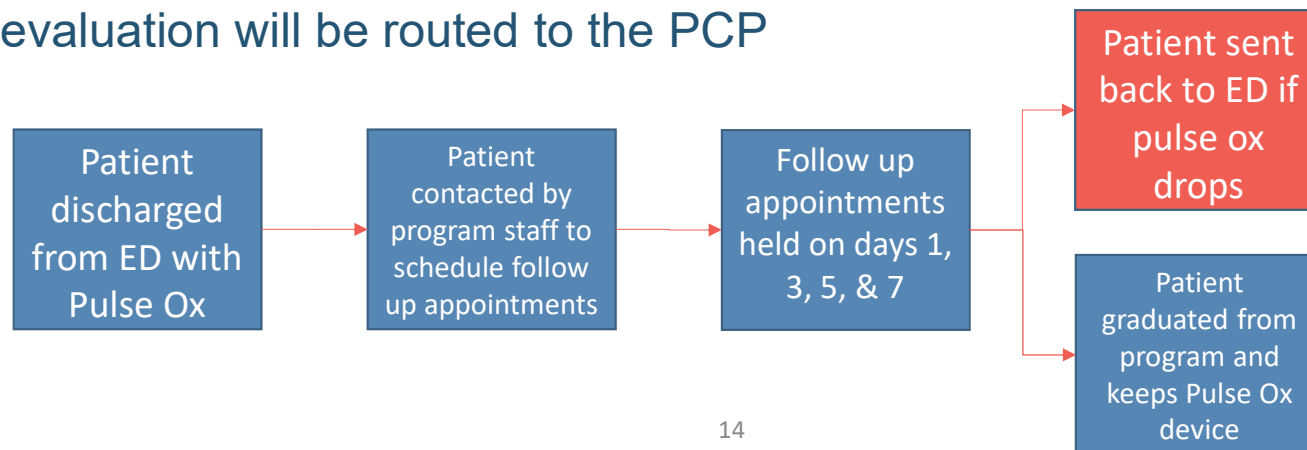


# Follow up of COVID + Patients Discharged from Virtua ED and Hospitals

# ED Discharge Respiratory Monitoring Program

Program begins  
Monday, May 4

- For discharges with mild-to-moderate COVID-19 symptoms
- Patients will be given pulse oximeters to monitor silent hypoxia
- Follow up appointments will be scheduled with a dedicated team of providers to review and monitor oxygenation levels
- Patients that decompensate will be referred back to the ED
- Program enrollment information will be included in the CCDA
- Each evaluation will be routed to the PCP



# Inpatient Discharge of Virtua Covid Positive Patients

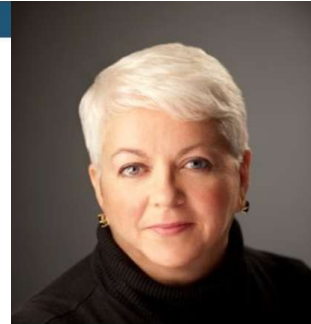
Program start  
date TBD

- *For a portion of discharges admitted with COVID-19*
- Patients will be given kit with full Remote Patient Monitoring capabilities
- Follow up appointments will be scheduled with a dedicated team of nurses and clinicians to review and monitor progress
- Patients that are decompensating will be evaluated as needed
- Goal is
  - 35 Remote Monitoring “outreaches” with nursing support
  - 5 scheduled “Extensivist” clinician follow ups
  - Discharge back to the PCP on day 28



# News You Need to Know

... From CarolLynn Daly




- New Testing Site opens tomorrow
  - Expansion of upon Virtua's testing center collaboration with Cooper.
  - Starting tomorrow (April 29), Virtua is relocating the Camden City testing site from Cooper's Poynt, 801 Delaware Avenue, to 2600 Mount Ephraim Avenue
  - Cooper's Poynt will remain open and staffed by Cooper clinicians.
  - Both sites agree to test each other's patients
  - Both drive-thru sites open to Camden county residents, by appointment, who have symptoms and meet other criteria, and who have received a referral for testing from a medical provider
- Plasma Donation links in today's Clinician Update
- Share Your Selfie Video – tips in today's Clinician Update
- Survey – Thank you! Great response. Results being tabulated and will be shared





# Questions and Answers


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