

The Business Impact Of COVID19 On Pediatric Practices

Webinar #17



Panelists Include:
Tom Finnerty
Paulie Vanchiere, MBA
Chip Hart

Vax Wars
Turning the Tide on Vaccine Hesitancy

www.PediatricSupport.com



What We Are Not Going To Talk About

1. COVID19 Testing Options
2. Amount of time providers/staff should self-isolate
3. Treatments for people affected
4. Predict how long this will last
5. Issues that are geographic-specific
6. Detailed Human Resource Issues
7. Nitty Gritty Details of PPP Loans
8. Presidential Debates

www.PediatricSupport.com



Agenda

1. Thank You
2. Data Report
3. News Roundup
4. Guests
 - Tom Finnerty & Liz Hogan from Kids Health First
 - Brad Weselman- The Children's Care Network
 - Laura Davis & Tjardus Greidanus
5. Homework Assignments

**When you can't control
what's happening,
challenge yourself to
control the way you
respond to what's
happening.
That's where your power is.**

13 Inspiring Traits of Exceptional Leaders

5

1. They trust you to do the job you've been hired to do.
2. They seek your advice and input.
3. They find opportunities to let you shine.
4. They recognize your contributions.
5. They have your back during tough times.
6. They are master storytellers.
7. They challenge you to do bigger and better things.
8. They express appreciation.
9. They are responsive.
10. They know when to apologize.
11. They give credit where credit is due.
12. They treat others with dignity and respect.
13. They care.

Glenn Leibowitz



What Have You Done Since Last Week?

6

Forum.PediatricSupport.com

3,270+ community members as of this morning...

The screenshot shows the forum interface with a search bar and navigation options. The main content area is divided into several categories:

- Upcoming Events**: 7 / week. Includes a link to "Share/learn about upcoming events related to COVID19".
- Finance**: 10 / week. Includes a link to "No margin, no mission - In order to be a successful medical practice, it is imperative that it take the steps necessary to remain financially viable. Here we can share and receive valuable information to help practices measure and monitor their financial health." Sub-topics: Budgeting, SBA Loans, Taxes.
- Site Feedback**: 1 / week. Includes a link to "Discussion about this site, its organization, how it works, and how we can improve it."
- Humor**: 2 / week. Includes a link to "Sometimes we have to lighten the mood a bit. Feel free to share things to help bring a bit of a joy or a laugh to others (keep it clean)".
- Leadership**: 2 / week. Includes a link to "Adversity doesn't build character, it reveals it. It also reveals our vulnerabilities! Leadership is an essential ingredient for any organization. Receive or share advice based on resources to empower everyone to be effective leaders within their practice."

Recent topics listed include:

- Coronavirus stable for hours on surfaces (1 reply)
- Telemedicine Disclaimers (5 replies)
- How To Handle COVID19 Infectious Waste (0 replies)
- COVID19 Waste Management (0 replies)
- Carefirst - Covid19 (0 replies)
- Empire BCBS (NY) - Covid19 (0 replies)
- PCC's 2020-03 Pediatric Coding Web Lab (TELEMEDICINE CODING) (0 replies)
- Wellmark - Covid19 (0 replies)
- Humana - Covid19 (0 replies)

This screenshot shows a different view of the forum, focusing on a list of topics with their respective reply counts and last post times:

- Coronavirus stable for hours on surfaces (1 reply, 1h ago)
- Telemedicine Disclaimers (5 replies, 13h ago)
- How To Handle COVID19 Infectious Waste (0 replies, 16h ago)
- COVID19 Waste Management (0 replies, 16h ago)
- Carefirst - Covid19 (0 replies, 16h ago)
- Empire BCBS (NY) - Covid19 (0 replies, 16h ago)
- PCC's 2020-03 Pediatric Coding Web Lab (TELEMEDICINE CODING) (0 replies, 16h ago)
- Wellmark - Covid19 (0 replies, 16h ago)
- Humana - Covid19 (0 replies, 16h ago)

www.PediatricSupport.com



Latest Data From The Data Nerd...

7

Special Services, Procedures and Reports

● 99072

Additional supplies, materials, and clinical staff time over and above those usually included in an office visit or other non-facility service(s), when performed during a Public Health Emergency as defined by law, due to respiratory-transmitted infectious disease

Average Charge: ~\$20
Average Paid, When Paid: \$16.75

Who is paying?

Aetna, CIGNA, BCBS (OK, GA, NM, GA, AZ, MI, FL, NJ, SC, CA, NM, etc.)

TRICARE is paying!

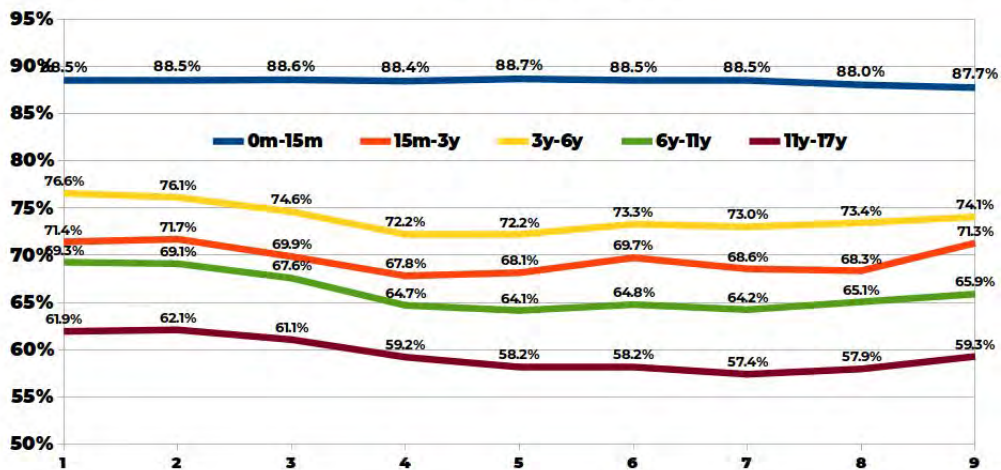
www.PediatricSupport.com



Latest Data From The Data Nerd...

8

Well Visit Coverage

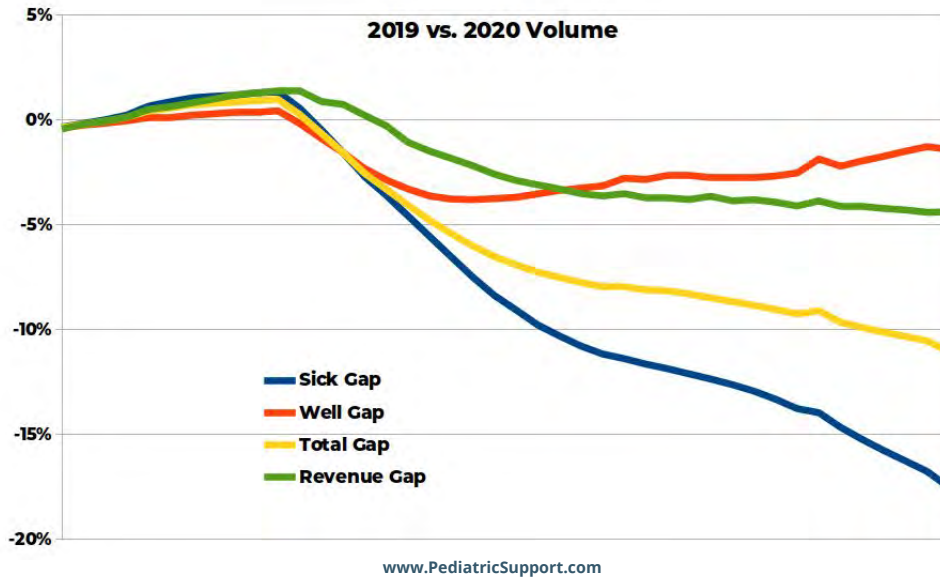


www.PediatricSupport.com



Latest Data From The Data Nerd...

9



10

In The News...

Certified Pediatric Office Executive

11



100% Online

Learn at your own pace...

1. Budgeting For Pediatric Practices
2. Corporate Structures
3. Effective Interviews To Find The Right People
4. Effectively Marketing For Your Pediatric Practice
5. Equipment Lease Versus Purchase
6. Financial Key Performance Indicators (KPI's) In Pediatrics
7. How To Determine The Value Of A Medical Practice
8. How To Easily and Accurately Set Your Prices Using RBRVS
9. Physician Compensation Models
10. Physician Employment Options
11. Practice Financing: Lines Of Credit & Loans
12. Process Improvement In Your Practice
13. RBRVS- What It Is And How It Affects Practices
14. Reading Financial Statements
15. Reducing No-Show's In Pediatric Practices
16. SWOT Analysis For Pediatric Practices
17. The Business Of Immunization
18. True Cost Of Billing Department And Outsourcing
19. Using PCMH Components To Increase Efficiency & Productivity
20. Value-Based Contracts For Pediatric Practices

www.PediatricSupport.com



12

Body of knowledge needed to run a successful Pediatric practice...100% online...learn at your own pace

- Physicians
- Administrators
- Office Managers
- Supervisors



OBTAIN CERTIFICATION



ANNUAL LEARNING



MAINTAIN CPOE



ECONOMY

Jobless claims jump, hitting highest level since mid-August

PUBLISHED THU, OCT 15 2020 8:30 AM EDT | UPDATED THU, OCT 15 2020 11:48 AM EDT

Jeff Cox
@JEFFCOX.7528
@JEFFCOXCNBCOM

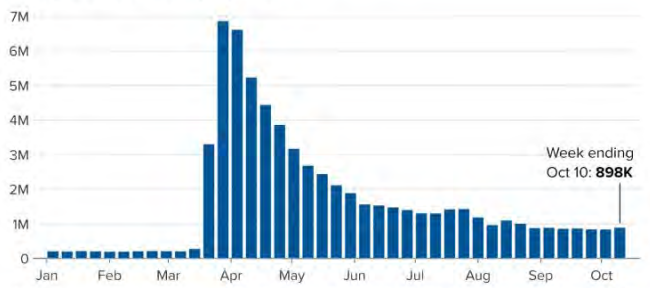
SHARE f t in e

KEY POINTS

- First-time filings for jobless claims last week hit 898,000, above the Wall Street estimate of 830,000.
- That was the highest level since Aug. 22 and a sign of the ongoing struggles in the labor market.
- Continuing claims again fell sharply, dropping to just over 10 million

Initial claims for unemployment insurance

Weekly in 2020, seasonally adjusted



SOURCE: Dept. of Labor. Data is seasonally adjusted and through Oct 10, 2020. The DOL began using a new seasonal adjustment methodology the week of August 29.

www.PediatricSupport.com



Continuing claims for unemployment insurance

Weekly since 1967, seasonally adjusted



SOURCE: Dept. of Labor. Data seasonally adjusted and as of Oct 3, 2020. Data based on week of unemployment, not week claim was filed. DOL began using new seasonal adjustment methodology week of 8/22.

www.PediatricSupport.com





MGMA Better Performers Research Identifies Business Strategies that Drive Medical Practice Excellence

MGMA's analysis of over 3,800 practices showed that top-performing organizations, which it calls Better Performers, have 20 percent more staff in the business office and 18 percent more nursing staffing.

