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The laws, rules and regulations regarding the establishment and operation of a healthcare facility vary greatly from state to state and are constantly changing. Dr. Mario Fucinari does not engage in providing legal services. If legal services are required, the services of a healthcare attorney should be attained. The information in these seminar slides is for educational purposes only and should not be construed as written policy for any federal agency.

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About Dr. Mario Fucinari, DC, CCSP, APMP, CPCO, MCS-P

President, Mario Fucinari DC, MCS-P Consultants, LLC
 Certified Chiropractic Sports Physician (CCSP)
 Certified Professional Compliance Officer (CPCO)
 Certified Medical Compliance Specialist – Physician (MCS-P)
 Diplomate Academy of Integrative Pain Management (APMP)
 Post-Graduate Faculty, Palmer College of Chiropractic, Logan College, NYCC, Life West, NUHS, D'Youville College, Logan College, and Western States Chiropractic College
 Member, Medicare Carrier Advisory Committee
 National Speaker's Bureau for NCMIC, CHUSA and Foot Levelers
 Past ICS Chiropractor of the Year



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- Follow Dr. Fucinari on facebook for the latest in compliance, coding and Medicare.
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Disclaimer

We are not recommending
you open your practice
or that you should close.

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THIS IS NOT A DRILL



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**My Door Is
Always Open
Unless it is
Closed**

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**You Are Only As
Strong As Your
Weakest Link**

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Deaths Due to Virus

34,200
2018-2019
DUE TO FLU

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Deaths Due to Virus

61,099
2017-2018
DUE TO FLU

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Percentage of Influenza-related burden by age group, 2018-2019 Influenza Season

	Symptomatic Illnesses	Medical Visits	Hospitalizations	Deaths
0-4 years	10.2	14.7	5.2	0.8
5-17 years	21.6	24.1	4.3	0.6
18-49 years	33.5	26.7	13.6	7.2
50-64 years	26.0	24.0	20.0	16.6
65 and older	8.7	10.4	57.0	74.8

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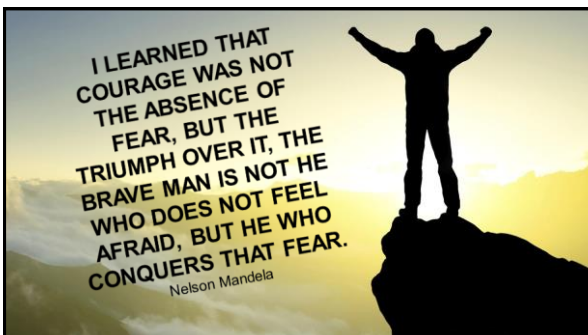
History teaches us the mistakes we are going to make

Jean Bodin
PICTURE QUOTES .com

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Three months of COVID-19 may mean 80,000 missed cancer diagnoses

Publish date: May 4, 2020
By Richard Frankl
Oncology Practice

More than 80,000 diagnoses of five common cancers may be missed or delayed by early June because of disruptions to health care caused by the COVID-19 pandemic, according to a report by the IQVIA Institute for Human Data Science.

Pandemic effect: Missed cancer diagnoses


Cancer Type	Estimated Missed or Delayed Diagnoses
Breast	36,000
Prostate	22,000
Colonial	18,000
Colonial	2,500
Uterus	450

Estimates of missed or delayed diagnoses if current low levels of testing continue for the entire 3 months ending June 3. Source: IQVIA Institute for Human Data Science. © Copyright 2020, Compliance Training, Mario Fuinani DC, CPOD. www.ademario.com 18

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Back Pain and Disability

- LBP is #3 cause of disability
- Back pain is a major cause for health care costs
- Total annual costs of low-back pain in the United States—including lost wages and reduced productivity—are more than \$100 billion.



