

Addiction Treatment Starts Here



**MAT and COVID-19
Webinar Series
April 1, 2020**

Webinar Reminders

1. Everyone is muted.

 *6 to unmute

 *6 to re-mute

2. Use the chat box for questions and to share what you're working on.

3. **This webinar is being recorded.** The slides and webinar recording will be emailed and posted to the ATSH program page.

ATSH: Telehealth and Wellness During COVID-19

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Introductions and Disclaimers

- Not legal advice
- Regulatory landscape is changing
- Local municipalities and organizations may have their own rules



Outline

- **Telehealth**

- Types of Telehealth Services
- COVID-19 Rules
- Platforms
- How to Conduct Tele Session
- Code / Bill for Telemed
- Experiences with Hill Country and Axis

- **Wellness**

- Burnout and Compassion Fatigue
- Self-care
- Mindfulness
- Team Care with Physical Distancing



Telehealth Platforms

	Visit	Consult
Synchronous	Virtual Audio-Visual Visit between patient and provider	Virtual Audio-Visual Visit between provider and consultant
Asynchronous	eVisit – online exchange between patient and provider	eConsult – online exchange between provider and consultant
Telephone	Can be synchronous (live) or asynchronous (voicemail exchange) without a visual component; not traditionally considered to be ‘Telehealth’ and is instead referred in regs as ‘telephone’ or ‘telephonic’	

Advisable to update malpractice carrier to discuss telehealth coverage

COVID-19 Rules

- 1135 waiver authorizes providers to offer telehealth services in any healthcare facility
- Can issue controlled substance Rx to patients for whom we have not previously conducted an in-person medical evaluation
- The suspension of at least one in-person exam is helpful in the case of new patients for whom you are prescribing a controlled substance, such as buprenorphine

- Medicare: <http://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>
- Medi-Cal: <https://www.dhcs.ca.gov/Pages/DHCS-COVID%E2%80%9119-Response.aspx>

COVID-19 Rules

- Enforcement of HIPAA Rules have been relaxed to support telehealth services through remote communications technologies, including technologies not fully compliant with the requirements of the HIPAA Rules

<http://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>

Specific Platforms

Not an exhaustive list nor an endorsement of any of the below

- **HIPAA Compliant Options (often through BAA):**

- Zoom
- Skype
- Microsoft Teams
- Cisco Webex Meetings
- GoToMeeting
- BlueJeans
- VSee
- doxy.me

- **Allowable, Non-HIPAA Compliant Options:**

- Apple FaceTime
- Facebook Messenger video chat
- Google Hangouts video

- **Not allowed:**

- Instagram Live
- Facebook Live
- Twitch
- TikTok
- and their equivalents

How to Conduct Tele-Session

- Factor in the patient's ability and familiarity with technology platform
- Confirm patient's identity and location
- Obtain phone number to reach patient in case of technology / communication failure
- Obtain pt's consent to participate in telehealth
- Arrange for any medically necessary monitoring and follow-up
- *The standard of care is the same whether treatment is rendered in person or via telemedicine. Services are deemed rendered where the patient is located, not where the provider is.*
- For information about waiver of state licensure requirements, see <https://www.prms.com/media/2350/licensing-chart-3-20-20.pdf> (subject to updates)

Coding / Billing for Telehealth

- Unless otherwise agreed to by Managed Care Plans (MCPs) and provider, DHCS and MCPs must reimburse Medi-Cal providers at the same rate, whether a service is provided in-person or through telehealth, if the service is the same regardless of the modality of delivery, as determined by the provider's description of the service on the claim.
- DHCS and MCPs must provide the same amount of reimbursement for a service rendered via telephone or virtual communication, as they would if the service is rendered via video, provided the modality by which the service is rendered (telephone versus video) is medically appropriate for the member.