Investments in staff contributed to higher operating costs for the practices – Better Performers reported nearly 9 percent greater medical total operating cost per full-time-equivalent (FTE) physician than their peers.

However, the practices also reported substantially greater total medical revenue per FTE physician, which translated to 19 percent higher median total physician compensation. The practices also had 20 percent more encounters, which was reflected in the practices having 24 percent higher work RVUs and 10 percent higher total RVU production, MGMA reported.



Key Findings

In this brief, researchers estimate how 20 percent unemployment—expected in the coming months—could affect health insurance coverage. Findings include:

- An **estimated 25-43 million people** could lose their employer-sponsored health insurance coverage.
- **More than half** of the newly jobless will obtain Medicaid coverage in states that expanded Medicaid under the Affordable Care Act (ACA), while **only about one-third** will receive Medicaid coverage in the 15 states that have not expanded the program.
- **Less than a quarter** of these workers and their dependents in expansion states will become uninsured, while about **40 percent in non-expansion states** will become uninsured.



How the COVID-19 Recession Could Affect Health Insurance Coverage
Robert Wood Johnson Foundation

Key Findings:

- An estimated 25-43 million people could lose their employer-sponsored health insurance coverage.
- More than half of the newly jobless will obtain Medicaid coverage in states that expanded Medicaid under the Affordable Care Act (ACA), while only about one-third will receive Medicaid coverage in the 15 states that have not expanded the program.
- Less than a quarter of these workers and their dependents in expansion states will become uninsured, while about 40 percent in non-expansion states will become uninsured.

Introduction: Many main workers had initial unemployment claims between March 15 and April 22.¹ Researchers forecast suggest the unemployment rate will likely be between 15 to 20 percent by June 1st. Economic forecasters at S&P expect the unemployment rate to reach 18 percent in May, which they note would be closer to the Depression-era peak of 23 percent in 1932 than the 10 percent peak following the Great Recession.² Data estimate by the Federal Reserve Bank of St. Louis has suggested the unemployment rate could reach as high as 18 percent.³ As workers lose their jobs, many will lose their employer-sponsored health insurance (ESI). Many of these workers will likely qualify for Medicaid coverage, particularly in states that expanded Medicaid eligibility under the Affordable Care Act (ACA).⁴ Others will purchase individual coverage in the health insurance marketplace, possibly with a subsidy to offset the premium cost (depending on their income). And some will be unable to secure their ESI coverage and will become uninsured.

In this brief, we estimate how health insurance coverage could change as millions of workers lose their jobs because of the spread in economic activity resulting from public health efforts to reduce the spread of the coronavirus. We present national and state-level estimates of coverage changes if unemployment rises from 10 percent (which is around 3.5 percent additional) to 20 percent, 25 percent, or 30 percent. We provide this range of unemployment

scenarios given the uncertainty around how high unemployment will climb, and because states have different pre-COVID-19 unemployment rates and will likely experience varying levels of economic disruption through the crisis. For each level of unemployment, we provide a base case scenario of coverage changes as well as a high (but also possible) scenario, derived from two different economic models. We present an overview of our methods and main findings in the main body of the paper. We provide further details on our modeling assumptions and discuss uncertainties surrounding the estimates in the appendix.

We find the following:

- Approximately 10 million people under age 65 had ESI coverage before March 2020. If the unemployment rate rises to 20 percent, we estimate that 25 million people will lose their ESI coverage in our base scenario and 43 million would lose ESI in our optimistic (and in a higher estimate of responsiveness to unemployment rate changes).
- Among those people living ESI in our base scenario, we estimate that 12 million (47 percent) will gain Medicaid coverage, 9 million (33 percent) will gain coverage through the marketplace or other private plans, and 7 million (29 percent) will become uninsured.
- Among those living ESI in our high scenario, we estimate that 21 million will gain Medicaid coverage, 10 million will gain coverage through the marketplace or other private plans, and 12 million will become uninsured.
- In non-expansion states, in our base scenario, among those living ESI coverage, about one-third (3 million) under a 20 percent unemployment rate are expected to gain Medicaid coverage, while about 40 percent (3.8 million) are expected to become uninsured. In the high scenario with 20 percent unemployment, we estimate that more than 6 million will become uninsured.
- In expansion states, in our base scenario, among those living ESI coverage, about one-third (3 million) under a 20 percent unemployment rate are expected to gain Medicaid coverage, while about 40 percent (3.8 million) are expected to become uninsured. In the high scenario with 20 percent unemployment, we estimate that more than 6 million will become uninsured.
- All unemployment scenarios indicate that millions of people under age 65 will lose ESI coverage throughout the country. States that have not expanded Medicaid under the ACA will see larger shares of those losing ESI coverage become uninsured. Federal and state policymakers such as temporary



How Many Americans Have Lost Jobs with Employer Health Coverage During the Pandemic?

Paul Frenkin
Executive Director, Commonwealth Fund
Executive Director, Commonwealth Fund

Stephen A. Woodbury
Professor and Executive Director, Strategic Health Services
Senior Lecturer, MIT, Department of Energy, Earth and Atmospheric Sciences

ABSTRACT

ISSUE: During the COVID-19 pandemic, most states issued lockdown orders that closed many workplaces. The ensuing job losses may have left millions of workers without employer health coverage.

GOAL: To estimate how many workers lost jobs that came with employer-sponsored insurance (ESI) — by industry, age, and gender — during the pandemic.

METHODS: Health insurance coverage data were used to generate the proportion of workers with ESI by various characteristics. Data on unemployment benefit recipients were used to generate the proportion of workers who lost jobs because of the pandemic. We apply the proportion of workers with ESI to the number of workers who lost jobs to obtain an estimate of jobs with ESI coverage that were lost. We also determine the number of dependents of these workers who potentially lost coverage.

KEY FINDINGS AND CONCLUSION: We estimate that as many as 7.7 million workers lost jobs with ESI as of June 2020 because of the pandemic-induced recession. The ESI of these workers covered 6.9 million of their dependents, for a total of 14.6 million affected individuals. Only with time will we know how many job losses are ultimately permanent, resulting in loss of ESI for workers and their dependents.

TOPLINES

- By June 2020, as many as 7.7 million workers had lost jobs with employer-sponsored insurance because of the COVID-19 pandemic. These health plans covered 6.9 million dependents as well.

- Manufacturing workers were most affected by loss of jobs with employer health insurance.

ABSTRACT

ISSUE: During the COVID-19 pandemic, most states issued lockdown orders that closed many workplaces. The ensuing job losses may have left millions of workers without employer health coverage.

GOAL: To estimate how many workers lost jobs that came with employer-sponsored insurance (ESI) — by industry, age, and gender — during the pandemic.



www.PediatricSupport.com



Exhibit 1. Number of Unemployed Workers (in millions), January–June 2020

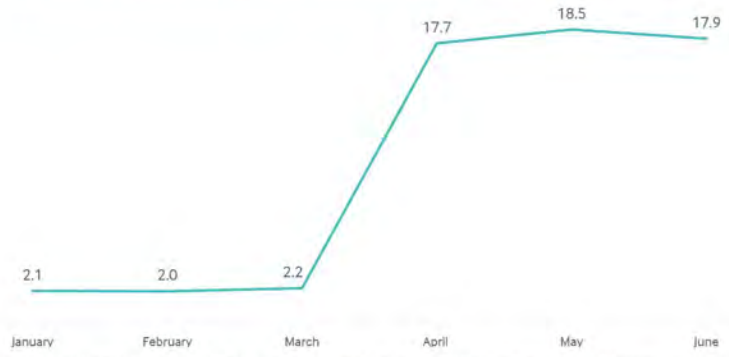


Exhibit 1 shows that, between February and June 2020, the number of unemployed individuals increased by 15.9 million (from 2.0 million to 17.9 million). This is a reasonable estimate of the job loss resulting from the pandemic, and it represents 10 percent of pre-pandemic employment (Exhibit 2).⁶

We estimate that, of these newly unemployed workers, **7.7 million lost jobs** with ESI, and these job losers had **6.9 million dependents** who were covered by ESI. As a result, 14.6 million individuals in total either lost a job with ESI or were the covered dependent of a job loser with ESI.

www.PediatricSupport.com



Exhibit 2. Summary of Findings

Number of workers employed prepandemic, February 2020	151.7 million
Number of unemployed workers, June 2020	17.9 million
Number of unemployed workers because of pandemic, June 2020	15.9 million
Unemployed workers as a percentage of prepandemic employment	10%
Number of workers who lost jobs with ESI, February–June 2020 average	7.7 million
Number of dependents covered by lost jobs with ESI, February–June 2020 average	6.9 million
Total affected by jobs lost with ESI (workers and dependents, February–June 2020 average)	14.6 million

Note: ESI = employer-sponsored health insurance.

