

NC AHEC PRACTICE SUPPORT

Quality Improvement Tips: Improving Financial Health During COVID-19

During this national emergency, practices are experiencing rapid growth of patients wanting to cancel appointments due to fear of COVID-19. Keeping your patients safe is the upmost importance but keeping your practice financially healthy is important too. We've listed some ideas below on ways to be smart about methods your patients can seek care during this pandemic.

Moving from Face-to-Face to Virtual:

- 1. Proactively Change Scheduled Appointments to Virtual or Telehealth Visits
 - **a.** Assign a front desk staff member to call the patient one week ahead of the appointment. During this phone call, they can use a script to help explain that the appointment will be virtual and assist the patient in understanding what type of virtual media they have available to use. Be sure your staff member:
 - i. Let's the patient know that your office is proactively confirming their patient appointment and offering the change to a virtual or telehealth visit to prevent exposure of coronavirus to healthy patients.
 - **ii.** Confirms their Current Active Insurance (to be sure the type of telephonic or audio/visual visit matches what is covered)
 - **iii.** Confirms which virtual media the patient has available to use (note that simple cell phone apps, Facetime, Skype are acceptable technologies)
 - *iv.* Test the patient's connection software to be sure it is working. (Can be done during this time or during the first visit)
 - **v.** Answers any questions the patient has about using virtual technology.
 - **vi.** Obtains verbal (allowed during COVID-19) or written consent for the visit, consent must be documented in the patient's record.
 - **b.** Provide a FAQ sheet for patients to answer the most common questions about having a virtual or telehealth visit.
- **2.** Advertise on your social media page, website, and in office that you will be offering virtual visits as a safe alternative to coming into the office.
- **3.** Train your front desk staff to offer virtual visits as an option when a patient calls to cancel their appointment.
- **4.** Ensure staff are fully educated on the types of appointments that are eligible for virtual health. Note that virtual or telehealth delivery has been expanded by payors to include new and established patients, well/sick/follow up and transitions of care appointments but first confirm with payors.
- **5.** Consider extracting patient lists from your EHR and target particular population groups for proactive scheduling via telehealth.

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- **6.** Know that you do not need sophisticated equipment or virtual health platforms. Telephonic or audio/visual via Skype/Facetime and cell phone are allowed for both patient and provider. If a virtual health platform is needed, know that free or inexpensive platforms are available.
- **7.** Check with your EHR vendor to see if there are technical capabilities, some EHR vendors offer telehealth options.

Patient Care Utilization in the Office:

- 1. Consider opening the office for half a day in the morning and only see patients during that time for routine wellness and chronic disease management visits, then wipe/down & disinfect the office and open the office up in the afternoon for only sick visits. This way, patients may feel more comfortable coming into the office.
- 2. Consider triaging patients with respiratory illness via a side door with access to dedicated exam rooms while all other sick patients enter via the front entrance.
- 3. Open up the types of visits eligible for telehealth (wellness exams, follow-up appointments, chronic disease management, prescription refills, urgent care appointments).
- 4. Consider flexing provider hours so that urgent care hours are available in the early morning, evening, weekends to generate additional access and revenue.
- 5. Create a pre-visit screening protocol.
- 6. Offer check-in from the car.
- 7. Create a protocol for your healthcare staff/providers on moving to all virtual/telehealth visits when they are in the situation that they have to be in self quarantine. If they are feeling up to seeing patients, this can be the time that they do virtual/telehealth visits or for nurses, do the phone call pre-screenings.
- **8.** Post a patient flyer on the front door, website and/or social media page that outlines their visit options during the Coronavirus outbreak.

Financial Health Resources:

- 1. **COVID-19 Golden LEAF Foundation Loan Program for NC Small Businesses**: The NC Rapid Recovery Program launched loans for small businesses including healthcare providers. The loans are granted up to \$50,000. 0 interest, no payments for 6 months. Click Here: https://ncrapidrecovery.org/
- SBA Disaster Loans Emergency Disaster Loans: The U.S. Small Business Administration has granted a
 disaster declaration covering all North Carolina counties, allowing affected businesses to apply for low
 interest SBA disaster loans. Click Here: https://www.sba.gov/disaster-assistance/coronavirus-covid-19
- 3. CDC Maintain Healthy Business Operations Information. Click Here: https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html
- 4. AMA- Article, "Tips for keeping your practice in business during the COVID-19 pandemic"

 https://www.ama-assn.org/delivering-care/public-health/tips-keeping-your-practice-business-during-covid-19-pandemic

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Recruit, Train, and Retain: Developing the workforce for a healthy North Carolina