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# ***IMA Wire***

**March 1, 2020**

## **SWIMS Election Nominations**

The Southwestern Idaho Medical Society (SWIMS) has four open board positions up for election (President, President-Elect, Treasurer and Secretary) in addition to the District Three Trustee position on the Idaho Medical Association (IMA) Board of Trustees. Current SWIMS board member, Christopher Partridge, MD has indicated his intent to seek election as SWIMS President and current SWIMS board member, Ralene Wiberg, MD has also indicated her intent to seek election as SWIMS President-Elect.

Physicians interested in running for any open positions are encouraged to submit their names for nomination by using this [survey link](#). **DEADLINE FOR SUBMISSIONS IS FRIDAY, MARCH 13, 2020.**

These board positions take action on policies, regulations, and legislation affecting physicians, their practices, the profession, and healthcare delivery in our state and represent all IMA and SWIMS physicians in the following counties: Adams, Boise, Canyon, Gem, Owyhee, Payette, Valley and Washington.

### Southwestern Idaho Medical Society (SWIMS)

The SWIMS Board positions have a minimal commitment to attend up to four (4) board meetings per year and as many SWIMS events as possible. We also ask that you strive to attend the IMA House of Delegates Annual Meeting in October as a SWIMS delegate for which there is a stipend to help cover costs.

### Idaho Medical Association (IMA)

For the District Three Trustee position, the IMA Board meets four (4) times per year. Two Board meetings are held in Boise; one in

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October and one in February. The third meeting (**and the first to attend for the newly elected Trustee**) is part of a **Board retreat which will be held April 24-26, 2020 at the Tamarack Resort** and the fourth meeting is during the IMA House of Delegates Annual Meeting in Sun Valley, October 9-11, 2020. All travel, hotel, and meal expenses in association with Board meetings are paid for and/or reimbursed per policy.

If you have any questions, please contact the IMA at 208-344-7888 or [sara@idmed.org](mailto:sara@idmed.org).

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## CMS Develops New Code for Coronavirus Lab Test

On February 13, the Centers for Medicare and Medicaid Services (CMS) took further action to ensure America's health care facilities and clinical laboratories are prepared to respond to the threat of the 2019-Novel Coronavirus (COVID-19). Specifically, CMS developed a new HCPCS code for providers and laboratories to test patients for SARS-CoV-2. This code will allow those labs conducting the tests to bill for the specific test instead of using an unspecified code.

Health care providers who need to test patients for Coronavirus, using the Centers for Disease Control and Prevention 2019 Novel Coronavirus Real Time RT-PCR Diagnostic Test Panel, may bill for that test using the newly created HCPCS code (U0001). The Medicare claims processing system will be able to accept this code on April 1, 2020, for dates of service on or after February 4, 2020. This means providers should wait until April 1, 2020 to submit claims with this new code.

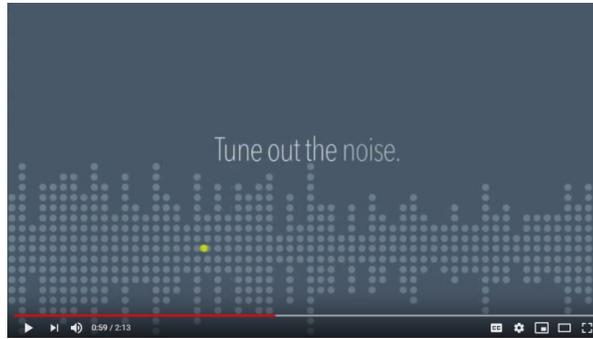
On February 6, 2020, CMS also gave CLIA-certified laboratories information about how they can test for SARS-CoV-2. Click [here](#) to read more about this information.

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## IMAFS Financial Tip: Coronavirus and the Stock Market

Recent fear and uncertainty surrounding the coronavirus, COVID-19, have caused disruption in the stock market. Shortly after a massive 31.49% gain for 2019 in the S&P 500, stock market indexes declined more than 10% this past week, pushing the market into correction territory. Naturally, investors may be alarmed by this sharp decline, especially if they closely monitor their accounts and the media. However, corrections are a natural part of the stock market, occur frequently, and should be expected. Working with a financial advisor who understands your risk tolerance and applies long-term investing principles may help mitigate any distress that accompanies volatility. At IMA Financial Services, we help investors tune out the noise and properly manage expectations.

Your IMA membership includes an initial no-cost tax evaluation with an IMA Financial Services advisor. Contact IMAFS today at 208-336-9066 or [IMAFS.org](http://IMAFS.org).