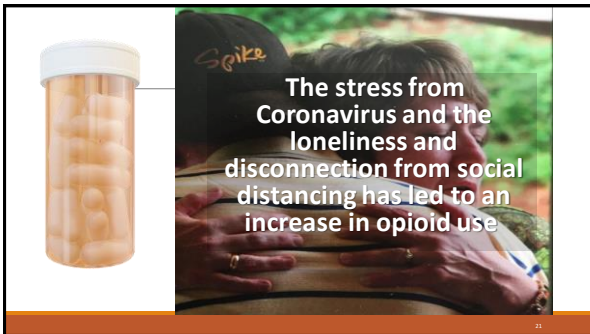
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DON T FORGET THE OTHER PANDEMIC



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The stress from Coronavirus and the loneliness and disconnection from social distancing has led to an increase in opioid use

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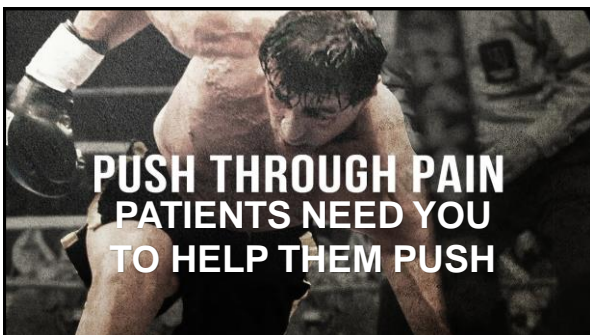
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PAIN VS FEAR

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PUSH THROUGH PAIN PATIENTS NEED YOU TO HELP THEM PUSH

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FOR IMMEDIATE RELEASE: March 31, 2020

Department of Homeland Security Identifies Chiropractors as Essential Service Providers

Arlington, Va. – Doctors of chiropractic are part of the essential critical infrastructure workforce, according to an advisory memorandum released on March 28 by the U.S. Department of Homeland Security.

The memo aims to give state, local, tribal and territorial governments guidance as they consider what actions to take in their communities to slow the spread of the novel coronavirus (COVID-19) while still maintaining critical industries and the workers who support them.

Authored by Christopher C. Krebs, director of Homeland Security's Cybersecurity and Infrastructure Security Agency (CISA), the memo lists specific workers in industries ranging from health care (public health, transportation, food and agriculture, information technology) and more "who conduct a range of operations and services that are typically essential to continued critical infrastructure capacity." The memo notes that the list is advisory in nature and should not be considered a federal directive or standard. CISA developed the list in collaboration with other federal agencies, state and local governments, and the private sector.

The need comes on the heels of a letter the American Chiropractic Association (ACA) wrote to Homeland Security earlier in March, urging the agency to include chiropractors in the list of essential healthcare providers. In it, ACA emphasized that, "Chiropractors are primary-contact healthcare providers who provide essential care, including but not limited to managing acute and urgent musculoskeletal conditions... These services are critical for managing cases that otherwise could end up in emergency rooms, representing an already difficult situation."

"Homeland Security's decision to include chiropractors on the list of essential healthcare workers is validation of the important role they play in enhancing the health and function of their patients, who in turn often work in industries that are critical to local communities," said ACA President Robert C. Jones, DC.

To read the Homeland Security memorandum in full, [click here](#).

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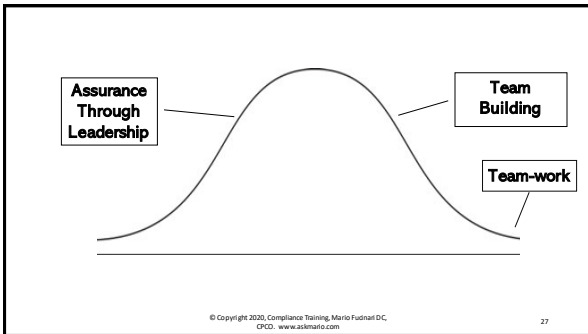
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THE PLAN FOR RENEWAL

The New World Order

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A Glimpse of the Post-Coronavirus World

- “Governments of all types will adopt emergency measures to manage the crisis, and many will be loath to relinquish these new powers when the crisis is over.”
- Citizens look to national governments to protect them as states and firms seek to reduce future vulnerabilities.