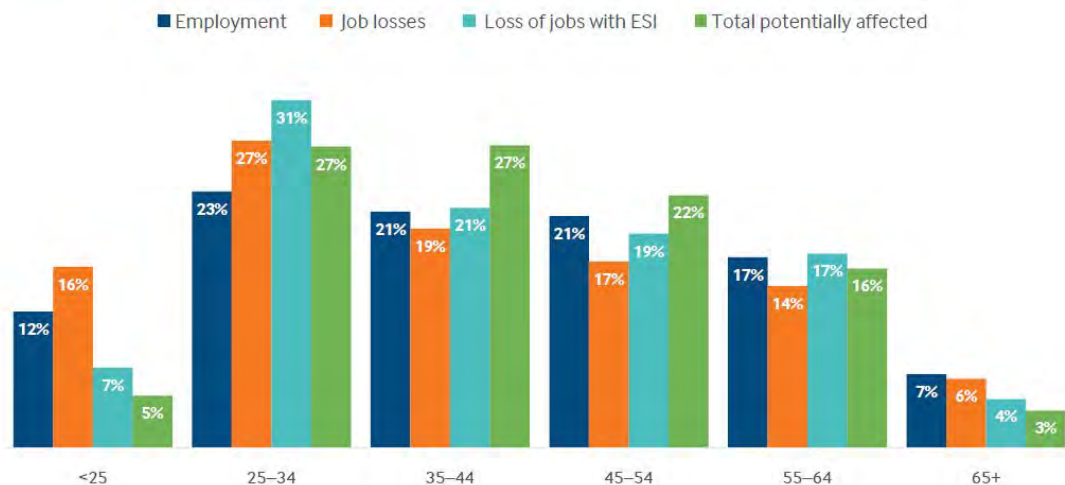
Data: Authors' analysis of state-level unemployment insurance claims, U.S. Department of Labor, Employment and Training Administration; and the 2019 Annual Social and Economic Supplement to the Current Population Survey.

www.PediatricSupport.com



Exhibit 5. Shares of Prepandemic Employment, June Unemployment, Loss of Jobs with ESI, and Total Potentially Affected, by Age Group

20



Note: ESI = employer-sponsored health insurance.

Data: Authors' analysis of state-level unemployment insurance claims, U.S. Department of Labor, Employment and Training Administration; and the 2019 Annual Social and Economic Supplement to the Current Population Survey.



ISSUE BRIEF
October 2020

How Many Americans Have Lost Jobs with Employer Health Coverage During the Pandemic?

Paul Frenkin

Director of Health Economics and Policy, Urban Institute

Stephen A. Woodbury

Associate Professor of Health Economics, Urban Institute

ABSTRACT

ISSUE: During the COVID-19 pandemic, most states issued lockdown orders that closed many workplaces. The ensuing job losses may have left millions of workers without employer health coverage.

GOAL: To estimate how many workers lost jobs that came with employer-sponsored insurance (ESI)—by industry, age, and gender—during the pandemic.

METHODS: Health insurance coverage data were used to generate the proportion of workers with ESI by various characteristics. Data on unemployment benefit recipients were used to generate the proportion of workers who lost jobs because of the pandemic. We apply the proportion of workers with ESI to the number of workers who lost jobs to obtain an estimate of jobs with ESI coverage that were lost. We also determine the number of dependents of these workers who potentially lost coverage.

KEY FINDINGS AND CONCLUSION: We estimate that as many as 7.7 million workers lost jobs with ESI as of June 2020 because of the pandemic-induced recession. The ESI of these workers covered 6.9 million of their dependents, for a total of 14.6 million affected individuals. Only with time will we know how many job losses are ultimately permanent, resulting in loss of ESI for workers and their dependents.

TOPLINES

By June 2020, as many as 7.7 million workers had lost jobs with employer-sponsored insurance because of the COVID-19 pandemic. These health plans covered 6.9 million dependents as well.

Manufacturing workers were most affected by loss of jobs with employer health insurance.

Uncertainty also surrounds estimates of the number of individuals who have lost any health insurance coverage as a result of lost ESI. As discussed earlier, an Urban Institute study estimated that roughly a third of those who lose ESI coverage through pandemic related job loss will become uninsured. We caution, however, about the difficulties in making such estimates.



www.PediatricSupport.com



We project that state and local government revenues will decline \$155 billion in 2020, \$167 billion in 2021, and \$145 billion in 2022—about 5.5 percent, 5.7 percent, and 4.7 percent, respectively—excluding the declines in fees to hospitals and higher education. Including those fees to hospitals and higher education would bring these totals to \$188 billion, \$189 billion, and \$167 billion.

www.PediatricSupport.com



Long-term unemployed are exhausting state benefits

By Tami Luhby, CNN
Updated 7:04 AM ET, Wed October 21, 2020



LIVE TV

(CNN) — As the coronavirus pandemic continues into its eighth month, a growing number of Americans are exhausting their state unemployment benefits and shifting to extended payments funded by the federal government.

But this additional cushion won't last much longer for many people. The 13-week benefits extension provided by Congress runs out at the end of the year. And an extended benefit program that triggers on when state unemployment rates soar is winding down in some states as their economies recover.

All this could leave millions of people without a financial lifeline at a time when jobs remain hard to land.

The number of long-term unemployed experienced its largest monthly increase on record in September. Some 2.4 million Americans -- or nearly one in five -- were out of work for at least 27 weeks, according to the federal jobs report.

That's up from 1.6 million people -- or roughly one in eight -- in this situation in August.

www.PediatricSupport.com

USA TODAY WHAT TO KNOW Retiring early? FEWER PATIENTS Dentists could fees MORTGAGE PAYMENTS 6M+ missed Sept.

News Sports Entertainment Life Money Tech Travel Opinion

MONEY

With stimulus stalled, shortfalls in tax revenues leave states facing layoffs, service cuts

Michael Braga USA TODAY
Published 7:02 a.m. ET Oct. 21, 2020 | Updated 10:39 a.m. ET Oct. 21, 2020

A new coronavirus stimulus deal is still in the works between Democrats and Republicans, but they can't agree on a conclusion, City.

PEDIATRIC MANAGEMENT INSTITUTE

October 2020

State Medicaid Programs Respond to Meet COVID-19 Challenges

Results from a 50-State Medicaid Budget Survey for State Fiscal Years 2020 and 2021

EXECUTIVE SUMMARY

Prepared by:

Kathleen Diford, Aimee Lashbrook, and Sarah Barth
Health Management Associates

and

Elizabeth Hintop, Robin Rudewitz, Madeline Guth, and Lina Stolyar
KFF



Executive Summary

The coronavirus pandemic has generated both a public health crisis and an economic crisis, with major implications for Medicaid, a countercyclical program. During economic downturns, more people enroll in Medicaid, increasing program spending at the same time state tax revenues may be falling. As demand increases and state revenues decline, states face difficult budget decisions to meet balanced budget requirements. To help both support Medicaid and provide broad fiscal relief, the [Families First Coronavirus Response Act \(FFCRA\)](#)¹ authorized a 6.2 percentage point increase in the federal match rate ("FMAP")² (retroactive to January 1, 2020) available if states meet [certain "maintenance of eligibility" \(MOE\) requirements](#).³ The fiscal relief is in place until the end of the quarter in which the Public Health Emergency (PHE) ends. The [current PHE](#) is in effect through January 21, 2021 which means the enhanced FMAP is slated to expire at the end of March 2021 unless the PHE is renewed.⁴

States ended state fiscal year (FY) 2020 and adopted budgets and policies for FY 2021, which began on July 1 for most states⁵, while faced with uncertainty about the pandemic, the economy, and the duration of the PHE. This report examines Medicaid policy trends with a focus on planned changes for FY 2021 based on data provided by state Medicaid directors as part of the 20th annual survey of Medicaid directors in all 50 states and the District of Columbia. Unlike previous years, the survey instrument was modified to primarily collect information about policy changes planned for FY 2021, especially policies related to responding to the pandemic. Overall, 43 states⁶ responded to the survey by mid-August 2020, although response rates for specific questions varied. Key findings suggest that most policy changes and issues identified for FY 2021 were related to responding to the COVID-19 PHE (Figure 1).

www.PediatricSupport.com



Most Medicaid policy changes planned for FY 2021 are focused on addressing COVID-19.

Eligibility

- Meeting MOE requirements
- Continuing emergency eligibility & enrollment policies

Provider Rates & Taxes

- Targeting certain providers & services with increased reimbursement rates

Delivery Systems

- Adjusting MCO contracts/rates
- Addressing SDOH

Long-Term Services & Supports

- Addressing direct care workforce concerns
- Continuing emergency LTSS policies

Benefits & Telehealth

- Adding or expanding telehealth coverage
- Continuing other emergency benefit changes

Prescription Drugs

- Adopting pharmacy program cost containment strategies



POLITICS

'More work needs to be done': Pelosi, Mnuchin set more coronavirus stimulus talks as time runs short

PUBLISHED WED, OCT 21 2020 4:18 PM EDT | UPDATED AN HOUR AGO

Jacob Pramak @JACOBPRAMAK

SHARE f t in e

KEY POINTS

- Nancy Pelosi and Steven Mnuchin spoke about coronavirus stimulus and moved closer to being able to write a bill, Pelosi's office said.
- The pair plans to talk again Thursday as they run out of time to reach a relief deal before the 2020 election.
- Pelosi signaled Wednesday that the sides may not strike an agreement until after the election.