- <https://www.dhcs.ca.gov/Pages/DHCS-COVID%E2%80%9119-Response.aspx>
- 3/24: https://www.dhcs.ca.gov/Documents/COVID-19/Telehealth_Other_Virtual_Telephonic_Communications_V3.0.pdf



Coding / Billing for Telehealth

- For non FQHC/RHC/Tribal Medi-Cal providers: bill using usual CPT or HCPCS codes that would correspond to the visit being done in-person, and include POS 02 and Modifier 95
 - The CPT or HCPCS code(s) must be billed using Place of Service Code "02" as well as the appropriate telehealth modifier:
 - Synchronous, interactive audio and telecommunications systems: Modifier 95
 - Asynchronous store and forward telecommunications systems: Modifier GQ
- For FQHCs, RHCs, and Tribal 638 Clinics, bill using the applicable revenue code and HCPCS code, as per standard billing procedure, as well as the corresponding CPT code on the "informational line"

- <https://www.dhcs.ca.gov/Pages/DHCS-COVID%E2%80%9119-Response.aspx>
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FQHCs Coding / Billing for Telehealth

- 1135 Waiver

Satisfies Guidance/Criteria				Does not Satisfy Guidance/Criteria
PPS/AIR Rate				FFS Rate
Applicable Revenue Code*	+	HCPCS code T1015* (FFS)/ T1015 SE (Managed Care)**	+	CPT code 99201-99205 (new patient) CPT code 99211-99215 (established patient)
				HCPCS code G0071**** (\$13.69)

**Corresponding to the type of service being provided, e.g., medical, mental health, alcohol and drug, etc., and whether by an FQHC/RHC or Tribal 638 Clinic*

*** T1015 Clinic visit/encounter, for PPS and AIR*

****T1015 SE for PPS Wrap for FQHCs and RHCs only.*

*****Payment for communication technology-based services for 5 minutes or more of a virtual (non-face-to-face) communication between an FQHC/RHC/Tribal 638 Clinic practitioner and new or established patient, or 5 minutes or more of remote evaluation of recorded video and/or images*

- <https://www.dhcs.ca.gov/Pages/DHCS-COVID%E2%80%9119-Response.aspx>
- 3/24: https://www.dhcs.ca.gov/Documents/COVID-19/Telehealth_Other_Virtual_Telephonic_Communications_V3.0.pdf

Hearing From Peers

- **Who** is doing remote MAT visits in your clinic: which staff and for what services?
- **For** which patients are you doing remote care?
- **What** does your workflow look like?
- **How** long are your telephone visits?
- **How** are you documenting these visits in your EHR?
- **Have** you built this into your scheduling template?
- **Are** you tracking no-shows and how do you handle them?



Hill Country

Axis

KCS

The Wisdom to Know the Difference

*Self-care and patient care in
uncertain and difficult times*

Katie Bell, MSN RN-BC CARN PHN





Burnout and Compassion Fatigue

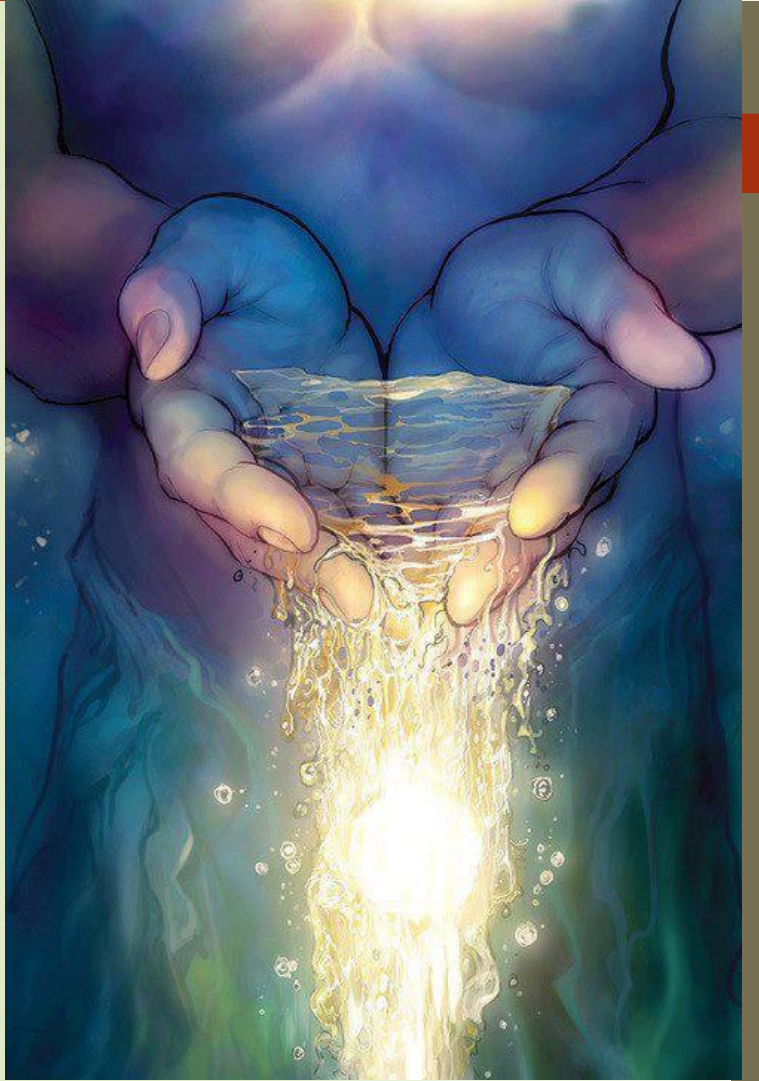
We are 'second responders'