“How the World Will Look After the Coronavirus Pandemic,” Stephen Walt, March 20, 2020. (Professor of International Relations at Harvard University)
<https://foreignpolicy.com/2020/03/20/world-order-after-coronavirus-pandemic/>

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GUIDELINES
OPENING UP AMERICA AGAIN

Therefore, if states or regions have passed the **Gating Criteria** (symptoms, cases, and hospitals) announced on April 16, 2020, then they may proceed to Phase 1.

<https://www.cms.gov/files/document/covid-flexibility-reopen-essential-non-covid-services.pdf>

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GUIDELINES
VULNERABLE INDIVIDUALS **OPENING UP AMERICA AGAIN**

1. Elderly individuals.
2. Individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune system is compromised such as by chemotherapy for cancer and other conditions requiring such therapy.

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Gating Criteria – Satisfy Before Proceeding

Symptoms	Cases	Hospitals
Downward trajectory of influenza-like illness reported within a 14-day period AND Downward trajectory of COVID-like syndromic cases reported within a 14-day period	Downward Trajectory of documented cases within a 14-day period. OR Downward trajectory of positive tests as a percent of total tests within a 14-day period (Flat or increasing volume of tests)	Treat all patients without crisis care. AND Robust testing program in place for at-risk health care workers, including emerging antibody testing

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Guidelines for ALL Phases

Individuals	Employers
<ul style="list-style-type: none"> Adhere to State and local guidelines Follow CDC guidelines Wear face coverings in public Wash hands with soap and water or hand sanitizer Avoid touching face Disinfect items frequently 	<ul style="list-style-type: none"> Adhere to State and local guidelines Follow CDC guidelines Social distancing and PPE Temperature checks Sanitation Wear face coverings in public Wash hands with soap and water or hand sanitizer Avoid touching face Disinfect items frequently

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Phase ONE Gating Criteria Met

Individuals	Employers
<ul style="list-style-type: none"> Vulnerable Individuals shelter in place. Isolate individuals from vulnerable individuals When in public maximize social distancing Always wear a face mask Minimize travel 	<ul style="list-style-type: none"> Encourage Telework Return to work in phases Close Common Areas such as break rooms Minimize non-essential travel Special accommodations for vulnerable population

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Phase TWO Gating Criteria Met Again

Individuals	Employers
<ul style="list-style-type: none"> Vulnerable Individuals shelter in place. Isolate individuals from vulnerable individuals When in public maximize social distancing Always wear a face mask Non-Essential travel CAN resume 	<ul style="list-style-type: none"> Encourage Telework Return to work in phases Close Common Areas such as break rooms Minimize non-essential travel Special accommodations for vulnerable population

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Phase THREE Gating Criteria Met Again

Individuals	Employers
<ul style="list-style-type: none"> Vulnerable Individuals can resume public interactions Minimize time spent in crowded environments 	<ul style="list-style-type: none"> Resume unrestricted staffing of worksites

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GUIDELINES

OPENING UP AMERICA AGAIN

Non-COVID-19 care should be offered to patients as clinically appropriate and within a state, locality, or facility that has the resources to provide such care and the ability to quickly respond to a surge in COVID-19 cases, if necessary. Decision should be consistent with public health information and in collaboration with state public health authorities. Careful planning is required to resume in-person care of patients requiring non-COVID-19 care comma and all aspects of care must be considered.


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Step One: Reboot the Office

Whether reopening or ramping up,

- have a vision; 
- solicit suggestions and concerns from your staff;
- have a *cohesive* plan;
- be flexible; and
- DOCUMENT EVERYTHING!

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Reboot the Office

Have a meeting with ALL staff

- Consider social distancing.
 - Zoom, Skype, Webex, Microsoft Teams
- Start at the top
 - Doctor(s) must be present
 - Show your personal side. Health and welfare of the staff and patients is showing vulnerability, listening more than talking. Encourage, praise, and thank people across the company.
 - Make sure you can explain why the practice exists and what it is trying to accomplish. i.e. The Mission Statement aligns everyone.