Nancy Pelosi and Steven Mnuchin Reuters





www.PediatricSupport.com



KHN Morning Briefing

Summaries of health policy coverage from major news organizations

CVS and Walgreens To Distribute Vaccine to Nursing Homes

Two large national pharmacy chains, CVS and Walgreens, have agreed to distribute COVID vaccine to nursing homes at no cost. Meanwhile, CVS says it will hire 15,000 people, 10,000 of them pharmacy technicians.

The Hill: Trump Health Officials Announce Plan For Free COVID Vaccines In Nursing Homes

The Trump administration on Friday announced a partnership with two national pharmacy chains to distribute a potential coronavirus vaccine to residents of long term care facilities for free. The partnership with CVS and Walgreens will allow health officials to prioritize a vaccine when one becomes available, so it can be administered to the most vulnerable populations. (Weixel, 10/16)

FierceHealthcare: CVS, Walgreens Make Deal With Trump Admin To Quickly Distribute COVID-19 Vaccines To Nursing Homes

Retail pharmacy chains CVS Health and Walgreens reached a deal with the Trump administration to quickly provide and administer COVID-19 vaccines directly to nursing homes with no out-of-pocket costs. The agreement, announced Friday, focuses on the distribution of a COVID-19 vaccine to the highest-risk individuals ahead of a potential vaccine approval either this year or in early 2021. (King, 10/16)

In other news from CVS —

FierceHealthcare: CVS Pushing For Pharmacy Technicians To Be Able To Administer COVID-19 Vaccines

CVS Health is pushing for pharmacy technicians to be allowed to administer COVID-19 vaccines. The healthcare giant is hiring more than 10,000 full- and part-time pharmacy technicians in Q4 in anticipation of flu season, and urging for them to have an expanded scope of practice that would allow them to vaccinate patients for the novel coronavirus under supervision from an immunization-certified pharmacist. (Mlmenyer, 10/19)



<https://www.cms.gov/newsroom/press-releases/trump-administration-strengthens-covid-19-surveillance-new-reporting-and-testing-requirements>

“...CMS will impose a civil monetary penalty in the amount of \$1,000 a day for the first day, and \$500 for each subsequent day...”

<https://www.cdc.gov/coronavirus/2019-ncov/lab/reporting-lab-data.html>

“...These data must be reported daily, within 24 hours of test completion, to the appropriate local, state, territorial or tribal health department, *based on the individual's residence...*”

www.PediatricSupport.com



PEDIATRIC MANAGEMENT INSTITUTE
HELPING PEDIATRICIANS SUCCEED

PEDIATRIC PRACTICE MANAGEMENT CONFERENCE

January 26-30, 2022
Disney Yacht Club Resort, FL

<p>DISNEY SPECIALS</p> <ul style="list-style-type: none"> Nightly rate for attendees: \$285 (Dis applicable taxes) Complimentary transportation service from/to Orlando airport via the Disney Magical Express Complimentary Health Club Access Discounted Theme Park Tickets 	<p>NEW FOR 2022</p> <ul style="list-style-type: none"> One price for the entire two days! Three breakout sessions to dive deeper into topics important to you All-inclusive pricing includes all scheduled meals, breaks, drinks, and two cocktail parties 	<p>REGISTRATION FEE</p> <ul style="list-style-type: none"> Register before March 30, 2021: \$849 Register before October 31, 2021: \$899 Register after October 31, 2021: \$949 <p>Pre Conference Pricing</p> <ul style="list-style-type: none"> \$239 per session
--	--	--

- Now a virtual event
- January 21 Launch
- 20-25 topics being presented
- Self-paced over a month via PMI learning portal
- 2022 will be in Orlando (Jan 26-30)

www.PediatricSupport.com



Nothing Wrong With Being Over-Prepared

- Manage Your Cash -
- Manage Your Expenses -
- Defer Owner Bonuses/Deferred Comp Until End Of 2020 -

Worse case, the amount due to owners/partners end up being much larger at end of the year...

www.PediatricSupport.com



Budgeting

Goto Forum and search "Cash Flow"

Forum.PediatricSupport.com

Check Your Vaccine Invoice Due Dates!

www.PediatricSupport.com



Home Latest Top Items

COVID 19 Business Impact Webinar #7 - April 30th Register Here / Is This Forum Helpful? Want To Say Thanks? / PM's Recent White Paper / Watch Recent Webinar Now

Cash Flow Projection Spreadsheet

Finance

Paulie Mar 26

Many of us know how to plan out cash flow... I thought I'd help everyone get started with this basic spreadsheet... more details during our webinar this evening

[PMI_Cash_Flow_Planning.xlsx \(43.8 KB\)](#)

	A	B	C	D	E	F	G
1	"Back Of The Napkin" Cash Flow Calculator						
2	Today's Bank Account Balance \$ 25,000						
3	Outstanding Checks To Clear The Bank \$ 12,000						
4	Credit Card Balances \$ 7,000						
5	Est Available Cash \$ 15,000						
6							
7							
8							
9	Week Of	Estimated Weekly Deposits	Estimated Payroll Expenses	Vaccine Invoices Due	Rent Payments	All Other Office Expenses	Running Balance
10	3/29/2020	\$ 20,000	\$ 15,000	\$ 5,500	\$ 5,000	\$ 1,500	\$ 8,500
11	4/5/2020	\$ 20,000	\$ -	\$ 2,500	\$ -	\$ 1,500	\$ 24,500
12	4/12/2020	\$ 17,000	\$ 15,000	\$ 1,750	\$ -	\$ 1,500	\$ 24,750
13	4/19/2020	\$ 7,000	\$ -	\$ 1,750	\$ -	\$ 1,500	\$ 28,000
14	4/26/2020	\$ 7,000	\$ 13,000	\$ 1,500	\$ 5,000	\$ 1,500	\$ 12,500
15	5/3/2020	\$ 7,000	\$ -	\$ 2,000	\$ -	\$ 1,500	\$ 16,500
16	5/10/2020	\$ 5,000	\$ 15,000	\$ 2,000	\$ -	\$ 1,500	\$ 2,000
17	5/17/2020	\$ 5,000	\$ -	\$ 1,750	\$ -	\$ 1,500	\$ 4,750
18	5/24/2020	\$ 5,000	\$ 15,000	\$ 3,000	\$ -	\$ 1,500	\$ 18,250
19	5/31/2020	\$ 5,000	\$ -	\$ 1,200	\$ 5,000	\$ 1,500	\$ 114,450
20	6/7/2020	\$ 5,000	\$ 15,000	\$ 800	\$ -	\$ 1,500	\$ 213,850

www.PediatricSupport.com





Highlights As Of Today

- <\$50k Easy (One-page form)
- >\$50k Pending Clarification From SBA/Congress



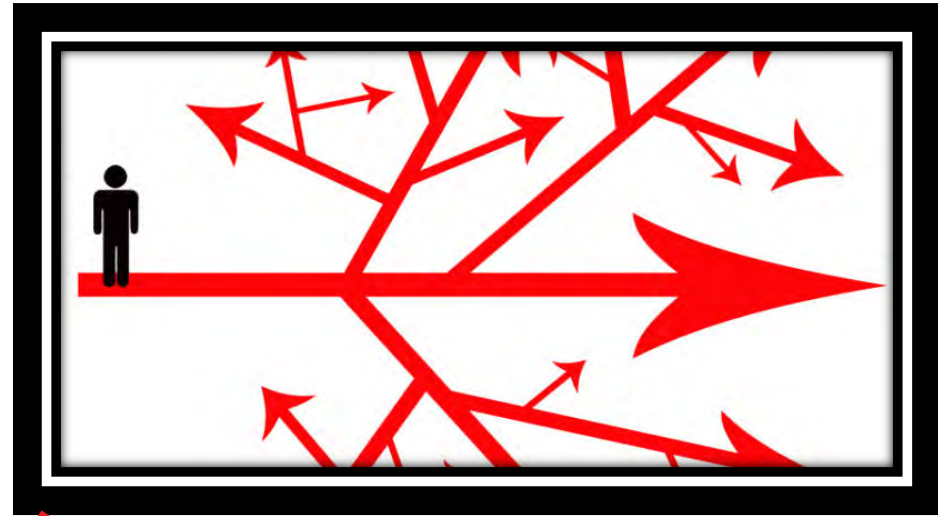
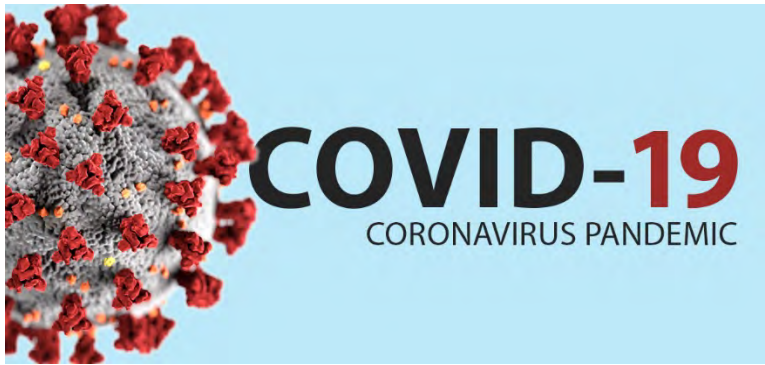
COVID-19 Support

October 2020

Brad Weselman, MD

Liz Hogan

Tom Finnerty



**Leadership and
guidance in a
time of
uncertainty**



Atlanta Pediatric Market

Highly Organized for >25 years

Tom Finnerty

- Children's Healthcare of Atlanta (Children's)
 - 22 Years, 3 hospitals
 - Historically highly supportive of private practice primary care
- The Children's Care Network (TCCN)
 - 5 years
 - 500+ community pediatricians, 900 specialists, 3 hospitals
 - CIN population health model
 - Wholly-owned subsidiary of CHOA
- Kids Health First IPA (KHF)
 - 24 years, clinical integration model
 - 210 community pediatricians, 38 practices, 60+ locations
 - Members of TCCN





