# The Business Impact Of COVID19 On Pediatric Practices

Webinar #9

















# 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





- 1. Top Items From Past Webinars
- 2. Data Report
- 3. News Segment
- 4. Financing Options
- 5. Telemedicine

# Agenda

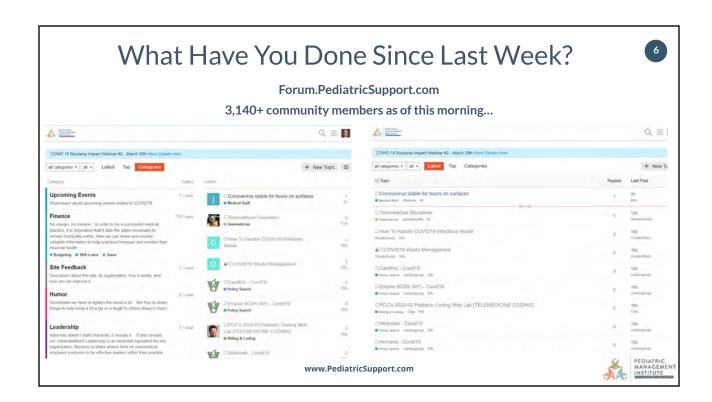
- 6. Billing & Practice Management Issues
- 7. Best Practices
- 8. Homework This Weekend
- 9. Next Week's Guest ??



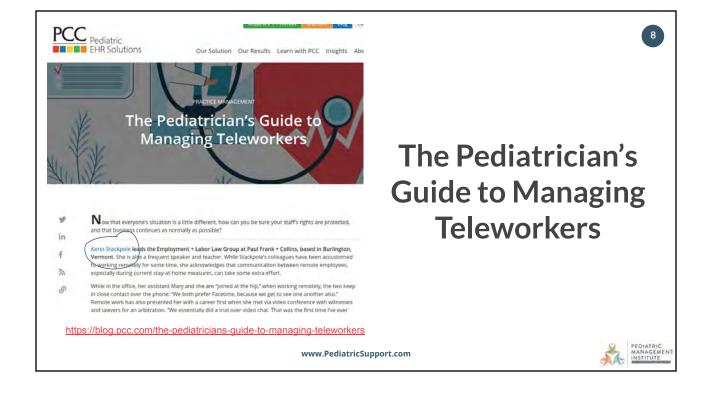














# Takeaways From Last Six Weeks

### 10

### Webinar 1:

- Flexibility
- Communication
  - Prepare Staff
  - Prepare Providers
- Cash flow Planning
  - Budget
  - Call Landlords
- Telemedicine

### Webinar 2:

- · Cash Is King
- · SBA Loans

### Webinar 3:

- Review TM Claims
- Revenue needed in three weeks
- Be Proactive & Engage With Patients
- HR/Legal

### Webinar 4:

- Find Opportunities To See Patients
- Leadership Is Essential
- State Medicaid Programs & Telemedicine

### Webinar 5:

Drowning means you're still alive!

### Webinar 6:

Advocacy

### Webinar 7:

• Communicate with your patients!

### Webinar 8:

• Recall, Recall!

PEDIATRIC MANAGEM INSTITUTE

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# Why and How Pediatric Practices Should Launch a Recall Initiative Today

https://chipsblog.pcc.com/why-and-how-pediatric-practices-should-la unch-a-recall-initiative-today

https://bit.ly/pediatriccovidrecall

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# Leveraging Patient Input Tools during COVID

Barbara J Howard, MD President Total Child Health Creator of CHADIS.com



Video Interview Posted: Forum.PediatricSupport.com



# Homework Report

I was working on a list of our ongoing tasks to remind myself that we are making progress, and thought I'd share:

- Got PPP loan
- Got EIDL loan advance
- Voluntary schedule changes for staff
- Downtime tasks assigned- calling kids behind on vaccines, well visits, behavioral health, asthma, cleaning up inactive patient and Medicaid lists, tidying office
- One doc doing telehealth exclusively and working on becoming EHR superuser
- Rearranged tasks for older and higher risk staff
- Glass doors installed for front desk
- Obtained PPE, much of it washable
- New logo
- Working on new website design
- Working on training and implementation for PCC go-live in July
- Using Hootesuite to update social media

- Messages via 2 robocalls to all patients on what we are doing about COVID, now offering telehealth
- Website, signs with info
- Telehealth visits
- Billing for phone and portal MD visits
- Weekly meeting for entire staff
- Daily huddles
- Email updates for staff
- LCW participating in AAP COVID echo group
- Webinars with DHHS, AHEC, UNC, PMI, ASHA, NC Peds, etc
- Checking PMI COVID forum
- Policy updates- clinical and operational
- Focusing on working down A/R
- Wrote US congressman and senators
- Using cash flow estimator and loan forgiveness calculator
- Joined SHRM

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# Latest Data From The Data Nerd...



