



AMERICAN
OSTEOPATHIC
ASSOCIATION



CDC COVID-19 UPDATE & AOA PUBLIC POLICY PRESENTATION



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WELCOME

Kevin Klauer, DO, EJD

Chief Executive Officer, American Osteopathic Association



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AOA RESOURCES

AOA COVID-19 Resource Page


- Updates on meeting status;
- Information on webinars;
- Board certification information;
- DO-created content;
- Advocacy information; and,
- Telehealth Guide



AOA Telehealth Guide

- Private payer information
- Federal policy updates
- CMS telemedicine guidance
- Links to CMS resources
- COVID-19 codes

osteopathic.org/wp-content/uploads/COVID-19-practice-guide.pdf



AMERICAN OSTEOPATHIC ASSOCIATION

COVID-19 Practice Implications

— as of March 18, 2020 —

The American Osteopathic Association's Health Policy and Physician Services teams are actively monitoring the evolving international coronavirus outbreak. Following is practice related information to help osteopathic physicians navigate the rapidly changing environment.

FEDERAL POLICIES

The Centers for Medicare & Medicaid Services (CMS) recently released guidance for providers on billing for diagnostic tests and Medicare payment for emergency services. CMS' guidance includes a [Fact Sheet](#) and a [frequently asked questions](#) document. [Medicaid](#) and the Children's Health Insurance Program (CHIP) also released coverage and benefits guidance. However, Medicaid reimbursement remains subject to state-specific requirements. The CDC released [official ICD-10 diagnosis coding](#) for health visits related to COVID-19.

HEALTH PLANS

Many of the commercial carriers have issued emergency guidance and have [agreed to cover telemedicine](#) to allow patients to speak to their doctors remotely about COVID-19.

- [Aetna](#)
- [American Health Insurance Plans](#)
- [Blue Cross Blue Shield Association](#)
- [Cigna](#)
- [Humana](#)
- [UnitedHealthcare](#)