Utilizing resources of 3 Key Players to help all practices survive

Children's Role

- Vetted all things clinical associated with Covid and communicated to community (CDC, DOH, AAP)
- PPP Guidance – engaged national experts to hold a webex to advise practices on how to be at front of line for consideration for funds (60% practices approved round 1)
- Data support for monitoring pandemic impact on practices & support recovery
- All services provided in accordance with applicable regulatory requirements (e.g., fraud and abuse, antitrust)

The Children's Care Network CIN Role

Tom Finnerty

- Data analytics tracking practice health
- Semi-weekly Practice Administrator Meetings covering all aspects of practice health & support
- Population health data utilized for practice specific call lists to identify care gaps and proactive outreach
- All services provided in accordance with applicable regulatory requirements (e.g., fraud and abuse, antitrust)

Kids Health First IPA Role

- Attorney & accountants placed on retainer to answer legal and compliance questions
- Utilized IPA's PEO relationship to provide general guidance and answer high-level questions regarding HR-related federal and state law compliance questions
- Held practice administrator meetings with broader guidance and IPA-sponsored programs for its members

TCCN & KHF

- Staff monitored payor and government responses that would impact their respective member practices
- Each party developed their own intranet page with all consolidated pandemic-related information and resources for the practices (PPP, Telemedicine, etc...)
- Jointly developed Practice Recovery Toolkit and supporting strategy around targeted cohorts

Telemedicine

- **AAP Urges insurers to extent telehealth payments during COVID 19**
 - [Guidance on the Necessary Use of Telehealth During the COVID-19 Pandemic](#): Guidance on the use of telehealth to provide appropriate elements of health supervision visits or acute and chronic care visits by pediatricians, pediatric medical subspecialists, and pediatric surgical specialists. (Updated 8/26/2020)
- **The Board of Directors of the National Committee for Quality Assurance (NCQA)** approved – 40 HEDIS metrics with Telehealth Accommodations

TCCN posted information

- [COVID-19 Telehealth reimbursement overview \(excl. contracted rates\)](#)
- [Telehealth payor coding grid](#)
- [Summary of updates](#)
- [Medicaid telemedicine guidelines](#)
- [TCCN telemedicine playbook](#)
- [MAGMutual telemedicine guidance](#):
- Vendor lists
- [Telehealth Town Hall Webinar](#)



Subspecialty Access

- Information grid updated with practice information
- Highlights:
 - Change in Hours
 - Referral Information
 - In Office and Telemedicine Appointments
- Updated frequently with new info
 - Updates highlighted in **yellow** in daily round-up
- Communication to PCPs about appointment availability

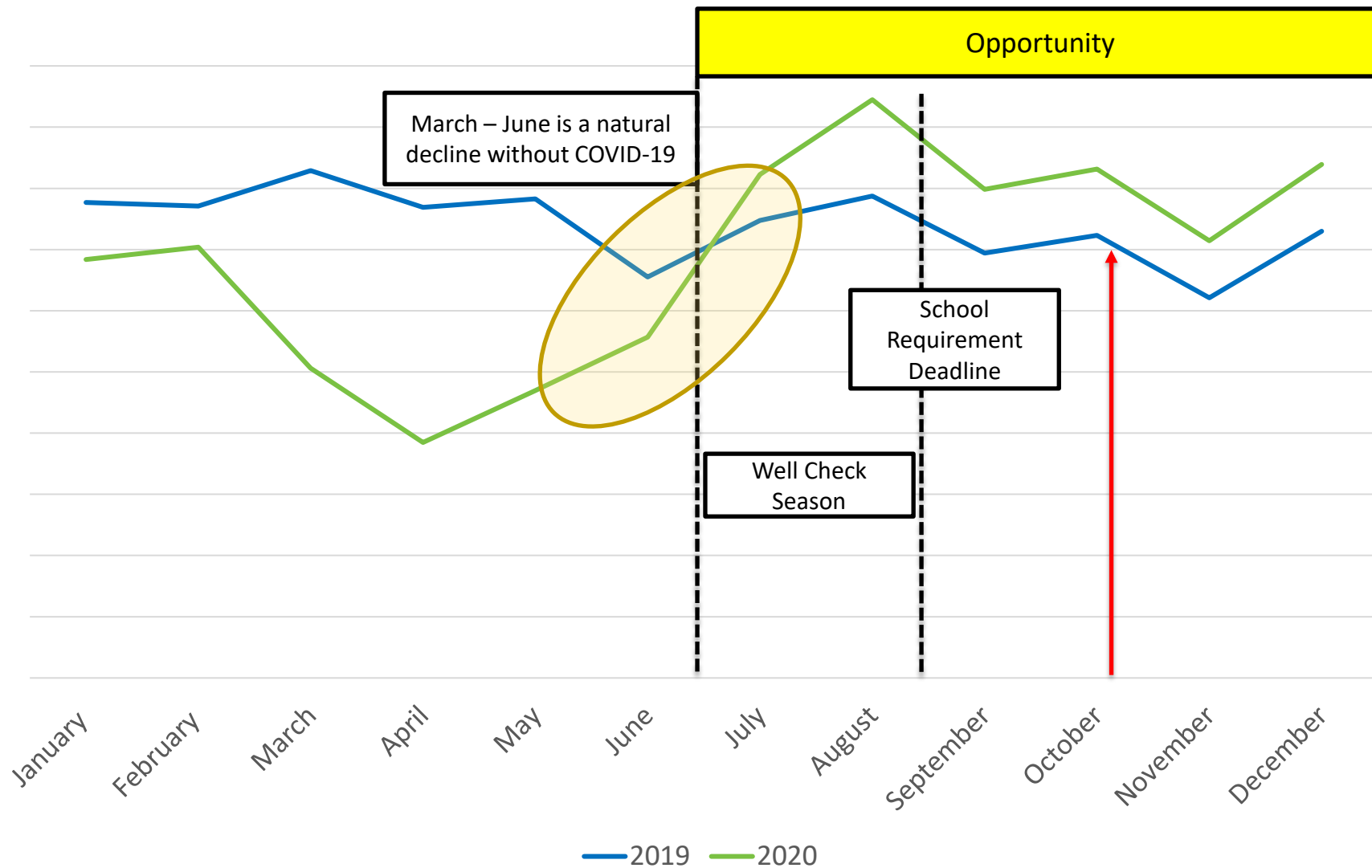
Behavioral Health Referral Resources



- 8 Metro County Lists
(Cherokee, Cobb, Clayton, Dekalb, Forsyth, Fulton, Gwinnett, Henry)
- Type of provider and specialty
- Insurance coverage listed
- Telehealth Services noted

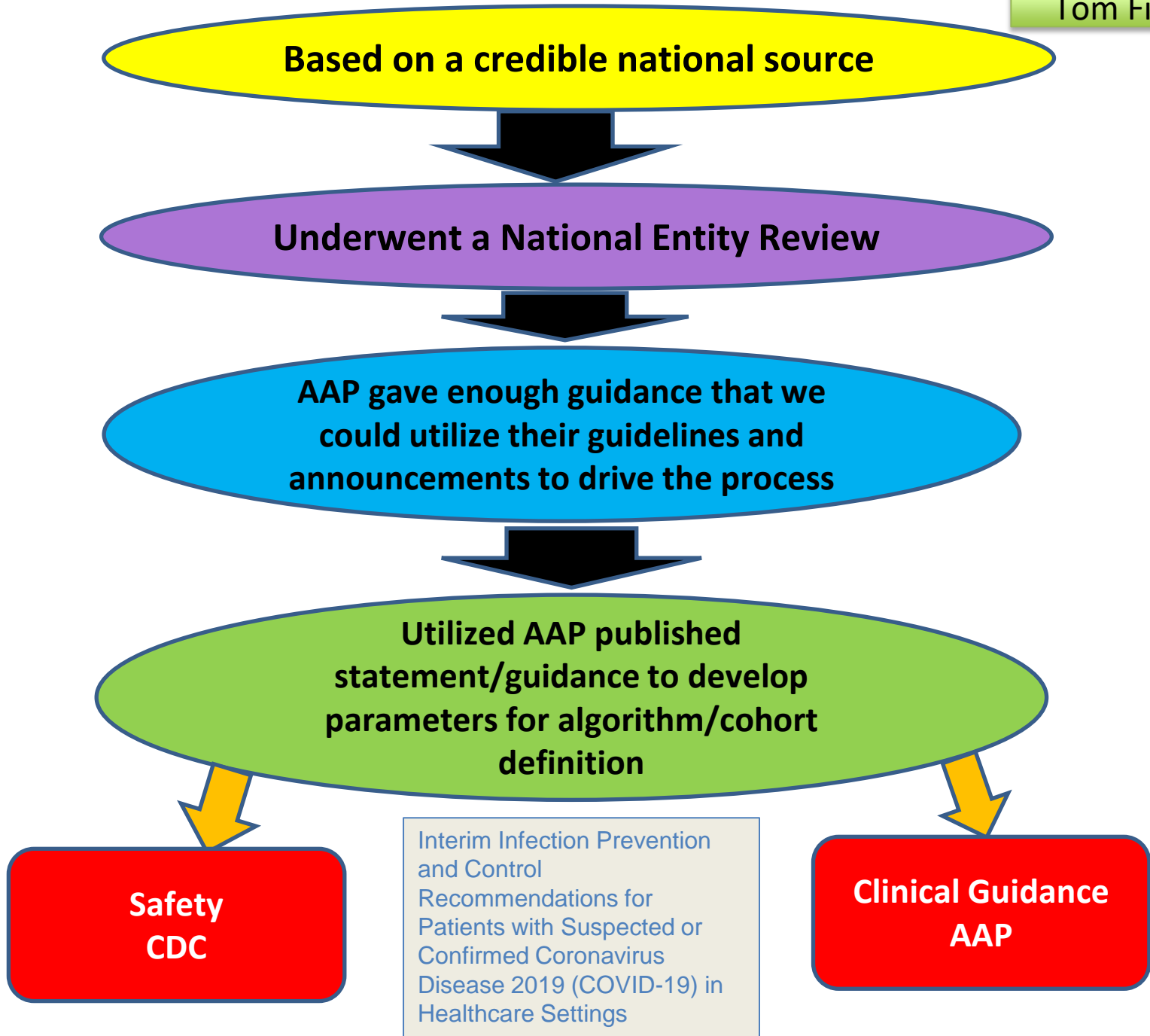


Encounter Counts 2019 vs. Estimates for 2020



Practice recovery keys

- 110 to 115% of historical volume to make whole
 - Retool practices to handle more patients/day
 - Longer time between patients to clean rooms
 - Combination of office and Telemedicine visits
 - Change patient office flow
- Restore patient confidence in practice setting
 - Overcome fears (eight week behavioral change rule)
 - Sound clinical reasoning / rationale
 - Safety messaging
 - Patient messaging regarding clinical reasons
- Execute well