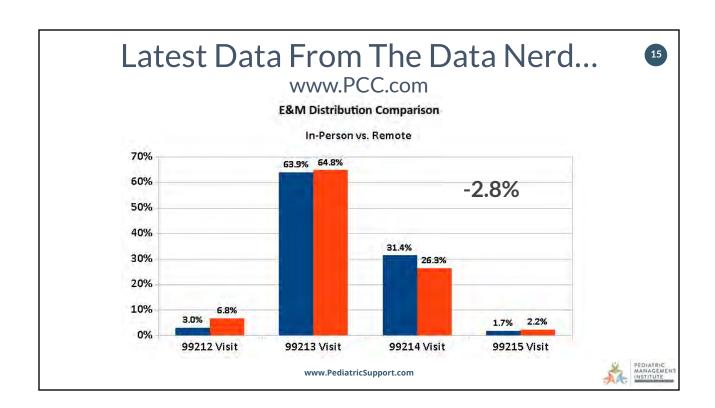


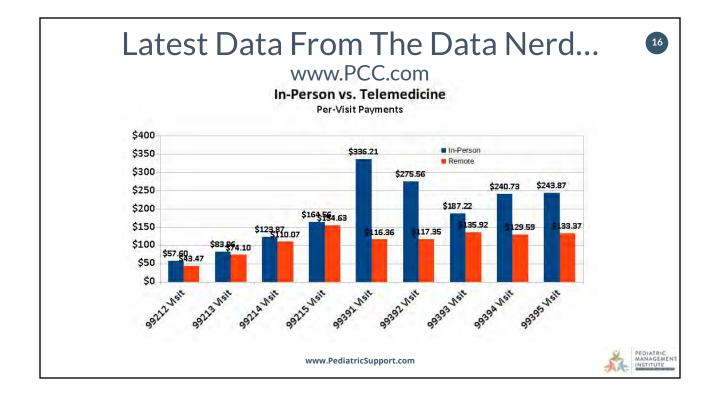


We have aggregated data from our clients across the continental U.S. so that we can better understand how the COVID-19 pandemic is changing how independent pediative practices treat their patients and how they will fare financially.

Below, we have a few charts that demonstrate these changes. As we gather more data, we will add our insight ento the changes we expect to see, and will provide engoing recommendations for the things your practice can do to adjust to practicing during this pandemic in the comine months.







# Latest Data From The Data Nerd...

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# Top 25 Diagnoses For Telemedicine Visits Since

**March 2020** 

F90.2	Attention-deficit hyperactivity disorder, combined type	
R50.9	Fever, unspecified	
Z79.899	Other long term (current) drug therapy  Cough	
R05	Cough	
J30.9	Allergic rhinitis, unspecified	
F41.9	Anxiety disorder, unspecified	
B34.9	Viral infection, unspecified	
F90.0	Attention-deficit hyperactivity disorder, predominantly inattentive type	
Z20.828	Contact with and (suspected) exposure to other viral communicable diseases	
J06.9	Acute upper respiratory infection, unspecified	
R21 .	Rash and other nonspecific skin eruption	
J02.9	Acute pharyngitis, unspecified	
L30.9	Dermatitis, unspecified	
F90.9	Attention-deficit hyperactivity disorder, unspecified type	
F32.9	Major depressive disorder, single episode, unspecified	
K59.00	Constipation, unspecified	
R10.9	Unspecified abdominal pain	
J45.20	Mild intermittent asthma, uncomplicated	
J30.2	Other seasonal allergic rhinitis	
L22	Diaper dermatitis	
L20.9	Atopic dermatitis, unspecified	
K21.9	Gastro-esophageal reflux disease without esophagitis	
R51	Headache	
J01.90	Acute sinusitis, unspecified	
R09.81	Nasal congestion	
L25.9	Unspecified contact dermatitis, unspecified cause	

