

## **Preparing for Post-COVID-19 Operations: Healthcare Practices**

In response to the coronavirus disease 2019 (COVID-19) pandemic, many healthcare providers have temporarily closed their office practices or significantly reduced in-office services. In the weeks and months to come, as the pandemic begins to recede, providers will likely have questions about how best to reopen. The unprecedented nature of the COVID-19 outbreak might make navigating this process confusing and stressful.

MLMIC Insurance Company (MLMIC) and MedPro Group (MedPro) wish to offer guidance and important actions to consider as you develop your reopening strategy. Although this checklist is not all-inclusive, and practices vary, the information in this document provides a roadmap that you can use as you progress toward reopening and evaluating lessons learned as a result of the pandemic.

MLMIC and MedPro remain steadfast in our commitment to supporting insureds through this difficult time. Please contact us at (800) 275-6564 (MLMIC) with any questions or concerns.

Preparing to Reopen	
Offer condolences to families of patients and staff who died as a result of the COVID-19 pandemic.	
Confirm with local public health officials that permitting patient office visits beyond emergencies is advisable.	
Assess local hospital, specialty care, home care, pharmacy, and durable medical equipment service readiness.	
Check for updated information from the Centers for Disease Control and Prevention (CDC), Occupational Health and Safety Administration (OSHA), Centers for Medicare & Medicaid Services (CMS), The New York State Department of Health (health.ny.gov), and other authoritative and regulatory agencies on a daily basis for updated recommendations.	
Notify your professional liability carrier about changes to practice (e.g., resuming full-time service, returning to original scope of practice, or permanently adding telehealth services).	
Contact OSHA authorities for mandatory reporting of employee exposure to COVID-19 that results in a positive test. See OSHA's <b>Enforcement Guidance for Recording Cases of Coronavirus Disease 2019</b> (COVID-19).	
Consult with accountants and financial advisors in regards to loans, advance payments, and other healthcare practice financial programs.	
Review changes to billing procedures and billing codes for health insurance plans that the practice accepts.	

Confirm readiness of office support service providers (e.g., regular cleaning crew, laundry service, specimen collection, and lab analysis).	
Establish employee screening processes for COVID-19 (including guidance for self-monitoring for symptoms), and follow CDC guidelines regarding assessment of staff eligibility to return to work.	
Ensure that the office has sufficient personal protective equipment (PPE) to allow staff to perform their job functions in a safe manner.	
Establish one-way ingress/egress routes for office visits, if possible.	
Create a telephone triage process to prioritize patients' needs for office visits.	
Establish a triage system for patients who require office visits. Prioritize appointments for patients who have the lowest risk of COVID-19 and have the greatest clinical care needs.	
Establish patient screening processes for COVID-19. Plan to maintain telehealth appointments for any symptomatic patients until they are well for at least 2 weeks.	
Tailor your telehealth practice to evolving guidelines from the Office of Inspector General, U.S. Department of Health and Human Services.	
Preparing the Office for Patients	
Testing and Maintenance	
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<ul> <li>Consider adjustments to normal office processes based on lessons learned.</li> </ul>	
Evaluate whether your office is prepared to handle a second wave of COVID-19 infections:	
• Determine whether the medications that the practice uses are available.	
<ul> <li>Identify whether a patient prioritization and communication plan is in place.</li> </ul>	
Communicate pertinent plans with all staff members as soon as possible.	
Consider modifications to the office practice physical plant (e.g., adding a dirty utility room, second exit, or another restroom; evaluating sterilized vs. disposable tools/supplies; etc.) and develop a plan for updates.	
Infection Control	
Review CDC's guidance for <b>cleaning and disinfecting your facility</b> , and properly sanitize the office before reopening:	
Review the cleaning vendor contract for expectations.	
Identify the cleaning schedule moving forward.	
Secure confidential materials.	
Follow CDC's return-to-work guidelines for healthcare workers.	
Verify that returning employees are in good health, that they were not recently exposed to COVID-19, or that they have been appropriately quarantined before returning. For employees previously exposed to COVID-19:	
• Take their temperature upon entry to the office each day. No-touch thermometers are ideal.	
Have the employees wear masks.	
Maintain social distancing as necessary. Do not permit congregating in communal areas.	
Check credible resources, such as the CDC and the New York State Department of Health, on a daily basis for new or revised infection prevention and control recommendations.	
If possible, install engineering controls (e.g., plexiglass barriers) to reduce or eliminate exposure to infected individuals. Consider:	
<ul> <li>Laminating paper signage or placing signage in plastic sleeves for routine cleaning.</li> </ul>	
Adding automatic door openers and air curtains.	
Replacing electrical switches with motion sensors, where practical.	
<ul> <li>Adding touchless faucets, flushometers, soap dispensers, and paper towel dispensers.</li> </ul>	
Re-educate staff on infection control protocols and any other essential practice policies/procedures, including:	
• The <b>use of PPE</b> (e.g., donning and doffing techniques).	
• Hand hygiene (e.g., washing and avoiding face touching) and respiratory hygiene.	
• CDC-approved protocols for collecting, handling, and testing clinical specimens.	

