Practice Management Guide COVID-19

The true impact of a COVID-19 outbreak in a U.S. community cannot be predicted. However, all healthcare leaders can take steps now to prepare for such an outbreak and protect both their patients and staff.

Operational Guidance:

- Stay up-to-date on the best ways to manage patients with COVID-19.

- Practice leaders should pay close attention to pending legislation and temporary regulatory changes at the federal level.

- Practice leaders should also keep an eye on state emergency declarations and/or executive orders that might pre-empt existing state laws or organizational policies regarding sick leave, including the CDC's recommendations for implementation of mitigation strategies for Massachusetts.

- Design a COVID-19 office management plan that includes patient flow, triage, treatment and design.

- Implement triage before entering facilities (e.g. parking lot triage, front door); phone triage with appropriate screening questions and telemedicine; limit unnecessary healthcare visits.

- Establish processes to evaluate and test large numbers of patients and staff with respiratory symptoms (e.g. designated clinics for people with fever, surge tent for overflow triage, offsite testing locations).

- Cross-train staff on essential business functions wherever possible to account for absenteeism.

- For practice staff who can telework, ensure that they are prepared to do so. Clearly communicate expectations for productivity and hours for staff who will not be at their normal work site.

- Implement mechanisms and policies that promptly alert key facility staff including infection control, health care epidemiology, facility leadership, occupational health, clinical laboratory, and frontline staff about known suspected COVID-19 patients (i.e. PUI).

- Follow risk assessment guidance for potential exposure to patients.

- Keep updated lists of staff and patients to identify those at risk in the event of an exposure, and actively monitor staff absenteeism and respiratory illness among staff and patients.

- Consider implementing temperature/symptom checks for staff, visitors, limit visitor movement in the facility.

- Define appropriate and optimal use of limited personal protective equipment (PPE), review proper technique for putting on and taking off PPE, and actively monitor PPE supplies.

- Educate your patients on the importance of preparedness, prevention, treatment, staying home if possible, and services offered via telehealth.
- Avoid stigma towards certain patient populations. Fear and anxiety about COVID-19 can cause people to avoid or reject others even though they are not at risk for spreading the virus.
- Check your practice's short-term disability policy that might be available once staff have exhausted available PTO.
- Establish a relationship with a temporary staffing agency to help fill unexpected absences.
- To learn more about the recommended preparedness strategies, please review the CDC guide to Business and employers

Telehealth:

As COVID-19 continues to be a driving factor in the push toward increased adoption and implementation of telemedicine, the Massachusetts Medical Society has compiled helpful information on telehealth options available to you. Please visit MMS Telehealth and Virtual Care.

Payers Updates

The MMS Department of Practice Solutions and Medical Economics has compiled a directory of health plan COVID19 coverage policy summaries and associated health plan links as a resource to physicians, allied providers, and practice managers for accessing COVID-19 policies.

Licensing

BORIM recently released additional information pertaining to expansions of physician licensure during the current COVID-19 State of Emergency in order to meet current health care needs. To learn more, please click here

DEA

The DEA is responding appropriately to ensure Americans continue to have access to necessary medications and controlled substances. These efforts include supporting prescribing practices that limit exposure, enabling uninterrupted access to practitioners, and safeguarding a consistent and reliable drug supply. To learn more, please click **here**.

Workplace Safety:

- The Centers for Disease Control and Prevention (CDC) provides interim guidance for risk assessment and public health management of underline healthcare workers with potential exposure to patients with COVID-19.

- If a healthcare provider takes leave due to a confirmed or suspected COVID-19 case, the CDC recommends two approaches for when that worker may return to work:

  o A negative COVID-19 test result, in addition to recovery (defined as resolution of fever without the use of fever-reducing medications and improvement of any respiratory symptoms, e.g. cough or shortness of breath).

  o Passage of three days (72 hours) since recovery (as defined above) and having at least seven days passed since symptoms first appeared.

- The Occupational Safety and Health Administration (OSHA) has resources to help employers and their employees prepare for and respond to coronavirus in the workplace:

  o OSHA Guidance on Preparing Workplaces for COVID-19 – This guidance was developed in collaboration with the U.S. Department of Health and Human Services to help employers respond in the event of coronavirus in the workplace.

  o Temporary OSHA Guidance on Respiratory Protection Standard – This guidance provides suggestions and options to help increase the availability of N95 filtering facepiece respirators for healthcare providers.

  o COVID-19 Webpage – This webpage provides infection prevention information specifically for employers and workers.

Wages and Staffing:

The Wage and Hour Division provides information on common issues employers and employees face when responding to a pandemic and their effects on wages and hours worked under the Fair Labor Standards Act and job-protected leave under the Family and Medical Leave Act.