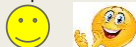
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Reboot the Office

- Deal with the issues raised by employees, don't hide from them. When sensitive topics arise, run to the fire, not away from it.
- What work can be done remotely, keeping HIPAA in mind. Enable continuity of operations.
 - GoToMyPC Secure or other software
 - Each person has a unique **STRONG** password
 - Make sure you have a VPN on your devices
- Have a method to praise one another for a good job.



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Reboot the Office

- When you have a hybrid meeting (remote and in-person) always invite the remote person into the conversation
- If food is in the meeting at the office, consider having food delivered to the remote person.
- Develop a plan, try it for a day, then everyone meets the next day to see how it went.

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Prepare

- Look at your physical desk. Are there any physical files you need to take with you? Do you need the phone number of the help desk in case you can't get access to the network from home? NPI #? PTAN#?
- If you'll be using your mobile phone and video conferencing, you will also want to make sure you have a headset and maybe an external webcam, allowing you to position them to appear more professional.

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Prepare

- Pull out those rules and procedures you wrote up to deal with emergencies and crises. Will instructions go out over an office email, or a group text message? How will you communicate so that all employees get the message?
- Now is the time to lay this foundation for how you will continue your business operations.

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Business Resumption Plan

- Known exposures
- Plan Declaration
- Staff Shift Schedule
- Communication Plan
- Activation of Team
- Employee Contact Information
- Vendor Notification
- Work-Around Procedures
- Off Site Restore Procedures

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General Considerations

- Evaluate the incidents and trends for COVID-19 in the community by observing with state and local public health officials
- Evaluate the necessity of the care in your clinic. Prioritize acute cases , chronic case management , and preventive services.

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General Considerations

- Consider establishing non-COVID-19 Care zones and procedures that would screen all patients for symptoms of COVID-19, including temperature checks.
- Staff should also be routinely screened, as with others who work in the facility, such as cleaning crews, maintenance crews, and delivery personnel.
- Sufficient resources should be available to the facility, including cleaning supplies and PPE, without jeopardizing protective care.

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Known Exposures

- Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus.
- The best way to prevent and slow down transmission is to be well informed about the COVID-19 virus, the disease it causes and how it spreads. Protect yourself and others from infection by washing your hands or using an alcohol-based rub frequently and not touching your face.

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Known Exposures

- The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes, so it's important that you also practice respiratory etiquette (for example, by coughing into a flexed elbow).
- Currently, there are no specific vaccines or treatments for COVID-19. However, there are many ongoing clinical trials evaluating potential treatments. WHO, CDC, and our office will continue to provide updated information as it becomes available.

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Policies

"The set of basic principles and associated guidelines, formulated and enforced by the governing body of an organization, to direct and limit its actions in pursuit of long-term goals."*

*Business Dictionary, Businessdictionary.com

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Procedures

"A fixed step-by-step sequence of activities or course of action...that must be followed in the same order to correctly perform a task."*

*Business Dictionary, Businessdictionary.com

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Policy Example

We will monitor and follow CDC guidelines, and train staff on proper techniques to decrease the exposure and spread of Coronavirus.

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Procedure Example

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/workplace-school-and-home-guidance.pdf>

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Procedure Example:

ALL STAFF WILL ABIDE BY THE FOLLOWING:

- Purchase and use gloves, face masks, bleach
- Tables will be thoroughly cleaned by staff after each patient with disinfectant
- Hands will be thoroughly washed with soap and water.
- Hand Sanitizer will be used by all staff upon entering the treatment room, and before setting up the patient for therapy.
- The use of face pillows in therapy will be discontinued.