CMS TELEMEDICINE GUIDANCE



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CENTERS FOR DISEASE CONTROL AND PREVENTION PUBLIC HEALTH UPDATE

Elliot Raizes, MD

Susanna Visser, MS, DrPh



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LEGISLATIVE UPDATE

Cumulative US cases of confirmed COVID-19

CDC, AS OF MARCH 23, 2020

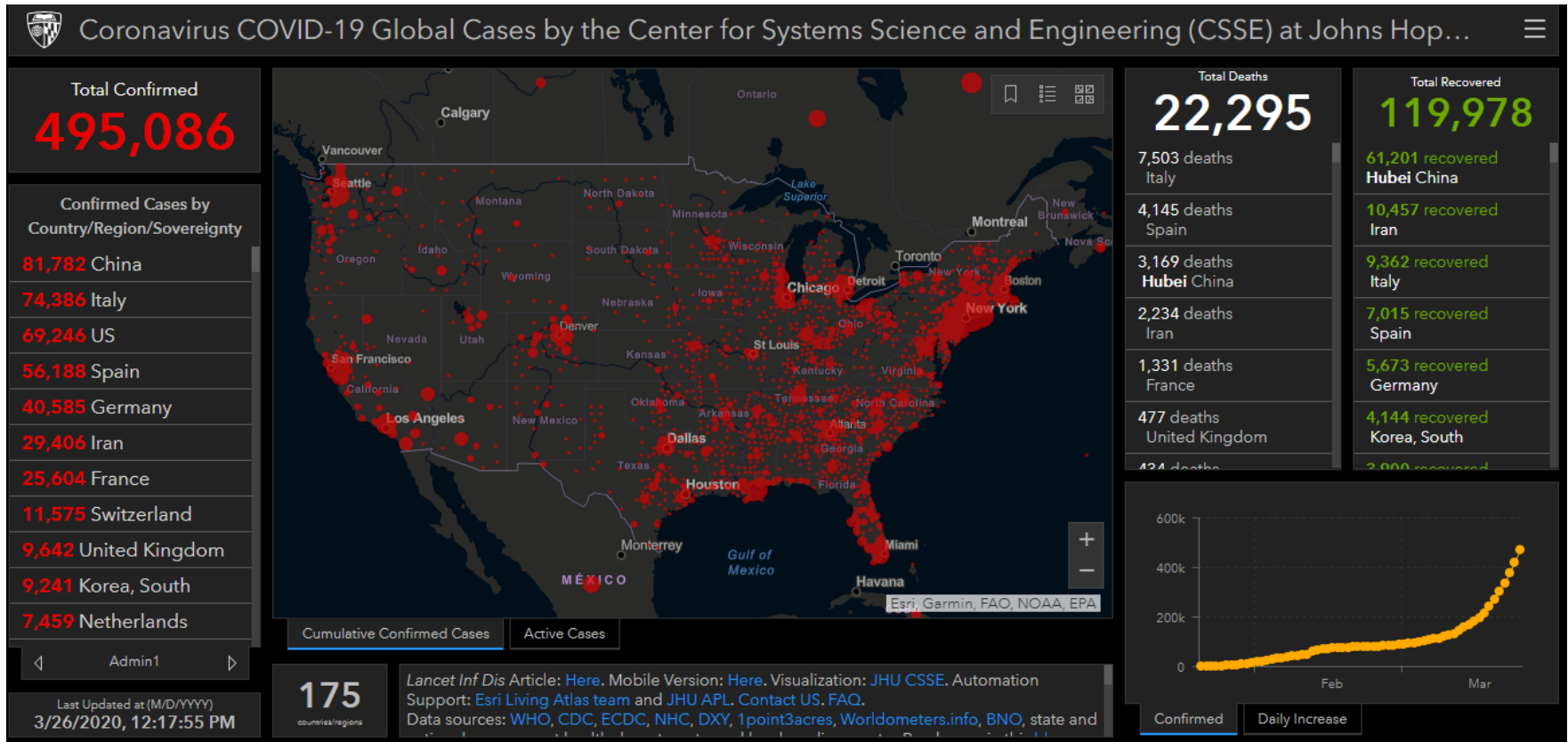


Sources: Centers for Disease Control

Slide last updated: March 24, 2020



Spread of COVID-19 Outbreak as of March 26th



On March 13, President Trump issued an executive order declaring the Novel Coronavirus (COVID-19) pandemic a national emergency

Key takeaways from the Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak:



Trump declared the emergency under the 1988 Stafford Act, **freeing up Federal Emergency Management Agency (FEMA) funds** to address COVID-19. White House estimates place the figure at around \$40 billion



Trump also declared an emergency under the National Emergencies Act, **allowing HHS to modify or waive regulations** for Medicare, Medicaid, and other programs, including provisions to expand telehealth access



This emergency declaration is **stronger than the “public health” emergency announced in late January**, which was technically issued by HHS and made it easier for states to redirect staff responding to COVID-19