TCCN Protocols and Safety

4 Key Areas of Focus

1. Personal Barriers (PPE)
 2. Enhanced Office Cleanliness
 3. Social Distancing
 4. Staff Exposure
- [TCCN: COVID-19 FAQs for outpatient practices](#)
 - [TCCN: Guidelines for immediate COVID-19 office containment steps](#)
 - [9 recommendations to keep your patients and staff safe](#)

✧ Added a disclaimer acknowledging the evolving environment

Addressing Parental Concerns and alignment with other resources

Brad Weselman

- Parent Communications to help Overcoming Psychological Barrier
- Links to AAP's #CallYourPediatrician Campaign
- CHOA Pediatrician Campaign
- Social Media Support
- Links to Summer Camp Guidance
- Return to School Pathways and District Updates

Sample Messaging

- Front desk messaging, Voicemail messaging:
 - “During this COVID19 pandemic, XYZ Pediatrics wants to ensure that your family is safe when you come to see us. We want you to know that we have taken steps to keep you and your child safe including...”
- Website, Social Media, Blogs:
 - “During this COVID pandemic, XYZ Pediatrics, knows that families are concerned about their safety. We can assure you that we share that concern. Our practice has taken the follow steps, following the American Academy of Pediatrics and the CDC guidelines to **enhance our cleaning practices; promote universal protection including masks and gloves; minimize your time in our public spaces; and protect our staff**. These are steps we have implemented in our practice to address these areas such as...”

Workflow changes and Best practice tips

Brad Weselman

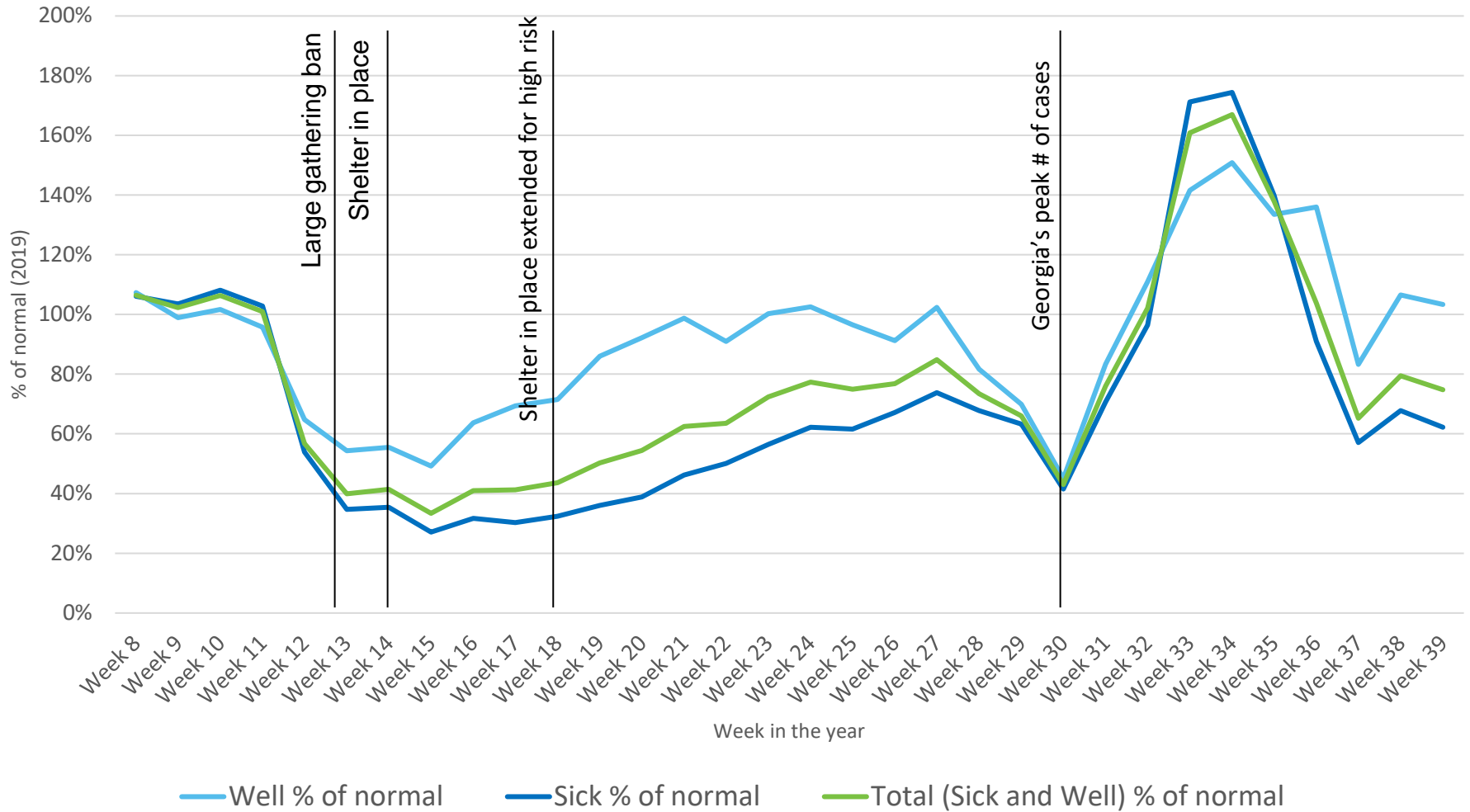
- Office check in - Waiting rooms a thing of the past?
- Payments handled virtually when possible
- Specific rooms dedicated for sick visits and well visits.
 - Back/side entrance used for ill patients if at all possible
- Scheduling changes
 - Adding additional morning and evening hours
 - to accommodate for longer visits, additional cleaning time and to see at 110-115% capacity
 - Adding Summer Saturday Well Visits
 - Incorporating telemedicine visits and in-person office visits into daily office flow

What is our data telling us?

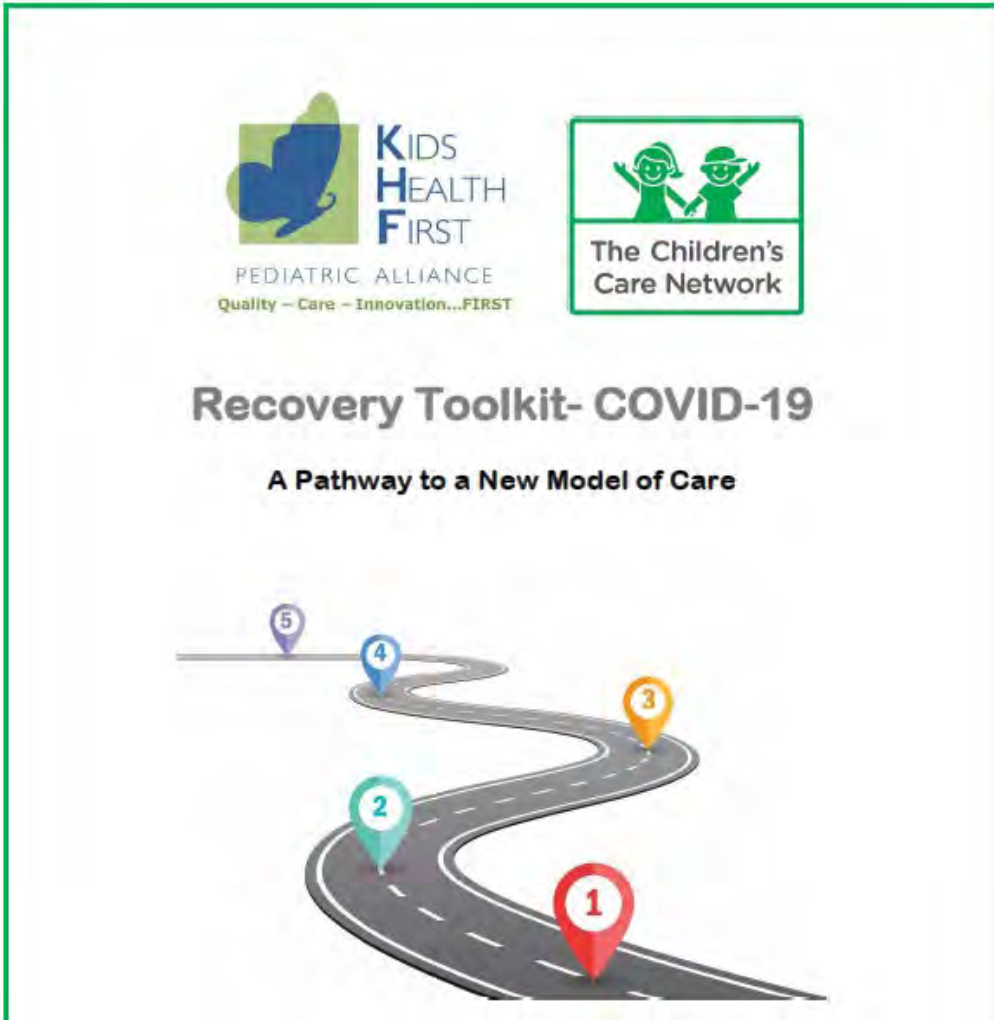


- Comparing TCCN vs. National
- Reviewing practice encounter rates to analyze volume and trends
- Compare well vs. sick visits
- Compare 2020 vs. historical
- Vaccine compliance, need for recall
- Compliance for well child visits
- Monitoring of quality metrics

