Windham Brannon & Salud Revenue Partners Present

COVID 19 FOR THE HEALTHCARE INDUSTRY

April 16, 2020

AGENDA

- Introduction / Objective of Webinars
- Coding/Compliance Update Megan Veach, Salud
- Operations and COVID-19 Valerie Barkhoff, Windham Brannon
- Job Loss and the Revenue Cycle Valerie Barckhoff, Windham Brannon
- Closing and Q&A Frank Massi, Salud





Partnering to Operationalize Excellence Combining Competencies to Deliver Superior Value

Windham Brannon

Healthcare Advisory practice with significant industry knowledge, expertise, and relationships with provider and service organizations

- Interim C-level, Rev Cycle Mgmt
- Revenue Cycle assessments
- Revenue Cycle transformation
- Revenue Cycle audits, controls
- Extended business office services design and partnerships
- Patient Pay Policies & Procedures
- Rev Cycle Roadmap to transition to fee-for-value One of the largest Atlanta-based

Joint Solution

"Blended" **RC Services** Optimization

- Planning
- Process
- Technology **RCMS**
- ROI

Salud Revenue Partners

Revenue Cycle services company with experienced leadership delivering revenue cycle management in the digital age

- Revenue Cycle Management
- · Extended BO; Zero Balance Review and Collection; Medicaid Out-of-State
- HIM Coding, Audits, Compliance
- System Conversions; Human-driven, techenabled Self-Pay
- Psychology-based patient collections
- Artificial Intelligence-driven denial management

Purpose-built for each project:

- "Blended" team consolidates multi-vendor coordination
- "One-operator" operational & communication efficiencies
- Multi-aspect ROI due diligence, benefits projection, and management to realization

Salud Revenue Partners:

- Lafayette Indiana-based Revenue Cycle Services (2011)
- 100+ professionals; full-range revenue cycle, extended office, coding, and patient pay services
- Culture rooted in founding values: improving the solvency of healthcare providers & the health of the communities they serve



Windham Brannon:

regional accounting firms (1957)

commitment to excellence, living

• 160 professionals; full-range audit, accounting, tax, advisory

Culture rooted in founding

values: integrity, service,

the Golden Rule







Current CMS changes to Telehealth Services

Megan Veach, CPC, CEDC, CPC-I, CMCS

REVENUE CYCLE MANAGEMENT FOR THE DIGITAL AGE

CMS Telehealth Updates

CMS took some aggressive actions when responding to the Public Health Emergency due to the COVID-19.

Updates to all changes are retro effective to March 6, 2020

Some of those actions were:



Adding More Services

- Adding 80+ CPT codes to the already comprehensive list of eligible Telehealth (Audio & Video) Services
- https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes
- Some of the newly added codes included Inpatient admissions (99221-3), Inpatient Discharges (99238-9), Physical Therapy evaluations (97161-3), Emergency Department visits (99281-5)



Changes in POS and Modifiers

• CMS previously had all Telehealth (Audio & Video) services billed by using the POS 02 and no modifier for the Distant Site provider.

Under the new PHE, CMS is temporarily allowing non traditional Telehealth services to be billed with POS as it would have normally been had it been performed as a face to face visit.

Modifier 95 is now needed on all non traditional Telehealth visits as well.



Allowing for Telephone Evaluations

- CMS is now allowing payment for Telephone Evaluation and Management services provided by physicians or other QHCP who may report E/M services.
- CPT codes 99441 5-10 mins
- 99442 11-20 mins
- 99443 21-30 mins
- ***Services may only be billed if issue addressed is not originating from a previous E/M service provided within the previous 7 days nor leading to a follow up E/M within next 24hrs.
- **Must be patient initiated





Operations and COVID19

- COVID-19 Revenue Cycle Task Force
- Key Activities/Risks
 - Managing a Remote Workforce
 - Productivity
 - Claims Processing/Slow Downs
 - HIPAA
 - Newly Uninsured
 - Furloughs/Layoffs/Hospital Closures





Job Loss and the Revenue Cycle

- Patient Access Process
 - Pulling-forward of Insurance Data is a Common Practice
 - Insurance Verification and Eligibility
- Policies and Procedures
 - Charity
 - Medicaid Eligibility
 - Self Pay Discounts
 - COBRA https://compensation.blr.com/Compensation-
 news/Termination/COBRA-Health-Insurance-Continuation/COBRA-Continuation-Coverage-Who-Pays/
- Other Concerns
 - Cash Deterioration
 - Bad Debt



References

- https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page
- https://www.federalregister.gov/documents/2020/04/06/2020-06990/medicare-and-medicaid-programs-policy-and-regulatory-revisions-in-response-to-the-covid-19-public





Wrap Up

- Key takeaways
- Next week's topics
- Questions?





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