# Latest Data From The Data Nerd...

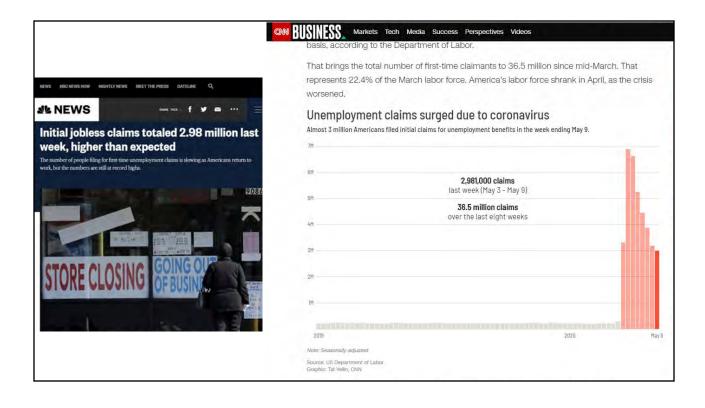


### www.PCC.com

Top 25
Diagnoses
For In-Person
Visits Since
March 2020

R50.9	Fever, unspecified
J02.9	Acute pharyngitis, unspecified
R05	Cough
J06.9	Acute upper respiratory infection, unspecified
B34.9	Viral Infection, unspecified
Z23	Encounter for immunization
J02.0 ·	Streptococcal pharyngitis Streptococcal
R30.0	Dysuria
J30.9	Allergic rhinitis, unspecified
F90.2	Attention-deficit hyperactivity disorder, combined type
P59.9	Neonatal jaundice, unspecified
P92.5	Neonatal difficulty in feeding at breast
R50.81	Fever presenting with conditions classified elsewhere
H66.001	Acute suppurative of titis media without spontaneous rupture of ear drum, right ear
H66.003	Acute suppurative otitis media without spontaneous rupture of ear drum, bilateral
R09.81	Nasal congestion
Z79.899	Other long term (current) drug therapy
Z68.52	Body mass index (BMI) pediatric, 5th percentile to less than 85th percentile for age
H66.002	Acute suppurative otitis media without spontaneous rupture of ear drum, left ear
R10.9	Unspecified abdominal pain
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
R06.2	Wheezing
P92.9	Feeding problem of newborn, unspecified
N39.0	Urinary tract infection, site not specified
J01.90	Acute sinusitis, unspecified
K59.00	Constipation, unspecified







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.









# **PPP Deductible Expenses**

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### Notice 2020-32

### PURPOSE

This notice provides guidance regarding the deductibility for Federal income tax purposes of centain otherwise deductible expenses incurred in a taxpayer's trade or business when the taxpayer receives a loan (covered loan) pursuant to the Paycheck Protection Program under section 7(a)(36) of the Small Business Act (15 U.S.C. 335(a)(36)). Specifically, this notice clarifies that no deduction is allowed under the Internal Revierue Code (Code) for an expense that is otherwise deductible if the payment of the expense results in forgiveness of a covered loan pursuant to section 1106(b) of the Coronavius Act, Relief, and Economic Security Act (CARES Act), Public Law 116-136, 134 Stat. 281, 286-33 (March 27, 2020) and the income associated with the forgiveness is excluded from gross encome for purposes of the Code pursuant to section 1106(b) of the CARES Act.

### BACKGROUND

I. Paycheck Protection Program

The Psychock Protection Program was established by section 1102 of the CARES

Act. Under the Psychock Protection Program, a recipient of a covered loan may use
the proceeds to pay (1) psyroll costs, (2) certain employee benefits relating to

The Notice explains that if an employer received a PPP loan and some or all of it was forgiven, the forgiven amount is not allowable as a deduction. An employer cannot get the forgiveness benefit of covered expenses and then turn around and treat those covered expenses as tax deductible.



# CONGRESS MAY GIVE PPP RECIPIENTS MORE RELIEF FROM THE IRS

MAY 11, 2020 \* MAXFIELD MARQUARDT \* AFFORDABLE CARE ACT



1 minute read.