2020 Encounters compared to 2019



Recovery Toolkit



Recovery Toolkit – COVID-19: A Pathway To A New Model of Care



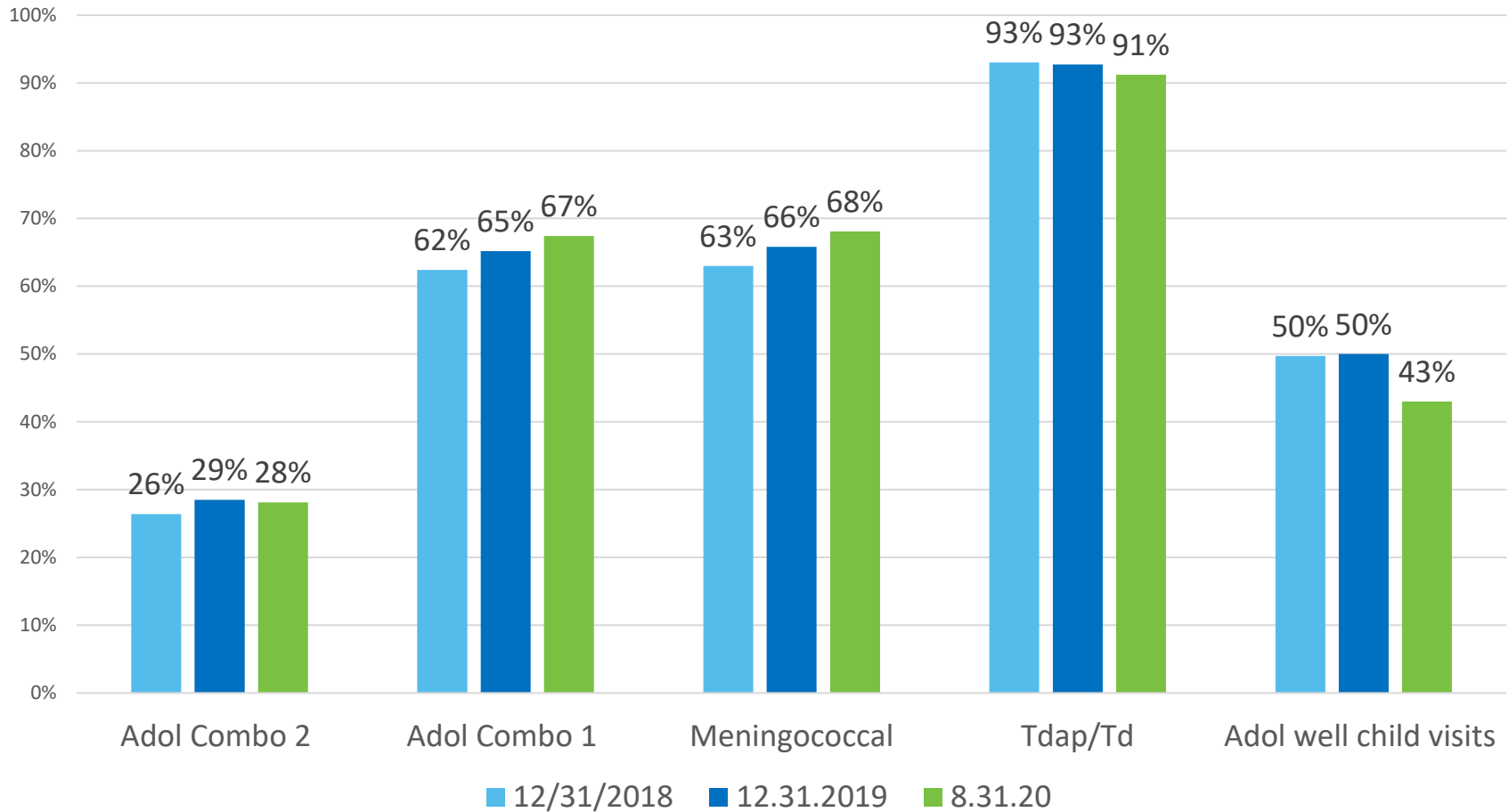
<p>Patient Population Management Focus</p>	<p>Continue in-office well-child visits for 0-24 months</p>	<p><u>Well-Child Focus:</u></p> <ul style="list-style-type: none"> 30 months, 4-5 years old, 11 years old, 16 years old <p><u>High Risk Patients:</u></p> <ul style="list-style-type: none"> ADHD, Asthma, Depression, Anxiety 	<ul style="list-style-type: none"> All patients with overdue well-child visits & missed specialty care visits Recall no-shows during COVID-19 period Sport Physicals HPV High Risk for Flu Vaccine 	<p>Preventative Visits: Chronic Care Patients Patient Incentivized</p> <ul style="list-style-type: none"> Well child visits 	<p>Focus on relationships and re-establishing the medical home for patients that need more frequent checks than annual visits</p>
<p>Actionable Recall Lists</p>	<ul style="list-style-type: none"> Children age 12 or 15 months who are overdue for well-child visit Children age 24 months due for well-child visit 	<ul style="list-style-type: none"> 30 month well visit 4-5 years old well visit 11 years old well visit 16 years old well visit Asthmatics ADHD Depression, Anxiety 	<ul style="list-style-type: none"> HPV- 2nd or 3rd dose not received Past due well-child visits <ul style="list-style-type: none"> 3-6 year olds Adolescents Asthmatics for flu vaccine (July – September) 	<ul style="list-style-type: none"> Consider using care gap reports for any contracted payors for additional opportunities if applicable 	<ul style="list-style-type: none"> Consider reusing previous recall lists for additional opportunities to bring patients back into the medical home
<p>Telehealth Opportunities</p>	<ul style="list-style-type: none"> Acute care Chronic care Consider well-child visits for children of all ages <ul style="list-style-type: none"> Retain a list of patients that need "close the gap" appointments when community circumstances permit 	<ul style="list-style-type: none"> Sick Visits as requested Chronic Care <ul style="list-style-type: none"> Asthma Follow Up ADHD Recheck Depression, Anxiety 	<ul style="list-style-type: none"> Sick Visits as requested Chronic Care <ul style="list-style-type: none"> Asthma Follow Up ADHD Recheck Depression, Anxiety 	<ul style="list-style-type: none"> Sick Visits as requested Chronic Care <ul style="list-style-type: none"> Asthma Follow Up ADHD Recheck Depression, Anxiety 	<ul style="list-style-type: none"> Acute Care Chronic Care <ul style="list-style-type: none"> Obesity, Anorexia Food Insecurities Medication Management- Asthma, ADHD Depression, Anxiety