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Procedure Example:
ALL STAFF WILL ABIDE BY THE FOLLOWING:

- Patients who appear to be sick or indicate they may have traveled outside of the area are to be triaged over the telephone and must wear a face mask, while in the office
- Schedule of cleaning with bleach of counter tops, computers, door handles, and telephones
- Hand shaking with patients will be discontinued
- Assure patients and staff with a statement produced by Dr. XXXXX and post on website and office Facebook page

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Procedure Example:
ALL STAFF WILL ABIDE BY THE FOLLOWING: April 13, 2020

- For visitors and patients, a cloth face covering may be appropriate. If a visitor or patient arrives to the healthcare facility without a cloth face covering, a facemask may be used for source control if supplies are available.
- Actively screen everyone for fever and symptoms of COVID-19 before they enter the healthcare facility. Schedule of cleaning with bleach of counter tops, computers, door handles, and telephones

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Recommendations

- To prevent COVID-19, it is safest to **avoid physical contact** when greeting. Safe greetings include a wave, a nod, or an elbow bump.
- **Washing hands with warm water and soap** offers more protection against catching COVID-19 than wearing rubber gloves. Wash hands before and after each patient, but also use hand sanitizer *in front of the patient*, upon entering the room.
- **Face masks** are always to be worn when in the office. Washable face masks have been provided to you. You can also use your own crafted masks, if approved by the doctor or office manager. Masks are to be changed between patients. Always wash hands prior to putting on and taking off the face mask.




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State Recommendations

FACE COVERINGS: Requiring any individual who is over age two and able to medically tolerate a face-covering shall be required to cover their nose and mouth with a mask or cloth face-covering when in a public place and unable to maintain, or when not maintaining, social distance.




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Recommendations

How to Put On (Don) PPE Gear

- Perform hand hygiene using hand sanitizer
- Put on face mask or shield
- Perform hand hygiene before putting on gloves



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Recommendations

How to Take Off (Doff) Gear

- Ensure glove removal does not cause additional contamination of hands,
- Use glove-in-glove or bird beak technique
- Perform hand hygiene using hand sanitizer
- Do NOT touch front of mask
- Dispose of items properly



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OSHA

- Training is required
- Manual Provided at:
<https://www.osha.gov/Publications/osha2254.pdf>
- It's the Law Poster
<https://www.osha.gov/Publications/osha3165.pdf>

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Exposure Control Plan (ECP)

- Must identify hazards in which hazards to occupational exposure may occur
- Must show methods the practice will use to protect the employees and comply with OSHA requirements
- A practice is required to develop, implement, and maintain a "Written Hazard Communication Program."

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<https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID19-symptoms.pdf>

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<https://www.cdc.gov/coronavirus/2019-ncov/downloads/stop-the-spread-of-germs.pdf>

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OSHA
Job Safety and Health
IT'S THE LAW!

All workers have the right to:

- A safe workplace.
- Receive information and training about OSHA, or about OSHA standards or rules, concerning workplace safety.
- Receive information and training on OSHA standards and OSHA's enforcement process.
- Receive a copy of OSHA's explanation of your workplace if you believe there are possible safety or health hazards. You have the right to see OSHA's citation and OSHA's proposed penalties.
- Participate in OSHA's representative consultation or OSHA's representative and OSHA's enforcement process.
- File a complaint with OSHA within 30 days of the date you were notified of a possible safety or health hazard in your workplace.
- See any OSHA citation issued at your workplace.
- Receive copies of OSHA's standards and OSHA's enforcement process.

Employers must:

- Provide a safe workplace free from recognized hazards.
- Comply with all applicable OSHA standards.
- Notify OSHA within 30 days of any new hazard.
- Provide a copy of OSHA's explanation of your workplace if you believe there are possible safety or health hazards.
- Participate in OSHA's representative consultation or OSHA's representative and OSHA's enforcement process.
- File a complaint with OSHA within 30 days of the date you were notified of a possible safety or health hazard in your workplace.
- See any OSHA citation issued at your workplace.

Contact OSHA. We can help.
1-800-371-2791 (toll-free) • TTY: 1-202-691-5501 • www.osha-slc.gov

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OSHA
Job Safety and Health
IT'S THE LAW!

All workers have the right to:

- A safe workplace.
- Raise a safety or health concern with your employer or OSHA, or report a work-related injury or illness, without being retaliated against.
- Receive information and training on job hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection.

Employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related injury or illness.
- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related fatality.