On April 30, 2020 the IRS recently issued IRS Notice 2020-32. This Notice discusses the tax deductibility status of expenses that are forgiven under the Paycheck Protection Program ("PPP") provided for by the Coronavirus Aid, Relief, and Economic Security Act (CARES Act).

The Notice explains that if an employer received a PPP loan and some or all of it was forgiven, the forgiven amount is not allowable as a deduction. An employer cannot get the forgiveness benefit of covered expenses and then turn around and treat those covered expenses as tax deductible.



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46. Question: How will SBA review borrowers' required good-faith certification concerning the necessity of their loan request?

Answer: When submitting a PPP application, all borrowers must certify in good faith that "[c]urrent economic uncertainty makes this loan request necessary to support the ongoing operations of the Applicant." SBA, in consultation with the Department of the Treasury, has determined that the following safe harbor will apply to SBA's review of PPP loans with respect to this issue: Any borrower that, together with its affiliates, <sup>30</sup> received PPP loans with an original principal amount of less than \$2 million will be deemed to have made the required certification concerning the necessity of the loan request in good faith.

SBA has determined that this safe harbor is appropriate because borrowers with loans below this threshold are generally less likely to have had access to adequate sources of liquidity in the current economic environment than borrowers that obtained larger loans. This safe harbor will also promote economic certainty as PPP borrowers with more limited resources endeavor to retain and rehire employees. In addition, given the large volume of PPP loans, this approach will enable SBA to conserve its finite audit resources and focus its reviews on larger loans, where the compliance effort may yield higher returns.

Importantly, borrowers with loans greater than \$2 million that do not satisfy this safe harbor may still have an adequate basis for making the required good-faith certification, based on their individual circumstances in light of the language of the certification and SBA guidance. SBA has previously stated that all PPP loans in excess of \$2 million, and other PPP loans as appropriate, will be subject to review by SBA for compliance with program requirements set forth in the PPP Interim Final Rules and in the Borrower Application Form. If SBA determines in the course of its review that a borrower lacked an adequate basis for the required certification concerning the necessity of the loan request, SBA will seek repayment of the outstanding PPP loan balance and will inform the lender that the borrower is not eligible for loan forgiveness. If the borrower repays the loan after receiving notification from SBA, SBA will not pursue administrative enforcement or referrals to other agencies based on its determination with respect to the certification concerning necessity of the loan request. SBA's determination concerning the certification regarding the necessity of the loan request will not affect SBA's loan guarantee.



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# **EIDL Loans**



- No more applications being accepted
- Maximum loan amount reduced from \$2mm to \$150k
- Unilateral decision on how much is approved

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### PATIENT CARE ACCESS NEWS

### COVID-19 Lights the Way for Retail Health Clinics, Consumer Health

Retail health clinics offer a way to receive low-acuity care, vaccinations, and symptom checks, all key health needs in light of the COVID-19 pandemic.



May 13, 2020 - Since the novel coronavirus outbreak, it's not surprising to drive by a WalMart parking lot to see a large crowd of cars. No, it's not another sale. It's the consumer

Instead, the retail industry is finally falling in lockstep with the mission is has born for years: providing patients with a convenient place to receive care and another check on their to-do lists.





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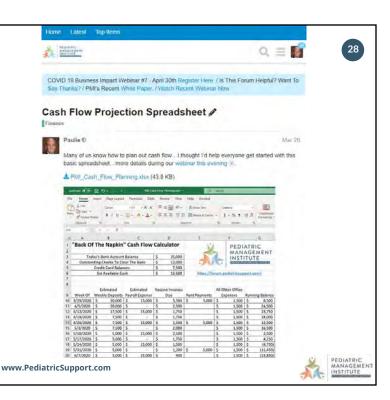


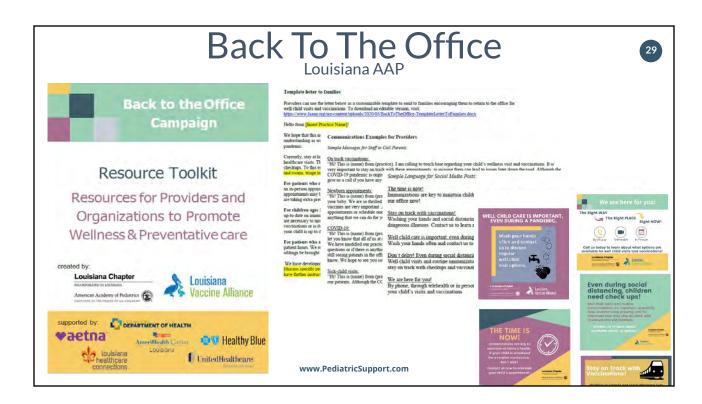


Goto Forum and search "Cash Flow"

Forums.PediatricSupport.com

Check Your Vaccine Due Dates!