Contact your medical waste management vendor to resume waste disposal services.

Human Resources/Staffing	
Address changes in provider staff due to retirement, death, disability, etc. This may result in modifying your patient roster or reviewing which services you can provide in the practice.	
Identify whether any providers have decided to permanently limit their practice to part-time. Determine whether it is feasible to restart a full-time practice.	
<ul> <li>Keep in mind that otherwise healthy providers and staff members may not yet be available to return to work:</li> <li>Consider the stress (personal and professional) they might be experiencing as a result of the pandemic and trying to return to their normal routines.</li> <li>Consider their child care obligations, including the reopening of daycare centers and schools.</li> </ul>	
Assess whether the practice can afford to rehire all employees and review available assistance (e.g., Small Business Administration loans or state loans/grants).	
Ensure that you have sufficient clinical and nonclinical employees to properly staff the office.	
Verify that clinical employees still have active licenses, registrations, and/or certificates.	

Perform background and employment history checks for any new employees hired as a result of staff turnover associated with the closure.

Thank your team often, and have ad hoc staff meetings to check on your staff.

**Biomedical and Supply Management** 

Check for outdated supplies and medications (including sample medications), and discard as necessary.

Verify that you have sufficient supplies and medications, either in the practice or readily available to care for your patients:	
<ul> <li>Be prepared for shortages and delays in supply deliveries.</li> </ul>	
• Begin to create a stockpile of emergency supplies and establish a rotation schedule.	
Verify that all biomedical equipment inspections are up to date (e.g., automated external defibrillators, diagnostic equipment, radiological equipment, etc.).	
Verify the location of any loaned equipment and the expected date of return.	

Review settings on refrigerators used to store medications and testing supplies. Confirm the temperatures have not registered outside the normal recommended range for proper storage.	
Ensure sufficient supplies of soap, alcohol-based rub, and paper towels are available for reception, waiting areas, patient care areas, and restrooms.	
Be suspicious of any offers of PPE, testing, and medication discounts for bulk or group purchase due to fraudulent actors trying to take advantage of the crisis and its aftermath.	
Insurance and Business Continuity	
Reinstate any professional liability, general liability, or other relevant business insurance policies and programs that were suspended during the closure.	
Verify that clinical employees who have their own professional liability coverage have not let it lapse during the closure.	
With assistance of legal counsel, evaluate and update all contracts for appropriate changes based on lessons learned from pandemic-related issues.	
Evaluate your practice's tax return preparation status.	
Determine whether billing procedures for health insurance plans you accept have changed during your closure. These may be routine changes or changes associated with government mandates during the pandemic. Educate staff as needed.	
Consider completing a risk management self-assessment.	
Resuming Patient Care	
Communication/Continuity of Care	
Update your patient portal, website, email, and other communication modes to alert patients that the practice has reopened. Have patients call for appointments to inform initial staffing needs and hours. Depending on need, consider:	
Shorter hours.	
Longer appointment times.	
Weekend hours.	
Evening hours.	
Verify with your answering service that all calls/messages have been communicated to the practice. Ensure outgoing messages reflect that the practice is open again and include any changes to office hours.	
Prioritize the backlog of patients based on the nature of their condition or need. For example, consider whether any patients:	