Monitoring vaccine compliance

Liz Hogan

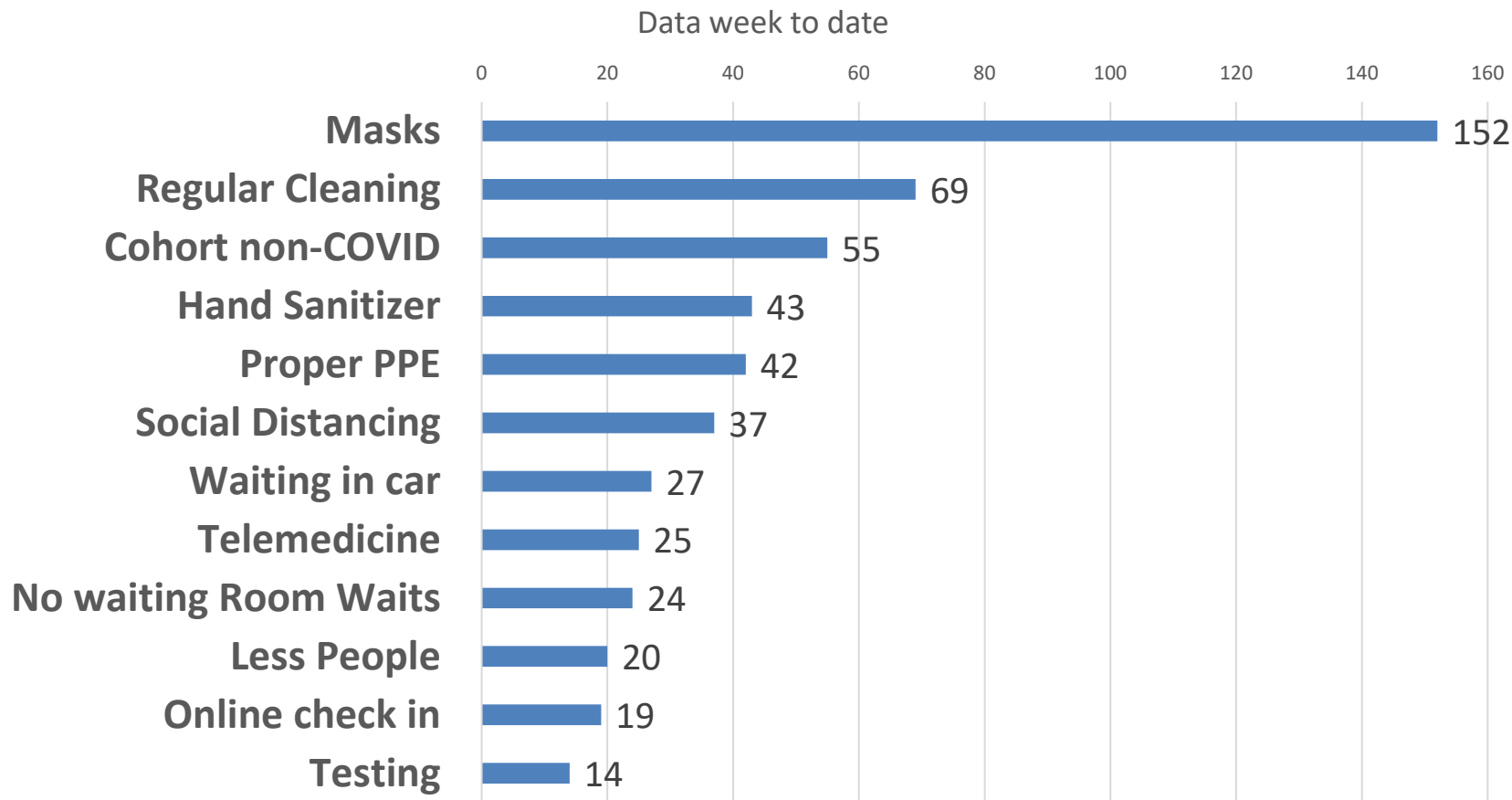
TCCN Adolescent Metrics year over year



Survey Results: Children's Parent Feedback

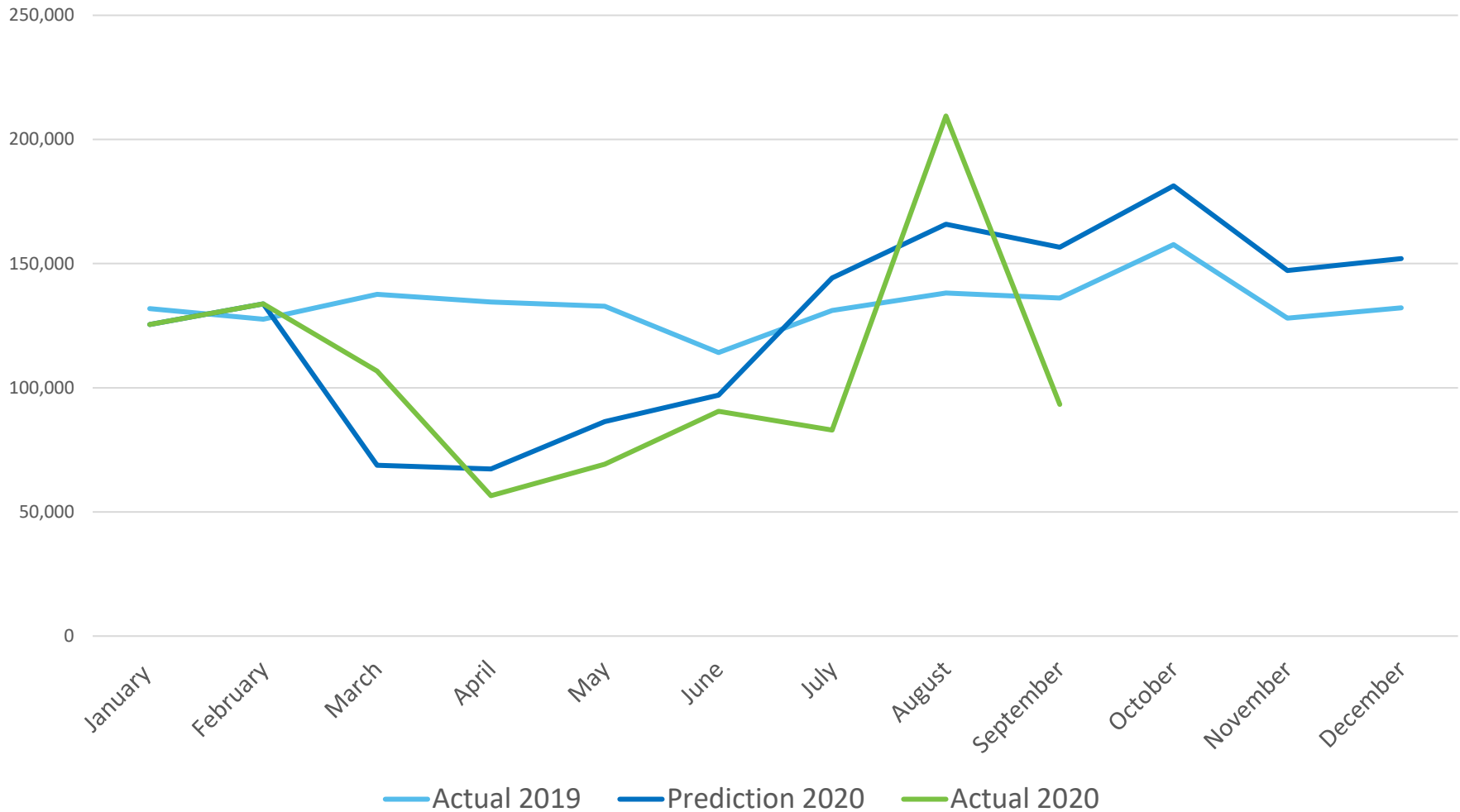
Liz Hogan

Week to date results based on 348 responses.

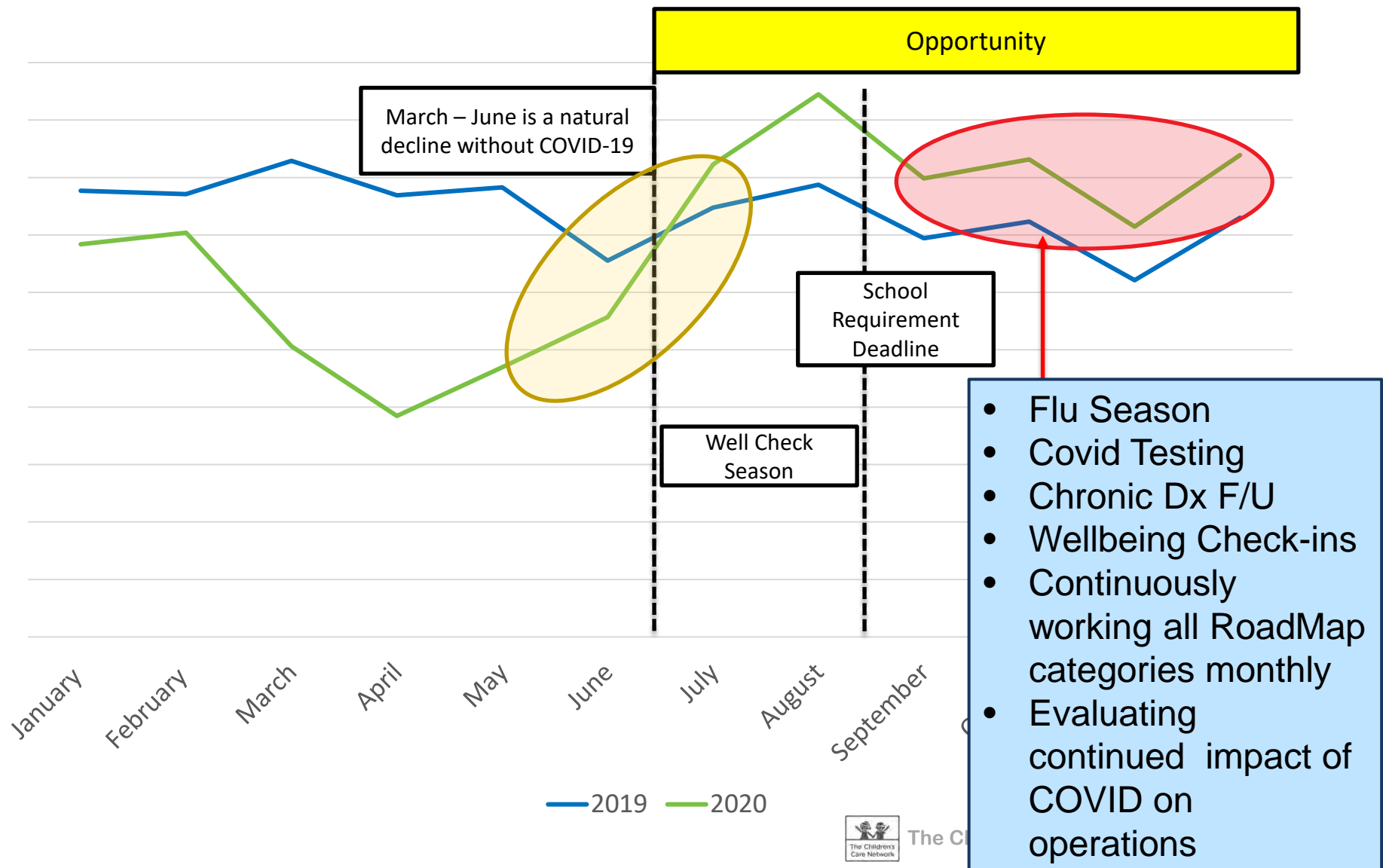


2019 Encounters vs. COVID Prediction, vs. 2020 Actual – Sept 2020

Liz Hogan



Encounter Counts 2019 vs. Estimates for 2020



Adapt



Flexible, adaptable, as new information is available and COVID status changes



VAX WARS

Turning the Tide on Vaccine Hesitancy

www.PediatricSupport.com



VAX WARS

Turning the Tide on Vaccine Hesitancy

Text **VAX** to **412-775-2579** to make a tax-deductible donation

www.PediatricSupport.com



Homework

63

Next Webinar: Thursday November 19th @ 7:00ET

- Stay Healthy!
- Weekly Budgeting
- Contact the media
- Stay Connected: Forum.PediatricSupport.com

www.PediatricSupport.com

