



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

How COVID-19 Is Changing Healthcare: Three Things Providers Should Know



Annika Jones
DCH OIT – Health Information Technology

April 22, 2020



Mission:

The mission of the Department of Community Health is to provide access to affordable, quality health care to Georgians through effective planning, purchasing, and oversight.



Partnering for Success

The Department of Community Health and the Georgia Health Information Network (GaHIN) work closely to ensure that providers and caregivers can access patient health information at the point of care to optimize outcomes and reduce costs.

GAMMIS Online User Training



We have developed training on the simple steps needed to sign up to access GaHIN as well as how to navigate within the electronic record

- Part 1 – accepting the Terms and Conditions required prior to access
- Part 2 – primary functions and navigation within the GAMMIS Clinical Viewer

<https://ibmwh.adobeconnect.com/gammis-training>

You must have an active, authorized GAMMIS login and accept the terms and conditions (one time) prior to gaining access to GaHIN data

Note: Your facility may block streaming content on the internet, including content streaming from the truvenhealth.com domain. In this case, you will need to contact your IT Team for information on how to access streaming content.



GaHIN – Georgia's Statewide Health Information Exchange

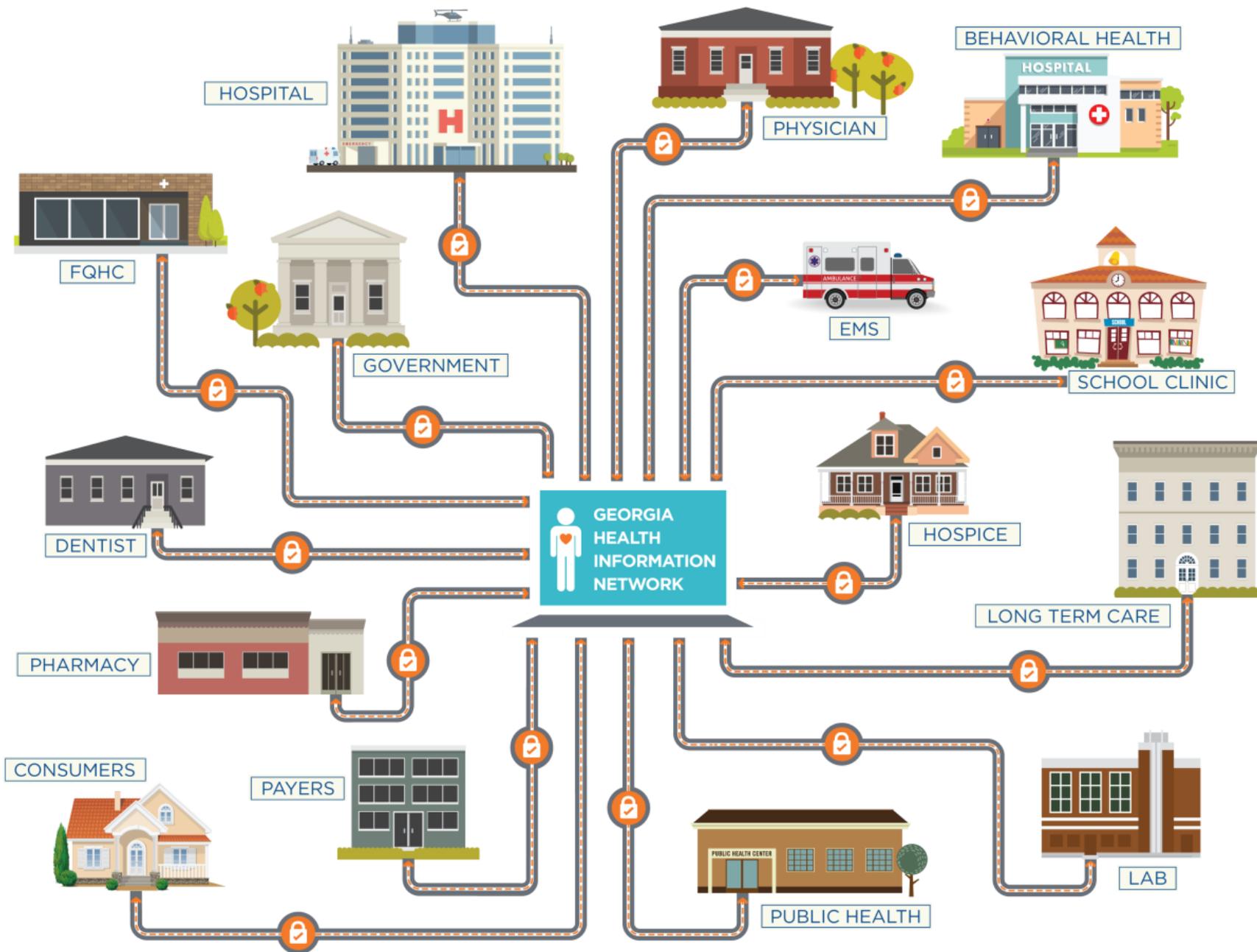
Georgia Health Information Network (GaHIN)