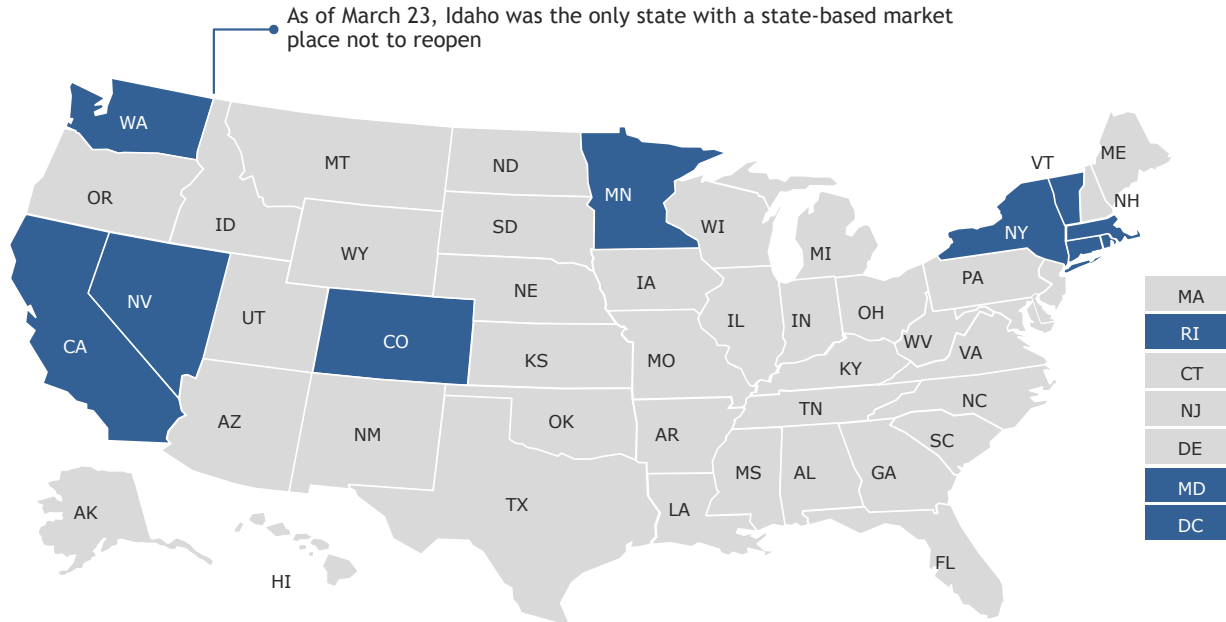
Telehealth provisions

- Trump administration plans to waive certain federal rules to increase the number of doctors able to provide remote care in states other than where they are licensed
- For the rules to go into effect, governors must use emergency powers to allow those doctors permission to practice within their state
- Under this order, CMS expanded Medicare's telehealth benefits, allowing beneficiaries to receive previously denied services, including common office visits and preventative health screenings from their homes

Eleven states and DC have opened enrollment under the ACA to allow recently laid-off workers to access subsidized health insurance

States that have reopened exchanges

AS OF MARCH 23, 2020



Sources: New York Times, Kaiser Family Foundation

Slide last updated on: March 23, 2020



It unclear if the Trump administration will allow a special period for the 32 states whose markets it manages or the six state-run exchanges that use the federal platform and require sign-off.



Individuals who lose their employer-based coverage can already apply for coverage outside of enrollment periods, but reopening the window will streamline enrollment.