Post in Break Room

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1918.95(a) *Washing and toilet facilities.*

(1) Accessible washing and toilet facilities sufficient for the sanitary requirements of employees shall be readily accessible at the worksite. The facilities shall have:

- (i) Running water, including hot and cold or tepid water, at a minimum of one accessible location (when longshoring operations are conducted at locations without permanent facilities, potable water may be provided instead of running water);
- (ii) Soap;
- (iii) Individual hand towels, clean individual sections of continuous toweling, or air blowers; and
- (iv) Fixed or portable toilets in separate compartments with latch-equipped doors. Separate toilet facilities shall be provided for male and female employees unless toilet rooms will be occupied by only one person at a time.

(2) Washing and toilet facilities shall be regularly cleaned and maintained in good order.

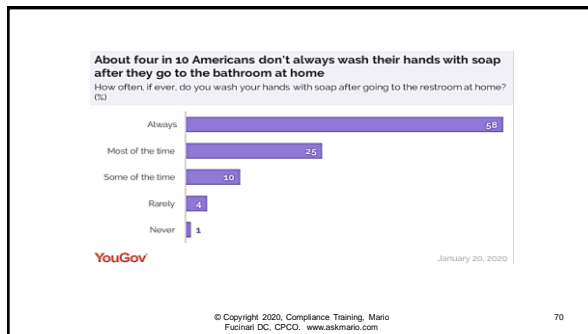
(b) *Drinking water.*

- (1) Potable drinking water shall be accessible to employees at all times.
- (2) Potable drinking water containers shall be clean, containing only water and ice, and shall be fitted with covers.
- (3) Common drinking cups are prohibited.

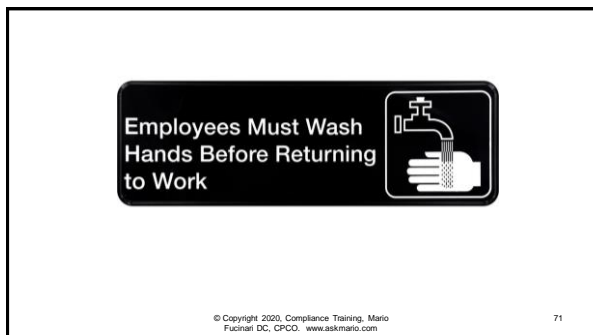
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Recommendations

- A diluted bleach solution has been provided to you. All surfaces, including door handles, counter tops, tables, chair rails, and therapy equipment, are to be cleaned thoroughly between each patient.
- It is recommended to don and doff gloves and face masks as trained. (See video)
- Lab coats, ties and other clothing that may brush against the patient are to be not worn or bring a change of clothes to change into street clothes. You may use the office washing machine and dryer for clinic clothes, so as not to contaminate your home by bringing them home.
- Covering for tables, such as plastic (shower curtain)

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Recommendations

- Clean pens with bleach or other disinfecting agent
- Avoid clipboards or having patients carry a chart or travel card
- No kiosk check-in
- Prop doors open if possible and/or clean with bleach solution

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Recommendations

Note: Do not claim, allude to, or state, that your care or recommendations may prevent or cure the COVID virus

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Staff Shift Schedule

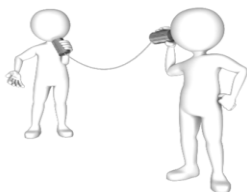
- Key personnel brought back into the office shall include _____ .
- Hours of operation? Altered duties?
- How are you monitoring staff for symptoms? Yourself? Document
- Scheduling of patients.
 - Emergencies? maintenance care?
 - New Patients?
 - Patient appointment interval?
- Triage of patients
 - Scripts to determine infection? Affected patient contact? Quarantine?
 - Dates of infection or contact and release by PCP should be recorded prior to the appointment

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YOUR COMMUNICATION PLAN



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Staff Communication Plan

- Key person to determine staff scheduling, personnel training, mode of communication (cell number, text?)
- Document any communication with staff.
- Document all names of staff, when called back in office, payroll amounts (SBA loan?)