# **Financing Options**

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- PPP / EIDL Loans
- Banks
  - Tighter lending standards?
    - Line of Credit
    - Structured Loan
- Sell/Leaseback
- FinTech Industry

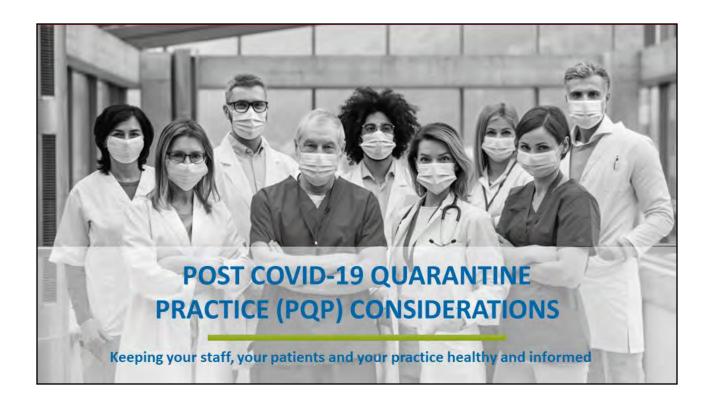


### 31

# Sell / Leaseback

- Sell existing property to third party who then leases your building back to you
- Cash out equity without need for bank
- National companies/organizations available





# **Today's Speakers**



Jeanne Marconi, M.D., F.A.A.P.



Kerry Fierstein, M.D., F.A.A.P.



Susan Sirota, M.D., F.A.A.P.





Choosing a Champion

The "Team"







### **Operations PQP: General**

- Hot Spot Considerations should they arise
  - Environmental Safety Policies and Procedures
  - Review Practice Policies for Worker's Comp,
     Business Interruption
  - Procurement re-assessment i.e. deferrals, efficient buying etc.
- Coding and Documentation Review for accuracy, denials and re-submissions
  - Food Policies and Restroom Policies



### **Operations PQP: Human Resources**



Return to Work Policies



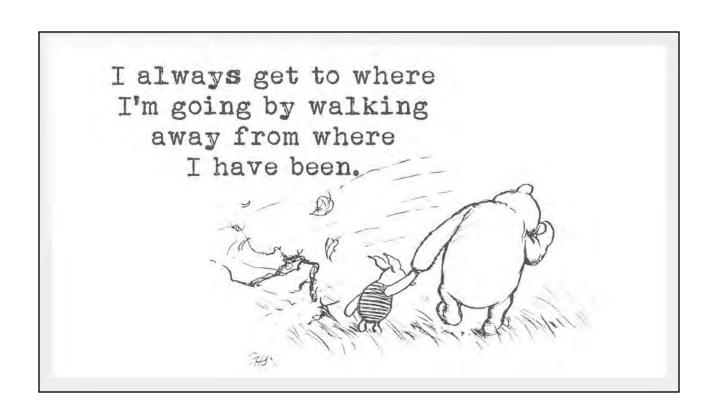
Pre-Shift Screening Policies



Review of PTO/Sick/FMLA Review with Staff Individually

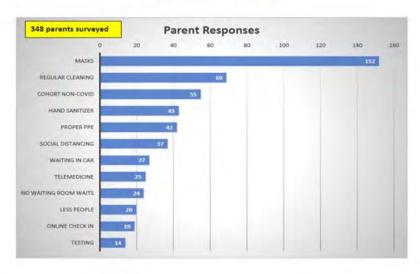


Federal, State, Local Government Regulations & Guidelines





### **Parental Survey**



### **Operations PQP: Staff Safety**

How do we keep them safe while maintaining camaraderie and culture?

- Is your staff too big, too small or just right?
- Can staff maintain social distancing in your current space?
- Should some staff work from home?Billing, phones, triage?
- o Should we enclose our open spaces?