Burnout

- ▶ Burnout has been conceptualized as a defensive response to prolonged occupational exposure to demanding interpersonal situations that produce psychological strain and provide inadequate support. "Burnout is a long-term stress reaction marked by emotional exhaustion, depersonalization, and a lack of sense of personal accomplishment."
- ▶ *Think about burnout as a mild to moderate to severe condition*

Compassion Fatigue

- ▶ This term was first introduced by Johnson (1992) in reference to nurses who were challenged by the everyday rigors of their emergency room duties. This condition is associated with a reduced capacity of the care-giver to demonstrate empathy for the patient or family.



Serenity Prayer

*Grant me the serenity to
accept the things I
cannot change,
the courage to change
the things I can,
and the wisdom to
know the difference.*

Mindfulness Practices

Balancing the autonomic nervous system

Deep Inhale/Extended Exhale

- ▶ Grounding techniques
 - ▶ Feel feet and hands – allow them to be heavy
 - ▶ Body Sensing
 - ▶ Yoga for the eyes
- ▶ The 4-7-8 breath with Dr. Andrew Weil
- ▶ Self-compassion
 - ▶ Tenderness
 - ▶ Self-acceptance



“You can’t stop the waves, but you can learn to surf.”

Self-Care: Body	Mental and Emotional Health	Spiritual Wellness
Nutrition, sleep, exercise (more home cooking)	Human connections	Faith communities: zoom services
Walking daily in nature (sky time)	Autonomic Nervous System – notice stress response	12-Step Meetings: zoom
Yoga and stretching	Manage worrying and notice what fuels worry	Prayers and Mantras
Dancing (no one is watching!)	Cultivate perspective	Practice gratitude
Unhealthy habits	Humor	Tender Mercies – see and do the small things
Find comfort: pets, family and friendships, binge tv, stay away from computer, limit news, turn up music	Tend your creativity: spend some time with poetry, art, music. Explore your great ideas.	Develop a daily meditation practice – five minutes <u>every</u> <u>day</u>



**What strategies is your
team using?
Use the chat box to
share your experience!**



Team Care in a time of Social Distancing

- **Loving-kindness – we all need more of it**
- **Cultivate trust**
- **Express appreciation**
- **Tender mercies – paying attention to the small things in each other**
- **Check in more – call, text, emails**
- **Offer support and listening**
- **Understanding Global Grief and Anticipatory Grief**

“What do you need from me today?”



We need social distancing **AND** humor

**How long is this
social distancing
supposed to last? My
wife keeps trying to
come in the house.**

Resources



Self-Care

Team Care

Mindfulness Apps – Guided Meditations

- Insight Timer – 40,000 free meditations
- Calm
- Headspace

Reith, T. (2018). Burnout in Healthcare professionals – A Narrative Review
[Burnout in Healthcare](#)

Five exercises to Nurture Self-Compassion
[Here](#)

Compassion Fatigue
[Compassion Fatigue Awareness Project](#)

Mindfulness Based Stress Reduction: free 8 session course

[Mindfulness Based Stress Reduction](#)

Secondary Traumatic Stress or Vicarious PTSD [Warning Signs](#)
[Vicarious Trauma/Secondary Traumatic Stress](#)

Dr. Weill – Three Breathing Exercises and
[Breath Practices](#)

Yoga for Couch Potatoes
[Yoga](#)