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HIPAA COMPLIANCE

- Patient Emergency Contact Information
 - Update at least annually
- Alternate Contacts?
- Voice Mail Restrictions

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Patient Communication Plan

- Scheduling of patients
- Appointment interval
- Social media announcing your status
- Email, text, telephone calls, as allowed in your HIPAA plan
- Document any communication with patients
- Train and re-train all staff!
- Document what webinars you have taken in this matter
- Print guidelines from CDC

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Telemedicine

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Telemedicine and HIPAA

- Policies and Procedures
- Mode of communication
- Location of conferencing
 - Point of origin of provider
 - Point of origin of patient (must be in state of licensure)
 - Location of equipment? Public access?

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The HIPAA
Privacy
Notice

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL/PROTECTED HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Summary:
By law, we are required to provide you with our Notice of Privacy Practices (NPP). THIS NOTICE DESCRIBES HOW MEDICAL/PROTECTED HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

As a patient, you have the following rights:

1. The right to request and copy your information;
2. The right to request corrections to your information;
3. The right to request that your information be restricted;
4. The right to request confidential communications;
5. The right to a report of disclosures of your information; and
6. The right to a paper copy of this notice.


We want to assure you that your medical/protected health information is secure with us. This Notice contains information about how we will ensure that your information remains private.

If you have any questions about this Notice, the name and phone number of our contact person is listed on this page.

Effective Date of this Notice	
Contact person	
Phone Number	

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Telehealth
Consent
Notice

Patient Consent to Telehealth Services

Telehealth services involve the use of electronic communications to enable health care providers to deliver health care services to patients, their relatives, close and other contacts. The documents outline the patient's liability and risks associated with telehealth services and confirm your consent to the use of telehealth services for your healthcare.

I understand the following:

1. The laws that protect the confidentiality of my personal information also apply to telehealth.
2. I have the right to withdraw or withhold my consent to the use of telehealth at the discretion of my care at any time, without affecting my right to future care or treatment.
3. The terms and conditions of care that would apply to my treatment will also apply to telehealth.
4. My health care information may be shared with other individuals for screening and/or program purposes.
5. There are certain risks associated with telehealth, including those related to privacy and security.
6. I understand the risks of telehealth, including the possibility of data security breaches, and I consent to the use of my personal health information for the purposes of telehealth services.
7. I am responsible for any out-of-pocket costs such as equipment or consumables that apply to my telehealth use, and I understand that health plan payment policies for telehealth may be different from those for in-person visits or my health record.
8. The information will remain confidential.

I hereby give my informed consent for the use of telehealth services by my health care. I have personally read the form or had explained to me and fully understand and agree to its contents. My questions about telehealth services have been answered to my satisfaction, and the risks, benefits, and alternatives to telehealth services have been explained to me in a language I understand. I am satisfied and will remain in the state of _____ (state by telehealth jurisdiction).

Patient Signature _____	Date _____
Provider/Staff Signature (if applicable) _____	Date _____
Witness Signature _____	Date _____

https://s3.amazonaws.com/chirogroup-assets/clin/cu/form/files/cf4a874c-5a3b-46ca-8e9f-1569523c6699.pdf 84

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Source:
Tim Bertlesman, DC, DACO
www.ChiroUP.com
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Advantages of Telehealth

- **Safety.** When you and your patient are face-to-face, you can spend time with the patient, without exposing each other to the risk of infection.
- **Consultation of the future.** You, or your staff, can easily communicate with the patient to get “pre-check-in” information and triage the patient for complications and co-morbidities that may prohibit them from coming into the office.
- **Increased efficiency and cost effectiveness.** Connect using multiple platforms (Zoom, Skype, Facetime) that may be available to you and your patients for free.
- **Location.** Staff can work from home. Patient can be interviewed from home.