Families First Coronavirus Response act:

The United States has enacted the Families First Coronavirus Response Act, which will require employers with fewer than 500 employees to provide paid leave to employees who are impacted by COVID-19 and will offer tax credits to employers that do so. The law takes effect no later than April 2, 2020 and expires on December 31, 2020. The law contains three sections of interest for employers:

- Emergency Paid Sick Leave Act
- Emergency Family and Medical Leave Act Expansion

- Tax Credits for Paid Sick and Paid Family and Medical Leave

The Emergency Paid Sick Leave Act

This Act requires employers with fewer than 500 employees to provide paid sick leave to all employees who are unable to work (or telework) because of the following reasons:

- The employee is subject to a federal, state, or local quarantine or isolation order related to COVID-19 or is caring for an individual who is subject to such an order.

- The employee has been advised by a healthcare provider to self-quarantine due to concerns related to COVID-19 or is caring for an individual who has been advised to self-quarantine.

- The employee is experiencing symptoms of COVID-19 and seeking a medical diagnosis.

- The employee is caring for their child due to their school or place of care being closed, or their childcare provider is unavailable, due to COVID-19 precautions.

- The employee is experiencing any other substantially similar condition specified by the Secretary of Health and Human Services in consultation with the Secretary of the Treasury and the Secretary of Labor.

- Full-time employees are entitled to take up to 80 hours paid sick leave. Part-time employees are eligible for several hours equal to the average hours worked over a two-week period.

- Payment during sick leave is as follows:

    -For sick leave under reasons 1-3 (e.g., employee is sick), leave is paid at the employee's   regular rate of pay, capped at $511 per day ($5,110 aggregate)

    - For sick leave under reasons 4-6 (e.g., employee is caring for someone else), leave is capped at $200/day ($2,00 aggregate).

    Tax credit for employers: Provides a refundable tax credit equal to 100% of qualified paid sick leave wages paid by an employer for each calendar quarter.

Paid FMLA Leave for "Public Health Emergency"

- This expansion creates a new category of FMLA-covered leave for up to 12 weeks of job-protected leave for employees unable to work (or telework) due to the need to care for his or her child (under 18 years) if their school or daycare has been closed due to a public health emergency.

- Payment during new category of leave is as follows:

    o The first 10 days of leave are not paid, and the employee can substitute any accrued vacation, personal or medical/sick leave for unpaid leave.

    o After the first ten days, the employer must provide the employee with no less than two-thirds of the employee's usual pay, capped at $200/day ($10,000 aggregate).

Tax credit for employers: *Provides a refundable tax credit equal to 100% of qualified family leave wages paid by an employer for each calendar quarter, capped at $200/day and $10,000 for all calendar quarters.*

For more information please see the following:

- Families First Coronavirus Response Act: Employee Paid Leave Rights
- Families First Coronavirus Response Act: Employer Paid Leave Requirements
- COVID-19 or Other Public Health Emergencies and the Fair Labor Standards Act: Questions and Answers
- COVID-19 or Other Public Health Emergencies and the Family and Medical Leave Act: Questions and Answers
- WHD Response to COVID-19

Coronavirus (COVID-19): Small Business Guidance & Loan Resources

- Small business owners may be eligible for the Economic Injury Disaster Loan Program and are currently eligible to apply for a low-interest loan due to Coronavirus (COVID-19). Please click here to apply.
- MA 16344 Economic Injury Disaster Loan Fact Sheet
- SBA Offers Statewide Disaster Assistance to Massachusetts Small Businesses Economically Impacted by the Coronavirus (COVID-19)

Information on unemployment and coronavirus (covid-19):

The U.S. Department of Labor has issued guidance to the states instructing state agencies to apply existing unemployment law flexibly related to Coronavirus Disease 2019 (COVID-19). The fastest way to file a claim is to apply for unemployment benefits online. People with special needs, disabilities, or language difficulties can use this form to contact DUA.

To assist individuals who cannot work due to the impact of COVID-19, the Baker-Polito administration has filed emergency legislation and emergency regulations that allow people impacted by COVID-19 to collect unemployment if their workplace is shut down.

Disclaimer:

"This document summarizes MMS understanding of current generally accepted best practices. It is intended to serve as a general resource and does not constitute legal advice. Patients, physicians, and other healthcare providers should exercise their own discretion in implementing telemedicine measures. If you need legal advice, please consult an attorney."

References:

https://www.mgma.com/resources/risk-compliance/coronavirus-covid-19-what-medical-practice-leader

https://www.aafp.org/dam/AAFP/documents/patient_care/public_health/COVID-19%20Office%20Prep%20Checklist.pdf

https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/guidance-hcf.html

https://www.dol.gov/coronavirus

https://www.dol.gov/newsroom/releases/osha/osha20200309

https://www.dol.gov/agencies/whd/pandemic

https://www.sba.gov/offices/district/ma/boston