• Were hospitalized during the pandemic (for any reason).	
Have high-risk conditions that make them a priority.	
• Had telehealth appointments during the closure that helped address their care needs.	
Determine whether you need to reschedule patients for annual physicals or other routine care to help accommodate patients who have more urgent needs.	
Acknowledge patient deaths that occurred due to any cause (including COVID-19).	
Update all patient health records as needed.	
<ul> <li>Understand the emotional impact on patients' families, especially if they were not able to see a loved one during his/her last days or attend the funeral.</li> </ul>	
Consider a general screening process for patients coming to the office with potentially infectious conditions (e.g., those who have flu-like symptoms):	
<ul> <li>Post signage in appropriate languages at the entrance of the office to instruct patients with respiratory symptoms and/or fever to notify staff immediately via telephone before entering the office.</li> </ul>	
Consider how the practice will ensure social distancing.	
Follow up on labs, films, tests, and specialist referrals made prior to the closure, results received while office operations were suspended, or services provided via telehealth:	
<ul> <li>Ensure that patients completed, or are in the process of completing, studies.</li> </ul>	
<ul> <li>Review lab work that arrived via EHR or other communication mode for critical or urgent follow-up issues.</li> </ul>	
<ul> <li>Review patients for recent hospitalizations and discharge summaries that arrived via EHR, mail, or other communication mode.</li> </ul>	
Determine how best to handle uninsured/previously insured patients. Create a plan to avoid abandonment:	
<ul> <li>If you plan to see them and bill them, consider at what rate.</li> </ul>	
<ul> <li>If you do not plan to see them, ensure you are not violating any contractual or legal obligations by discharging patients. Consult legal counsel related to applicable federal and state laws.</li> </ul>	
<ul> <li>Consider the patient's clinical status. Terminating a relationship at a critical junction in care is not advised.</li> </ul>	
• Develop a process for providing written notification to patients regarding discharge from the practice.	
Telehealth	
If you used telehealth during the crisis, consider whether you should continue these services following the pandemic.	
Consider whether the practice should still offer telehealth in light of the anticipated return to stricter guidelines (e.g., requiring HIPAA-compliant platforms).	
If you plan to continue offering telehealth services on a new platform, determine whether a new patient agreement/consent is necessary. If yes, consider the terms of the agreement, including information about when a virtual visit is appropriate and when an in-person visit is required.	

Review state and federal telehealth laws and regulations, telehealth billing guidelines, and <b>risk management considerations for telehealth</b> . For more information, visit MLMIC.com/covid-19.	
Documentation	
Thoroughly document your pandemic circumstances, decisions, and any actions taken to ensure patient care and patient/staff safety.	
If you had limited or no access to your EHR system during your office closure, add any notes to patients' records that were not entered. You may be able to accomplish this by scanning your handwritten notes or emailing those notes into your EHR system.	
In light of the pandemic, review health records to determine if patients have executed advanced directives. If not, encourage patients to do so.	
Reorient staff to your practice's documentation policies and privacy/confidentiality protocols.	
Resume your normal documentation practices, as any immunity associated with the COVID-19 response is likely no longer in place.	

At no additional cost, MLMIC policyholders can access 24/7 legal services from the law firm of Fager Amsler Keller & Schoppmann, LLP by calling (855) FAKS-LAW or emailing hotline@FAKSLAW.com.

This document should not be construed as medical or legal advice. Because the facts applicable to your situation may vary, or the laws applicable in your jurisdiction may differ, please contact your attorney or other professional advisors if you have any questions related to your legal or medical obligations or rights, state or federal laws, contract interpretation, or other legal questions.

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