Click [this video](#) to view a short clip about tuning out the noise!

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### **Renew Your IMA Membership Online by March 31 to receive benefits for 2020!**

Easily renew your membership by following these steps:

1. Visit [www.idmed.org](http://www.idmed.org)
2. Select the 'Membership' tab
3. Select 'Join / Renew' and follow the prompts

Questions?

Please contact the IMA Membership team at 208-344-7888

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## **Billing Telehealth Services and eConsults**

Among the most frequent questions raised regarding telehealth is how an encounter is billed, followed by, "will it be paid?" Further complicating the situation is that reimbursement policies vary from payer to payer. IMA will include helpful information about telehealth reimbursement in the next few *Wire* editions.

Idaho's telehealth policy defines telehealth as: Health care services delivered by a provider to a participant through the use of electronic communications, information technology, synchronous interaction between a provider at a distant site and a patient at an originating site.

### **Medicare: eConsults or Interprofessional Consultations**

Medicare opted to initiate payment for interprofessional Consultations, or eConsults, in 2019. It does not consider an eConsult to be a "telehealth" service, but rather part of what it is calling "Special Care Management" codes. Note that FQHCs and RHCs cannot bill for eConsult under Medicare. The codes you will use to bill these services are:

99446-99449: "Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional (5 minutes through and over 31 minutes)."

99451: Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a written report to the patient's treating/requesting physician or other qualified health care professional, 5 minutes or more of medical consultative time.

99452: Interprofessional telephone/Internet/electronic health record referral service(s) provided by a treating/ requesting physician or other qualified health care professional, 30 minutes.

For guidance on who can bill for telehealth and what services are covered under Medicare, refer to the Medicare Learning Network (MLN) at [MLN Telehealth Services](#)

Coverage for telehealth and eConsults varies from plan-to-plan and how much you are paid depends on whom you bill for telehealth services and what services you provide. Check with your respective payers to determine what services they will cover. For further guidance, the Center for Connected Health Policy has published a comprehensive guide for coverage guidelines and billing for these services that can be found at [Billing for Telehealth Encounters: An introductory Guide on Fee-For-Service](#)

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## **Attention: Controlled Substance Registrants - PDMP Delegate List Review**

Is your Prescription Drug Monitoring Program (PDMP) delegate list up to date? The New Year is an opportunity to ensure the delegates assigned by you are still active and accurate. The delegate review helps ensure that delegate users of the Idaho PDMP are still authorized to perform searches on their supervisor's behalf. As a supervisor, you are responsible for activities performed within the system by your delegate(s). **Please take a moment to perform the delegate review by doing the following:**

1. Login to your [Idaho PDMP](#) account
2. From your Dashboard click "View All Delegates"
3. Review Delegates listed
4. If delegates are correct, take no further action. If a delegate should be changed, continue to step 5.
5. Select any delegate to remove.
6. Click on 'Remove'
7. Click on 'Reject'
8. Repeat steps 5, 6 and 7 until all unwanted delegates have been removed from the Delegate Management view.

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## **Prior Authorization for Certain Hospital Outpatient Department (OPD) Services**

Through the Calendar Year 2020 Outpatient Prospective Payment System/Ambulatory Surgical Center Final Rule (CMS-1717-FC), the Centers for Medicare and Medicaid Services (CMS)

established a nationwide prior authorization process and requirements for certain hospital outpatient department (OPD) services.

The following hospital OPD services will require prior authorization when provided on or after July 1, 2020:

- Blepharoplasty
- Botulinum toxin injections
- Panniculectomy
- Rhinoplasty
- Vein ablation

The full list of HCPCS codes that require prior authorization is available [here](#).

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### IMA Education Webinar Series

*Risk Management: Documentation risks as identified by a liability carrier*  
*Guest Speaker Kathy Kenady with MIEC (1 CEU)*

**Wednesday, March 18, 2020**

**12:15 – 1:15 pm (MT)**

Register today to join IMA Reimbursement Director Pam Fischer, CPC, COC, CPMA on Wednesday, March 18 for the next webinar, Risk Management: Documentation risks as identified by a liability carrier featuring guest speaker Kathy Kenady with MIEC (1 CEU)

Don't miss this valuable webinar! A registration form is available on the [IMA website](#). Questions? Contact the IMA at 208-344-7888 or [rebecca@idmed.org](mailto:rebecca@idmed.org).



This program has the prior approval of AAPC for (1) continuing education hours. Granting of prior approval in no way constitutes endorsement by AAPC of the program content or the program sponsor.