GaHIN is Georgia's state-designated Health Information Exchange (HIE)

Dedicated to **creating a healthier Georgia** through the use and exchange of electronic health information

- Advance patient-centered healthcare
- Increase efficiency
- Improve the health of the state's entire population

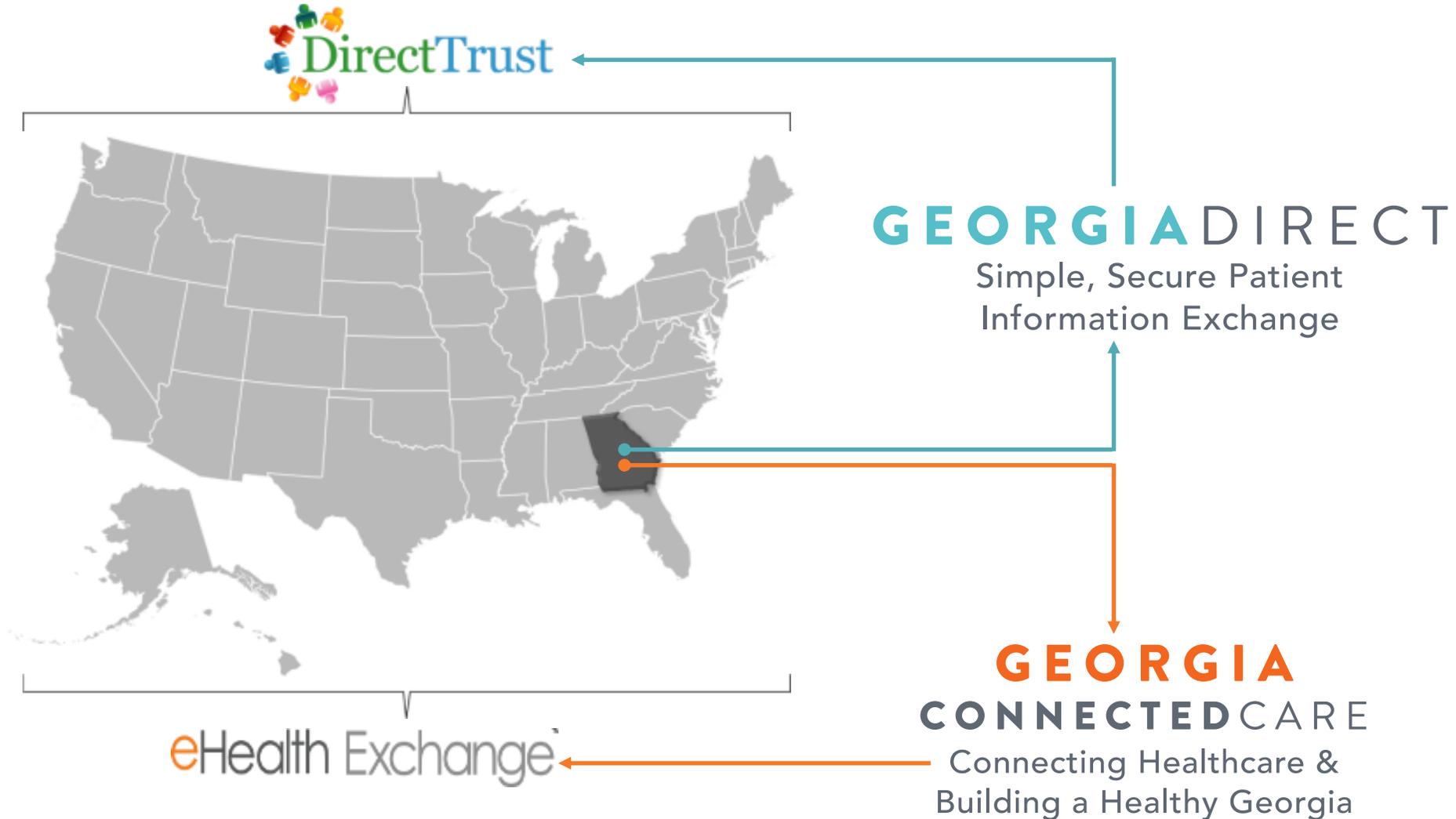




Creating a Statewide Electronic Network



GaHIN Products and Services



Connecting Georgia

GEORGIA DIRECT

Basic Data Exchange

Free email messaging service to securely send patient health information to other authorized healthcare professionals

2019 Totals

- 1,108,303 send & receive transactions
 - 2018 – 747,960 Direct transactions
- 6,445 registered providers
- 356 member organizations



Connecting Georgia

Robust Integrated Patient Search (Query)

Providers can use their EHR to quickly access patient health data from hospitals, physician practices, state health systems and much more

2019 Totals

- ~14,641 connected providers
- 3,885,730 queries
 - 2018 – 2,388,290 queries
- 36,513,390 MPI records

eHealth Exchange™



Connected Organizations

State Agencies

- GA Medicaid/Department of Community Health (DCH)
- GA Department of Public Health (DPH)
- GA Division of Families and Children Services (DFCS)
- GA Department of Juvenile Justice (DJJ)
- GA Department of Behavioral Health and Developmental Disabilities (DBHDD)

Health Systems/Hospitals

- Children's Healthcare of Atlanta (Epic)
- Emory Healthcare (Cerner)
- Grady Health System (Epic)
- Gwinnett Health System (RelayHealth)
- WellStar Health System (Epic)

Regional HIEs

- GRACHIE/Chatham HealthLink (Cerner)
- HealthConnection (Cerner)
- HealthIE Georgia (Azalea)
- HI-BRIDGE HIE (formerly Georgia Health Connect)

Care Management Organizations

- Amerigroup (with IHE)
- CareSource
- Peach State
- WellCare

Specialty Connections

- Atlanta Gastroenterology Associates (Greenway)
- Georgia Partnership for Telehealth (Azalea)

National Exchange