### **Staff: Culture of Wellness**

- Defining healthy enough to work
- What PPE is adequate for which job function?
- Are scrubs now mandatory for clinicians, staff?
- Should personal circumstances influence job assignments?
- o Who cleans what? How often?

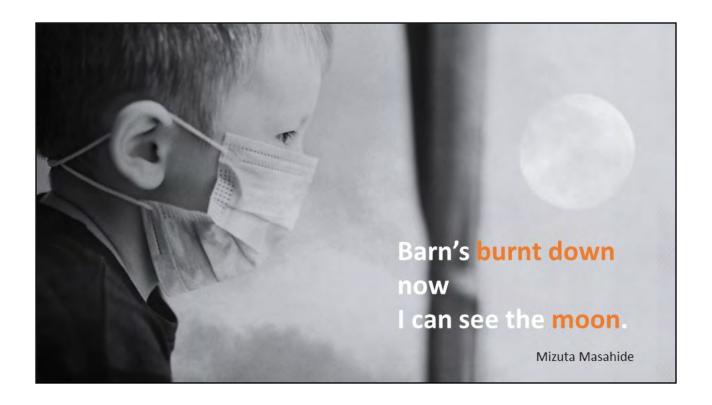
### **Examining Workflows**

- o Triage what needs to change?
- Will your current check-in procedures work as you get busier?
- Do you need to change your office hours, your schedule template?
- Do you need changes to your physical space?
- Is the waiting room an antiquated concept?
- Will reception and check-out change?









### **Operations PQP: Technology**

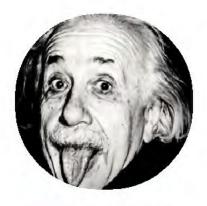
- What modifications will you make to the technology you have leveraged due to the pandemic?
- How have staff roles changed as you made better use of or adopted new technology and became more efficient?
- Can you use this technology to take on new lines of business or new roles with partners in the community?





### **Operations PQP: Testing**

- How will you incorporate testing into your practice?
- O POC CLIA waived on site?
- How will you provide Ab testing most efficiently if/when recommended?



Albert Einstein: "In the middle of difficulty lies opportunity"

### **Business and Opportunities**

- What measures will you use to assess the health of your business as you recover?
- What assumptions will you use to forecast and budget for the next 3, 6 and 12 months?
- How can you create leaner operations while taking into consideration new expenses and renegotiation of services?
- This is the time you can redefine culture, reorganize and innovate--what are your strategic priorities?

### Thank You!



Jeanne Marconi, M.D., F.A.A.P.



Kerry Fierstein, M.D., F.A.A.P.



Susan Sirota, M.D., F.A.A.P.

Graphic Production by Jennifer Moore, M.D., F.A.A.P.

# Leverage forum.pediatricsupport.com

- Connect using email
- Download the app (discourse)
- Popular and important highlights:
  Post-webinar Q&A

  - Practice Photos
  - o AAP COVID-19 Wellness Fund
  - Cash Flow Napkin
  - Payer Policies

https://forum.pediatricsupport.com/t/put-your-h-r-questions-here/3640







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https://womeninpeds.com

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# Billing & Practice Management Issues

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• What is the status of telemedicine payment and coding for each of your major payers?



Telemedicine
Care Coordination Plans
Complex Patients
...all the things you've been putting off that's good for the patients...



# Follow Up Items

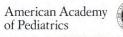
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- PMI Challenge
- Visit Forum.PediatricSupport.com for follow up items
- Cash Flow Budget
- Practice good medicine...keep an eye on finances...stay healthy

www.PediatricSupport.com



# Next Week's Guest...



DEDICATED TO THE HEALTH OF ALL CHILDREN

Mark Del Monte, JD About the AAP / Mark Del Monte Biography

### **CEO/Executive Vice President**

Mark Del Monte, JD serves as the CEO/Executive Vice President of the American Academy of Pediatrics (AAP). In this capacity, Mark leads a strong chief executive team for the organization which serves 67,000 pediatrician, pediatric medical subspecialist, and pediatric surgical specialist members. Prior to this role, Mark served as the AAP's Chief Deputy and Senior Vice President for Advocacy and External Affairs where he directed the organization's communications, public relations and advocacy activities.





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# Homework

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- Join Forum.PediatricSupport.com
- Cash flow planning (every week)
- Patient Recall Lists
- Advocate For Yourself
- Keep annoying the bankers