Additional Resources



- ▶ MGH Guide to Mental Health Resources for COVID-19
 - ▶ <http://www.massgeneral.org/psychiatry/guide-to-mental-health-resources>
- ▶ APA COVID-19 Resources
 - ▶ <http://www.psychiatry.org/psychiatrists/covid-19-coronavirus>
- ▶ AMA Caring for our Caregivers during COVID-19
 - ▶ <http://www.ama-assn.org/delivering-care/public-health/caring-our-caregivers-during-covid-19>

Team Victories and Challenges

- What are you doing in your clinics?
 - Telehealth
 - Wellness
- Use the chat box to share what's working in your clinic!



Questions?



Additional Questions

- Email: Briana Harris-Mills
briana@careinnovations.org
- Briana will triage your questions and share with the appropriate ATSH coach or team member



Appendix

Federal Guidance and Resources

- [DEA guidance](#) on allowing prescriptions of buprenorphine to new and existing patients with OUD via telephone.
- SAMHSA [FAQ](#) on prescribing buprenorphine (see question 4, which indicates that new patients can be prescribed buprenorphine via telephone outside an OTP). FAQ released on March 19, 2020.
- SAMSHA [guidance on the application of 42 CFR Part 2](#) in a public health emergency (released March 19, 2020).
- SAMSHA [MAT resource page](#) including various guidance documents for OTPs. Also includes link to a [Virtual Recovery Resource](#) list.
- HHS [Health Information Privacy Page](#), including a [notice](#) allowing for enforcement discretion for remote communications (e.g., allowing use of non-HIPAA compliant devices for telehealth).
- DEA COVID-19 [Information Page](#)
- Changes to [EMTALA regulations](#), in light of the public health emergency (updated March 15, 2020).
- In a March 17, 2020 [news release](#), CMS indicates that Medicare can pay for office, hospital and other visits furnished via telehealth starting March 6, 2020 and for the duration of the COVID-19 public health emergency.

California Guidance and Resources

- DHCS COVID-19 Response [landing page](#)
- DHCS [guidance around Medi-Cal Payment for Telehealth and Virtual/Telephonic Communications](#). Released March 24, 2020.
- DHCS [Guidance to Medi-Cal Managed Care Plans](#) requiring plans to reimburse providers at the same rate regardless of whether a service is provided in person, via telehealth, or via telephone. Released March 18, 2020.
- CA Office of Health Information Integrity (CalOHII) [Disaster Response and Information Sharing during Emergencies](#), including specific references to SUD and MAT data sharing (March 18, 2020).
- DHCS [guidance for behavioral health programs](#) on providing behavioral health services via telephone and telehealth, adapting oversight requirements, and access to prescription medications. Released March 14, 2020.
- DHCS [FAQ on Behavioral Health Services](#) in light of COVID-19, updated on March 13, 2020.
- California's "[One-Stop Coronavirus Website](#)" (not MAT specific)

California Bridge Program Materials

- [Slides](#) and [recording](#) from 60-minute webinar which reviews key steps for keeping patients and providers safe while providing MAT. Webinar recorded on March 18, 2020.
- Link to [legal analysis of four hypothetical scenarios](#) for prescribing buprenorphine during COVID-19, prepared for the Foundation for Opioid Response Efforts (March 19, 2020).
- CA Bridge [Home Start Guide](#), [Buprenorphine After Overdose](#)
- CA Bridge [COVID-19 information page](#) and resources

Harm Reduction + Telehealth

- Harm Reduction
 - Yale Program in Addiction Medicine: [Guidance for People Who Use Substances on COVID-19](#), focusing on harm reduction strategies.
 - Harm Reduction Coalition's COVID-19 [Virtual Office Hours](#) (March 18, 2020).
 - Harm Reduction Coalition: [Syringe Services and Harm Reduction During COVID-19](#) (updated March 11, 2020) and [Safer Drug Use During the COVID-19 Outbreak](#) (updated March 11, 2020).
- Telehealth
 - The [California Telehealth Resource Center](#) provides [sample forms and guidelines](#) for implementing a telehealth program. It also recently updated its [Telehealth Reimbursement Guide](#), which includes telehealth reimbursement policies for Medicare, Medi-Cal Fee-For-Service, and Managed Care.