- Veterans Health Administration
- Department of Defense
- DaVita Healthcare Partners
- Alabama (AOHR)
- East Tennessee HIE (etHIN)
- South Carolina HIE (SCHIEEx)
- North Carolina HIE (NCHIEA)





Emergency Waivers During COVID-19 Crisis: Telehealth Issues



Emergency Waivers During COVID-19 Crisis: Telehealth Issues

Georgia Health Information Network

April 22, 2020

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Agenda



Telehealth Services

Previous Telehealth Restrictions

COVID-19 Section 1135 Waiver and March 31 Interim Final Rule (IFR)

Update: Other Virtual Services

HIPAA Waivers

Other Important Issues, During and After PHE

Before the Public Health Emergency (PHE)



Legal Standard

- Patient must reside in **rural area**
- Patient must be **physically present at healthcare facility** when service is provided (facility fee)
- Federal reimbursement for **few telehealth services**
- Cannot use for **first-time visits**
- Must use technology with **audio and video capabilities** that permits real-time interactive communication
 - **Note:** Some exceptions for stroke, ESRD and substance use

Before the PHE

Telehealth Services

- State legal standards for Medicaid coverage vary
- **Concern / enforcement** activities focus on whether services actually delivered
 - Significant increase in telemedicine Medicaid reimbursement over years:
 - Rendering provider reimbursed
 - Facility fee paid

Before the PHE



HHS OIG Report issued April 1, 2020: SC Medicaid overpaid for telemedicine services rendered between 2014 and 2017

Only allowed reimbursement for **3 of 100** sampled claims

Services not properly documented

Document start/stop time

Document location of consulting site

CARES Act (March 6, 2020)

- Coronavirus Aid, Relief and Economic Security (CARES) Act
 - Includes financial grants, stimulus, loans
 - Includes Waiver Authority to HHS
 - The Waiver ONLY applies during PHE
- ... however, now that telemedicine services are more widely allowed...