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## Study: Medication-Based Addiction Treatment Associated with Sharp Reduction in Overdose Deaths

Anti-opioid medication may be more effective in preventing overdoses and deaths from drug use than psychotherapy, according to [new research](#). Looking at data from nearly 50,000 adults who were treated for opioid use disorder between 2015-2016 at outpatient facilities in Maryland, researchers found that those who were given medications such as methadone or buprenorphine — which are used to treat opioid addiction — were 82% less likely to die of overdoses than those who only underwent therapy, which is most often offered as a treatment option. However, after being discharged from treatment programs, both sets of patients had an equally high risk — more than fivefold — of dying from overdoses. The authors therefore suggest that efforts to combat opioid addiction ought to ensure that those with opioid use disorder can access long-term medication-based treatment. [Chakradhar, *STAT*, 2/20]

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## **Bureau of EMS and Preparedness Conference: Medical Surge Events**

The Bureau of EMS and Preparedness is hosting the second annual Preparing for Medical Surge Events Conference May 14-16 in Sun Valley, Idaho. This year the focus will be burn considerations. EMS personnel and hospital-based clinical staff are invited to attend this multi-day conference focused on preparing for and responding to medical surge events in pre-hospital and hospital settings with special sessions on burn preparedness. The pre-conference workshop on May 14 will offer two different full-day trainings: ABLIS (offered for hospital-based providers only) and the University of Utah Burn Mass Casualty class (open to all). Spots are limited for the pre-conference workshops, so register soon! May 15-16 will offer traditional conference presentations and a burn simulation.

[Register and learn more about the conference](#)

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## **Burnout Prevention Tips of the Week**

Tip 1: What's the difference between a day where you're floundering and frustrated, and one that runs smoothly? The answer may lie in whether your practice has implemented pre-visit planning.

Implement pre-visit planning to reduce daily friction. Consider using a visit planner to review the next day's schedule of patients. This allows staff to prepare for vaccinations, additional tests, or room accommodation that may be necessary for some patients.

Tip 2: Schedule lab testing before visits to save follow-up time. Tired of a patient's care getting dragged out across multiple days and tasks? Completing lab testing ahead of the appointment closes the loop of care at the visit itself.

While pre-visit lab testing is recommended for all patients, it works especially well for preventive care and for chronic illness care, where you can predict which lab testing the patient will need and arrange for the lab to be completed a few days prior to the appointment.

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## **ECHO Idaho's Free Continuing Education Sessions**

Upcoming Behavioral Health in Primary Care Settings Sessions

Date: Wednesday, March 4, 2020

Time: 12 pm – 1 pm MT

Topic: Geriatric Psychiatry II

Featured Presenters: Megan Dunay, MD

Connection Information for all Behavioral Health in Primary Care ECHO Sessions

To join from PC, Mac, iOS or Android click [here](#).

Password: 208208

Upcoming Opioid Addiction and Treatment Sessions

Date: Thursday, March 12, 2008  
Time: 12:15 – 1:15 pm MT  
Topic: Regulatory Considerations for Treating Opioid Use Disorder  
Featured Presenter: Anne Lawler, JD RN

Connection Information for all Opioid Addiction and Treatment ECHO Sessions

To join from PC, Mac, iOS or Android click [here](#).

Password: 208208

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## **A Reminder about Idaho's Health Insurance Marketplace**

As Idaho's state-based marketplace, Your Health Idaho provides an online platform where Idahoans can shop, compare, and enroll in health insurance coverage. Your Health Idaho is also the only place where Idahoans can use a tax credit to help lower monthly insurance premiums and reduce out-of-pocket costs.

Although the open enrollment period for 2020 health insurance has ended, coverage may still be available for those individuals and families who experience certain Qualifying Life Events like moving, having a baby, or losing their existing coverage. If eligible, these life events allow individuals and families to enroll in coverage with Your Health Idaho with a Special Enrollment Period.

So, what does this mean for you as a physician? If you believe a patient or their family may have a Qualifying Life Event, direct them to the Your Health Idaho website where they can find more information and even get help for free from a Your Health Idaho-certified Consumer Connector. These insurance agents, brokers, and enrollment counselors can walk your patients and their families through the process and find a plan that is right for them, all at no cost.

For more information about Qualifying Life Events and how to get covered, visit [YourHealthIdaho.org/special-enrollment](http://YourHealthIdaho.org/special-enrollment).

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### **Idaho Medical Association**

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