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Disadvantages of Telehealth

- **Access may be limited.** In rural areas internet may be limited. Patients may be disadvantaged due to disabilities, income, or religious restrictions.
- **Emotionally distant.** Doctors and/or patients may not be as comfortable with this mode of communication. Not the best medium for a NEW patient.
- **Staff Communication.** What happens if the doctor is running behind?
- **Limited services.** Manipulation and others “hands-on” procedures are severely limited.
- **HIPAA Privacy.** Security risks must be addressed. “Zoom bombing”
- **Reimbursement.** Is telemedicine for chiropractors reimbursed? Are the reimbursement policies just temporary? The future of Medicare?

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Section 1557 of PPACA

- Section 1557 is intended to promote equity in health care and prevent discrimination on the basis of race, color, national origin, sex, age or disability in health programs or activities that receive federal financial assistance.
- Compliance requires posting certain notices in your office and there are consequences for failure to do so if you are not exempt.

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At Risk Individuals

- Children
 - Elderly persons
 - Persons from diverse cultural origins
 - Individuals with disabilities
 - Individuals with limited English proficiency
- www.cdc.gov/coronavirus/2019-ncov/downloads/community-mitigation-strategy-spanish.pdf
- Persons who live in institutionalized settings
 - Persons who do not have access to transportation

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Virtual Encounter Procedures

- Patient is pre-screened and scheduled for their telemedicine appointment
- Give them a link, passcode, and password, and time to log into for their appointment
- Update insurance information
- Update chief complaint(s), history, new injuries, flare-ups, surgeries, change in medications
- Exposure to COVID-19? Self? Family? Quarantined?

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Day of Virtual Encounter Procedures

- Patient and staff logs into their telemedicine appointment
- Update chief complaint(s), pain scale, COVID-19 status, any other changes?
- Patient is placed in virtual waiting room
- Doctor logs in
- Nature of encounter SOAP and time is documented
- CPT code is applied

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Billing for Telemedicine Procedures

- Check your State Law, Board of Examiners' Guidelines and carrier requirements and guidelines PRIOR to rendering the service
- Report these services with **PLACE OF SERVICE 02 (telehealth)** on the claim, or per carrier guidelines
- Modifier -95 Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System, or per carrier guidelines

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CPT	Description	Total REVU
99211	Evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.	.18
99212	Evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 10-19 minutes of total time is spent on the date of the encounter.	.48
99213	Evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	.97
99214	Evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter.	1.5

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99441	Physician/Qualified Health Professional telephone evaluation 5-10 min	.25
99442	Physician/Qualified Health Professional telephone evaluation 11-20 min	.50
99443	Physician/Qualified Health Professional telephone evaluation 21-30 min	.75
99421	Physician/Qualified Health Professional online digital evaluation 5-10 min	.25
99422	Physician/Qualified Health Professional online digital evaluation 11-20 min	.50
99423	Physician/Qualified Health Professional online digital evaluation 21-30 min	.80

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Vendor Communication

- Order supplies – cleaning products and paper supplies, masks, gloves, disinfectant spray, headrest paper, supplements
- Check expiration dates of supplements
- Check refrigerator! No old items that may be harboring the virus!

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If vendors or service contractors enter the office, what is your policy for reduction of COVID-19 exposure?

- Face masks
- Gloves
- Booties

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**DOCUMENT,
DOCUMENT,
DOCUMENT**

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**Documentation Must
Be Legible**

doctors' strike



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**Did You Make A
Good Faith Effort
to be Compliant?**

Prove it!



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Required Compliance Documents

- Corporate Compliance Manual
 - Policies and Procedures
 - Non-Retaliation Policy
 - Non-Harassment Policy
 - Staff Training Required
- HIPAA Manual
 - Privacy Policy
 - Business Associate Agreement
 - Staff Training Required

See Manuals at www.AskMario.com




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Questions?



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Additional Resources

www.coronavirus.gov

www.osha.gov

www.us-cert.gov

<https://www.hhs.gov/hipaa/for-professionals/special-topics/hipaa-covid19/index.html>

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If you have questions...

- www.NCMIC.com
- www.AskMario.com
- Manuals at Askmario.com
- E-mail: Doc@AskMario.com

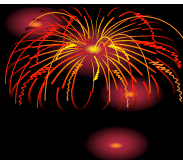


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**Thank
You!!**



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