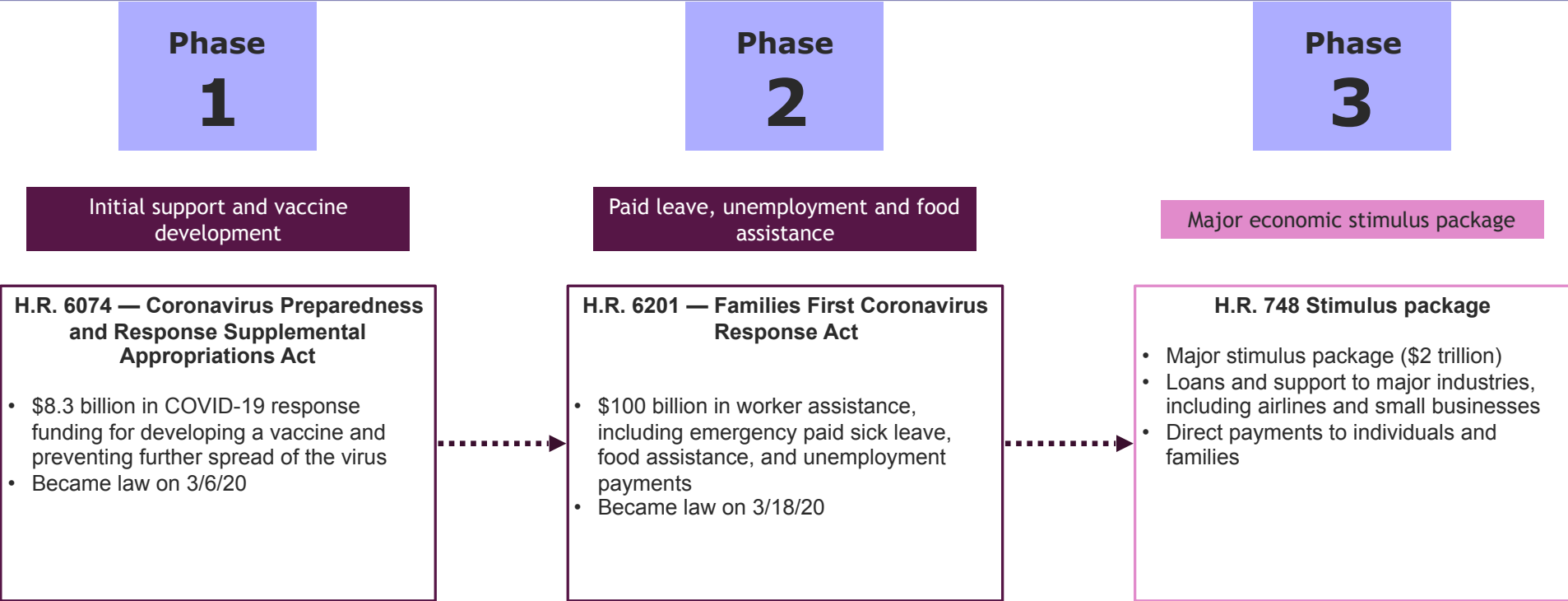


The special enrollment period is not limited to those who have recently lost their jobs, including those who are currently enrolled in limited-duration health plans.

State Medicaid Waivers Relating to COVID-19

- Requests made by 13 states so far: AL, AZ, CA, FL, IL, MS, NH, NJ, NM, NC, VA, and WA; and provide for:
- Temporary suspension of prior authorization requirements;
- Extension of existing authorizations for services during COVID-19 emergency;
- Modification of certain timeline requirements for state fair hearings and appeals;
- Relaxing of provider enrollment requirements to allow states to enroll out-of-state or other new providers more quickly;
- Relaxing public notice and submission deadlines for certain COVID-19 focused Medicaid state plan amendments, enabling states to make changes faster and ensure they can be retroactive to the beginning of the emergency; and
- Relaxing of certain telehealth requirements.

Congress's Three-Phase Response to the COVID-19 Outbreak



Sources: The Wall Street Journal, The Washington Post, Congress.gov.



Phase 1 (H.R. 6074): Coronavirus Preparedness & Response Supplemental Appropriations Act

Introduced
3/4/20

Passed House
3/4/20

Passed Senate
3/5/20

To president
3/5/20

Signed into law
3/6/20



Rep. Nita Lowey
(D-NY-17)
Bill sponsor

Votes in Congress

- **House:** Passed with a vote of 415-2
- **Senate:** Passed with a vote of 96-1

Bill overview

- Provides \$8.3 billion in emergency funding in response to the coronavirus outbreak for:
 - The development and manufacturing of vaccines and other supplies
 - State, local and tribal public health agencies
 - Loans for affected small businesses
 - Evacuations and emergency preparedness activities
 - Humanitarian assistance for affected countries
- The supplemental appropriations will be provided to the FDA, CDC, NIH, Public Health and Social Services Emergency Fund, Small Business Administration, Department of State, and USAID
- Designates the supplemental appropriations as emergency spending, which is exempt from discretionary spending limits

Phase 2 (H.R. 6201): Families First Coronavirus Response Act

Introduced
3/11/20

Passed House
3/14/20

Passed Senate
3/18/20

To president
3/18/20

Signed into law
3/18/20



Rep. Nita Lowey
(D-NY-17)
Bill sponsor

Co-sponsors: 6

GOP 0

Dem 6

Votes in Congress

- **House:** Passed with a vote of 363-40
- **Senate:** Passed with a vote of 90-8

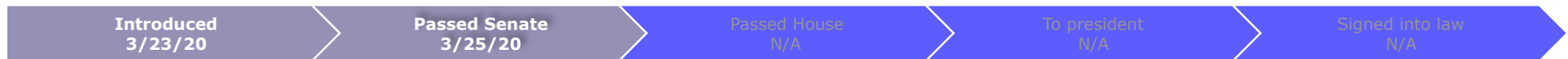
Bill overview

- Creates a **federal emergency paid leave program** administered by SSA
- Provides funds for nutrition assistance, including \$500 million for WIC and \$400 million for TEFAP
- Includes \$5 million for the Department of Labor to administer an emergency paid sick days program and \$250 for the Senior Nutrition Program in the Administration for Community Living
- Offers provisions to ensure children's access to school lunches
- Suspends SNAP work requirements
- Requires OSHA to issue an ETS requiring employers in the health care sector to develop a comprehensive exposure control plan to protect workers from COVID-19
- Offers states \$1 billion for emergency grants and interest-free loans to support processing and paying unemployment insurance
- Requires private insurers to expand coverage of certain COVID-19 related expenses