CMS Waiver

March 17, 2020 – CMS Issue Press Release, Fact Sheets

- Expands “Eligible Providers”
 - Physicians, including extenders
 - Clinical Psychologists
 - Licensed Clinical Social Workers
 - Registered Dieticians
 - NOTE: This list could be expanded; SNFs are pushing for therapy services to be delivered remotely
- Initially, if can bill CMS for service if conducted in person, can bill for Telehealth

CMS Waivers

During the Public Health Emergency

- Patient AND Providers can be ANYWHERE in USA – including if patient is at home!
- Provider bills “as if” in person
- Append POS code to claim (as if not remote)
- Can be a new patient – “Enforcement discretion” in audits

CMS Waivers and New Regulation



Regulation published April 6, 2020

CMS added coverage for inpatient hospital care for ED visits, observation, inpatient care

Coverage even if not for patient with COVID-19

Regulation details coding guidelines

- CHECK REGULARLY – CMS and State updates/ changes OFTEN

CMS Waivers, Regulation and Dear Clinician Letter



In “Dear Clinician” letter, CMS directs that be paid for telemedicine services for new and established patients

Tip: Maintain screen shots of guidance, web pages, CMS and State guidance to document compliance

- CHECK REGULARLY – CMS and State updates/ changes OFTEN

CMS Waivers



Equipment

- Telephones with audio/ video capabilities
- Audio only?

CMS Waivers

Coding Guidance and Coverage Confusion

- Expanding list of services – but every service is NOT covered
- CMS issued conflicting directions on how to code where the services were performed
- Keep documentation!

CMS Waivers

Cost Sharing Obligations

- Generally, the government does not permit providers to waive cost sharing for Medicare covered services
 - Concern is that could be undue influence on patients
- During PHE, cost-sharing is waived by Medicare....and increasingly private payers

Federal Issues: Rx

- Drug Enforcement Agency (DEA)
 - Prescribers must have DEA federal registration and there must be corresponding state registration
 - State registration under DEA is waived for each state, as long as prescribing provider has one valid state registration

Georgia Medicaid Waivers

State laws still in effect – and must be considered!

Georgia Medicaid issued guidance on March 18th

- No originating site limitations, can be conducted at patient's home
- For home and community-based waiver programs, can initial, annual care determinations via telehealth

Georgia Medicaid Waivers



Georgia Medicaid issued additional guidance on March 26th

- Qualified rendering providers include physicians, PA, NP and certified nurse midwives
- Any provider enrolled in Medicaid can use telehealth services
- Specific directions regarding coding, **differs from CMS**
- Document patient verbal consent to render care, waive written consent requirement

HIPAA Waivers



March 17, 2020 the Office of Civil Rights Issued Waivers for HIPAA enforcement

- Waive enforcement against providers operating in “good faith” using telehealth services
- Can be for telehealth services for any medical issue, not merely COVID-19 related issues

HIPAA Waivers



March 17, 2020 the Office of Civil Rights issued Waivers for HIPAA enforcement

- Should notify patients if use these applications they may not be private
 - FaceTime
 - FaceBook Messenger
 - Skype

- Use private locations when conducting visits (!)

HIPAA Waivers



March 17, 2020 the Office of Civil Rights issued Waivers for HIPAA enforcement

- Encourage but not require execution of Business Associate Agreements with vendors in telehealth
 - Question – could this waiver apply more broadly than telehealth?

HIPAA

- Office of Civil Rights Enforcement Discretion
 - Business Associate Waiver for PHE reporting
 - Stay tuned!

Telehealth

- Are the flood gates open?



Medicare Telehealth and Visual Services



- For first time, can bill for phone calls!
- New and established patients
- Consent issues

CMS Waivers

- Hospice, Home Health, IRFs
 - Coverage for services depends on face-to-face visits
- Nursing Home Use
 - Scope still being debated
 - Note: Hospital visits for inpatients can be virtual (and billed) but not yet a broader waiver

Other Considerations

- Federal Communications Commission April 2nd Report and Order
 - Establishes COVID-19 Telehealth Program
 - Funding to support “connected care”
 - Grantee limitations: nonprofits and public entities eligible
 - Includes schools, community health centers, hospitals, etc.

Questions?

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QUESTIONS??



Georgia Health Information Network

**Please participate in the brief survey
following this webinar.**





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Thank you!