Sources: Congress.gov; House Appropriations Committee, NPR, Wall Street Journal

Slide last updated on: March 19, 2020

Phase 3 (H.R. 748): Middle Class Health Benefits Tax Repeal Act (Vehicle for third coronavirus package – the CARES Act)



Total cost: \$2 trillion

- **Direct payments to individuals:**
 - \$1,200 per adult, with an additional \$500 per child
 - The full amount will go to individuals who earn >\$75,000/year or \$150,000 for married couples; the payments scale down for higher-earning individuals, phasing out completely at \$99,000 for individuals and \$198,000 for married couples without children
- **Hospital investments (\$150 billion)**
 - \$100 billion for hospitals
 - \$1 billion to Indian Health Service
 - Remainder of money used to increase medical supplies
- **\$500 billion lending funds for industries, states, and localities**
 - Loans for companies with more than 500 employees
 - \$25 billion in loans to airlines; \$4 billion to cargo carriers
 - Bans loans to businesses owned by the president, vice president, head of executive departments, or members of Congress
- **\$367 billion in loans for small businesses**
 - Loans to small businesses would be forgiven if payrolls are maintained
- **Unemployment benefits increased \$600/week for four months**
- **New Treasury IG and Congressional Oversight Board**
- **State and Local Funds**
 - \$150 billion for state and local funds, including \$8 billion for tribal governments

Sources: PBS Newshour, CNN, The Wall Street Journal, The Hill, Vox

Slide last updated on: March 25, 2020

AOA Priorities Included in COVID-19 Legislation

Funding Highlights:

- \$1B for the Department of Defense to utilize the Defense Production Act;
- \$4.3B for the CDC, which includes \$1.5B for states, local government, and tribes to purchase equipment, support testing and surveillance, and \$1.5 billion for additional activities;
- \$100B for grants to hospitals and other public and not-for-profit entities, and institutional healthcare providers to cover unreimbursed health care expenses or lost revenue;
- \$16B for the Strategic National Stockpile for medical supplies; and,
- \$5.5B for vaccine development & acquisition.

Other Noteworthy Provisions:

- High-Deductible Health Plans with Health Savings Accounts (HSA) can cover telehealth services prior to patient reaching deductible;
- Patients can use funds in HSAs and FSAs to pay for over-the-counter medical products;
- Eliminates previous limitations on Medicare telehealth expansion authority;
- Allows FQHCs and RHCs to serve as distant sites for telehealth consultations, furnish telehealth services, and being reimbursed by Medicare;
- Limits liability for volunteer health care professionals; and
- Financial support for small businesses and non-profits.

Important Issues Not Addressed in COVID-19 Legislation

Issues on the Horizon:

- Paid sick leave for health care workforce;
- Mandated use of the Defense Production Act, and oversight of PPE pricing;
- Potential for additional funding for state and local health departments, and support for physician practices.

Issues Not Exclusive to COVID-19:

- Surprise Medical Billing;
- Prior Authorization;
- Multi-year reauthorization of THCGME and other public health programs; and,
- Expanded use of CMS Chronic Care Management codes.

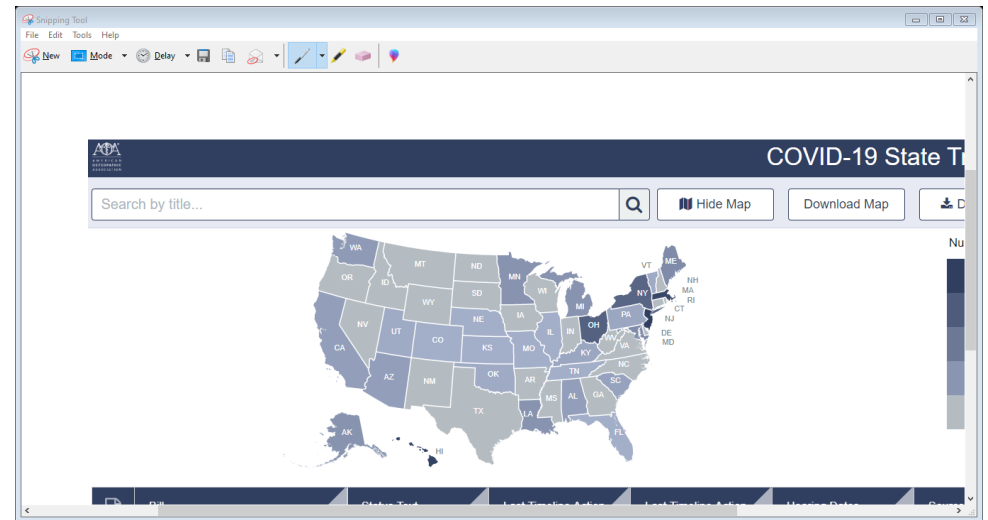


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GRASSROOTS UPDATE



AOA Public Policy and Advocacy Activities

- State COVID-19 legislative tracking page;
- AOA and coalition letters to the Administration and Congress;
- Online DO advocacy
- Facilitating DO participation in Congressional telephone town hall events; and,
- Personal policy and advocacy training



Hearing from you

ASSOCIATION



From the CEO

KEVIN KLAUER, DO, EJD
CHIEF EXECUTIVE OFFICER

Tell Us Your Story: How COVID-19 is impacting you

As osteopathic physicians, residents and students you are on the front line of the response to the COVID-19 pandemic. We need to hear from you about how this crisis is affecting your practice, your studies, or your personal lives.

The Administration, Congress and states are moving quickly to address this pandemic, and we need your help to provide them with a clear picture of what's happening on the ground and the gaps in coverage or resources that need to be filled. Your federal and state leaders need to know what frontline physicians, residents, and medical students are experiencing and what you need.

Please tell us how you are being impacted by the COVID-19 outbreak, Your stories will help us bring a clearer picture to government officials at all levels as we make recommendations on potential policy needs to help mitigate the impact of this pandemic.

We will not share your story with anyone without your expressed consent and we're happy to keep identifying info confidential at your request. Use the form to the right to share what's happening to you, and any suggestions you have for how we should move forward.

Act now!

Tell your story:

Submit

Grassroots Action – Online DO Advocacy

- March 19th DO Engage
 - 500+ e-mails asking members of Congress to address shortages in medical supplies such as surgical masks and personal protective equipment; address potential liability exposure; and, reauthorize critical programs such as the Teaching Health Center Graduate Medical Education (THCGME) program.



AMERICAN OSTEOPATHIC ASSOCIATION

GRASSROOTS: Tell Congress to Protect Physicians and Patients During the COVID-19 Pandemic

526 actions taken 74 needed to reach next goal

Send your lawmakers an email today!

Select Recipients 3 Recipients

Sen. Tim Kaine (D-VA)

Sen. Mark Warner (D-VA)

Rep. Gerry Connolly (D-VA-11)

Submit Selected Letters

Or edit letters before submitting

Sen. Tim Kaine (D-VA)

Subject

Senator Kaine, help keep our nation's patients and physicians safe

Grassroots Action – Online DO Advocacy

THE PPE SHORTAGE IS GETTING WORSE

COVID-19 ADVOCACY ALERT

Tell Congress to Protect Patients and Health Care Professionals Today



GRASSROOTS: Tell Congress to Ensure that ALL Americans are Protected During the Covid-19 Pandemic

2007 actions taken 993 needed to reach next goal

Send your lawmakers and email today!

3 Recipients

Select Recipients

Sen. Tim Kaine (D-VA)

Sen. Mark Warner (D-VA)

Rep. Gerry Connolly (D-VA-11)

Submit Selected Letters

Sen. Tim Kaine (D-VA)

Subject

Sen. Kaine, ensure all Americans are protected during the Covid-19 pandemic

Message

Sen. Kaine,

I'm writing you today as a constituent to ask that any legislative packages passed in response to the Covid-19 pandemic ensure that all Americans are protected from the virus. Healthcare workers across the country have been stepping up and providing the best care they can as hospitals, clinics and practices are overrun with individuals who have been infected by COVID-19 or believe they have been exposed in some way. While these workers are doing the best they can, I'm very concerned about reports from across the country and here in Virginia that healthcare workers don't have the support they need to treat patients while keeping them safe from the outbreak.



Grassroots Action – Online DO Advocacy



SOCIAL: Tweet your Lawmakers and Ask Them to Address the PPE Shortage Today

503 actions taken

97 needed to reach next goal

Safety for both patients and frontline physicians during the COVID-19 outbreak will be jeopardized if health care providers are not able to protect themselves. [Through your input](#), we know that osteopathic medical students, postdoctoral trainees, and physicians across the nation are facing a critical shortage in personal protective equipment (PPE) and other critical medical supplies. As our [advocacy efforts](#) to combat COVID-19 continue, it is important to keep the pressure on lawmakers to let them know that if physicians do not have access to PPE, the COVID-19 outbreak will get worse.

We know that you are on the front lines combatting this pandemic and saving lives. That is exactly why your lawmakers need to hear from you today. Please take the time to tweet each one of your lawmakers using our advocacy platform and tell them that physicians can't provide the appropriate care and help prevent the spread of COVID-19 without PPE.

If you do not use Twitter, but use other social media platforms such as Facebook, be sure to check out our [Social Media Advocacy Toolkit here](#). Within the toolkit, you will find advocacy tools, sample social media posts, graphics and more!

Tweet your lawmakers now!

You've already participated, but can do it again if you want!

Sen. Tim Kaine (D-VA)

@TimKaine Physicians can't provide care and prevent the spread of #COVID19 without #PPE. We need lawmakers to address shortages of medical supplies now. #GetMePPE

Send

Sen. Mark Warner (D-VA)

@MarkWarner The #PPEshortage is getting worse. It is time to invoke the Defense Production Act to protect physicians and the patients we serve from #COVID19.

Send

Rep. Gerry Connolly (D-VA-11)

@GerryConnolly The supply of PPE needs to drastically increase. The #COVID19 outbreak will get worse if physicians and other health care professionals aren't protected. #GetMePPE

Send

Governor Ralph Northam (VA)

@LGRalphNortham Now is not the time for partisan politics. We need lawmakers to rise above the fray to address the #PPEshortage. Without PPE, the #COVID19 outbreak will get worse. #GetMePPE

Send



Grassroots Action – Online DO Advocacy

Sonbol Shahid-Salles
Yesterday at 3:23 AM · 🧑

I need you to send a letter to your lawmakers today. The supply of personal protective equipment (PPE) needs to drastically increase. Without #PPE health professionals will be unable to treat patients appropriately. The #COVID19 outbreak will get worse if physicians and other health care professionals aren't protected.



THE PPE SHORTAGE IS GETTING WORSE

COVID-19 ADVOCACY ALERT

Tell Congress to Protect Patients and Health Care Professionals Today

OSTEOPATHIC.QUORUM.US

American Osteopathic Association
American Osteopathic Association

👍🙄😞 You, Alexis Cates and 30 others 7 Comments 5 Shares

👍 Like 💬 Comment ➦ Share

Mary-Margaret McCord Payne This is the response I got yesterday!



Like · Reply · 22h

Sonbol Shahid-Salles Mary-Margaret McCord Payne thanks! It's numbers that matters despite her somewhat negative reply - but if you have time to do what her letter says and write her directly thru her website that helps too! Thank you!

Like · Reply · 10h

Write a reply...

Bitva Honarvar Done
Like · Reply · 21h 1

↳ **Sonbol Shahid-Salles** replied · 1 Reply · 10h

Sara Salles done but makes me so angry that we have to do this!! total ignorance

Like · Reply · 10h 2

Sonbol Shahid-Salles Sara Salles yes, but continued pressure is important. Not only do we need PPE. We need their attention. We need vents too.

Like · Reply · 10h 1

Grassroots Action – Online DO Advocacy

 **Kevin Klauer DO, EJD** @Emergidoc · Mar 24

Call to Action: Address PPE Shortage
Tweet your lawmaker: Easy as 1 2 3 (Name, Address, Email) osteopathic.quorum.us/campaign/25299/
Email your lawmaker: Easy as 1 2 3 ((Name, Address, Email) osteopathic.quorum.us/campaign/25313/

#GetMePPE
@AOAforDOs

 American Osteopathic Association
American Osteopathic Association
osteopathic.quorum.us


1 13 18

 **Thomas Dardarian** @TDardarian · Mar 24

Physicians can't provide care and help prevent the spread of #COVID19 without personal protective equipment. Please join me in sending a letter to Congress asking them to address these shortages now.

 American Osteopathic Association
American Osteopathic Association
osteopathic.quorum.us

1 3

 **James Griffin, DO,**
FASA, FAOCA
Founding Member and President at South County Anesthesia Associates, LLC

Followers 1,079

[Following](#)

James' Activity

[All activity](#) [Articles](#) [Posts](#) [Documents](#)

 **James Griffin, DO, FASA, FAOCA** · 1st
Founding Member and President at South County Anesthesia Associates, LLC
13h · 🌐

Physicians can't provide care and help prevent the spread of #COVID19 without personal protective equipment. Please join me in sending a letter to Congress asking them to address these shortages now. <https://lnkd.in/d/assdUm>

THE PPE SHORTAGE IS GETTING WORSE

COVID-19 ADVOCACY ALERT

Tell Congress to Protect Patients and Health Care Professionals Today



American Osteopathic Association
osteopathic.quorum.us

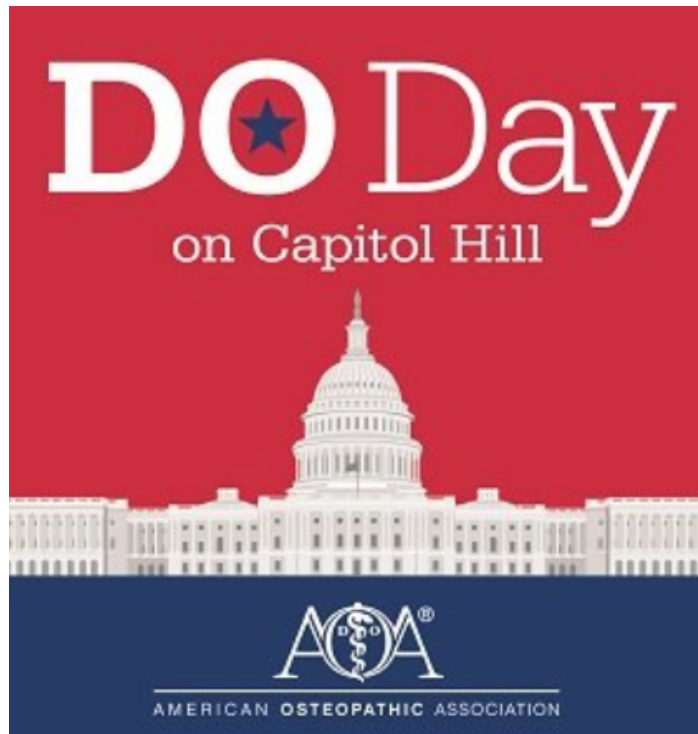
[Like](#) [Comment](#) [Share](#)

Grassroots Action – Virtual Townhalls



- For members of the Osteopathic Advocacy Network (OAN)
- Lawmakers holding virtual townhalls across the country
- AOA staff will provide training and materials for the participant
- Input from DOs to help identify gaps in legislation
- Interested? Join OAN at: <https://osteopathic.quorum.us/Grassroots/>

Grassroots Action – Virtual DO Day of Action



- A swell of advocacy activity on Tuesday, March 31st
- Encourage colleagues and networks to participate
- Send lawmakers emails
- Post on lawmakers social media
- Attend virtual townhalls
- Virtual DO Day toolkit provided

Next Steps

- Staff will continue to track and update information on CMS guidance, along with Medicare and Medicaid waiver information.
- Staff will also review the COVID-19 legislative package currently being negotiated.
- Gaps in legislation combined with outstanding patient and physician needs will inform next stage of policy requests and advocacy engagement.
- Efforts to educate members and support affiliates are ongoing.