October 7, 2020

The MMS will continue to monitor developments related to the coronavirus (COVID-19) and the response by state and federal agencies. For current information, including updates from NEJM, visit the dedicated page on the MMS website: massmed.org/covid-19.

Practice Management

MAPCAP addressing financial challenges of independent primary care practices

The Massachusetts Primary Care Alliance for Patients (MAPCAP) is an independent grassroots organization (of which the Massachusetts Medical Society is an active participant) that has been talking with the Massachusetts Association of Health Plans (MAHP), representing 16 different payors, about the extreme financial challenges that some independent primary care practices are facing as a result of the pandemic.

These payors recognize the importance of primary care in Massachusetts and are willing to have individual conversations regarding the offering of short-term financial assistance to independent primary care practices that have experienced financial losses due to the pandemic, on a case-by-case basis.

If you feel you need financial assistance due to the difficulties of maintaining a primary care practice during this pandemic, please prepare the information on the template in
advance. The payors will consider offering your practice financial assistance based on the information that you provide them. Contact the people on the list from the payors that your patients use and share your completed template with them.

Please note that the MMS is actively engaged with the payor community to extend this process to the specialty community. The MMS encourages any practice seeking such assistance to engage with financial and legal consultants, as necessary.

HHS Telemedicine Hack update

To support the wide adoption of telemedicine, the U.S. Department of Health and Human Services (HHS) Assistant Secretary for Preparedness and Response partnered with the ECHO Institute at the University of New Mexico and the Public Health Foundation’s TRAIN Learning Network to host a 10-week, virtual peer-to-peer learning community Telemedicine Hack.

- [Click here](#) to view top telemedicine resources
- [Click here](#) to watch all the recorded sessions

CMS updates: Medicare COVID-19 snapshot

The Centers for Medicare & Medicaid Services (CMS) released its monthly update of data that provides a snapshot of the impact of COVID-19 on the Medicare population. The updated data show over 1 million COVID-19 cases among the Medicare population and over 284,000 COVID-19 hospitalizations. Other key findings include:

- The rate of COVID-19 cases among Medicare beneficiaries grew 30% since the August release to 1,562 cases per 100,000 beneficiaries.
- Similarly, the rate of COVID-19 hospitalizations among Medicare beneficiaries grew 32% since the August release to 444 hospitalizations per 100,000 beneficiaries.
• The rate of COVID-19 cases and hospitalizations grew the most among rural beneficiaries, Hispanic beneficiaries, and Medicare-only beneficiaries (those who are not dually eligible for Medicaid).
• Medicare Fee-for-Service (Original Medicare) spending associated with COVID-19 hospitalizations grew to $4.4 billion, or just under $25,000 per hospitalization.
• Data on discharge status and length of stay for COVID-19 hospitalizations remained similar to previously reported figures in the August release. 31% of beneficiaries went home at the end of their hospital stay and 22% died. Nearly half of the hospitalizations lasted 7 days or less, while 5% lasted more than 31 days.

The updated data on COVID-19 cases and hospitalizations among Medicare beneficiaries covers the period from January 1 to August 15, 2020. It is based on Medicare Fee-for-Service claims and Medicare Advantage encounter data CMS received by September 11, 2020.

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Tufts Health Plan temporary COVID-19 telehealth/telemedicine code list – commercial products

This document applies to Tufts Health Plan Contracting Commercial providers. Tufts Health Plan follows industry-standard coding guidelines, as well as all applicable state and federal guidelines. Refer to current industry standard coding guidelines for a complete list of ICD, CPT/HCPCS, revenue codes, modifiers, and their usage. Providers may only bill the procedure code(s) under the applicable financial exhibits of their provider agreements and applicable fee schedules. As every claim is unique, use of the codes below is neither a guarantee of payment nor a final indication of how specific claim(s) will be adjudicated.

Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization, and utilization management requirements (when applicable), adherence to plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment. Claims for services subject to authorization may be reviewed for accuracy and compliance with payment policies.
DOI and CHIA meeting for providers: testing, telehealth, and prior authorization

The Division of Insurance (DOI) and the Center for Health Information and Analysis (CHIA) hosts regular meetings to offer providers an opportunity to raise questions and concerns related to Governor Baker's emergency order commercial insurance provisions. The next meeting will focus on testing, telehealth, and prior authorization, and will be recorded for later viewing. The DOI and CHIA, along with the Massachusetts Medical Society and the Massachusetts Hospital Association, sponsor these calls.

- Date: Thursday, October 29
- Time: 2:00 p.m. – 3:00 p.m. EST
- Meeting ID: 290 289 5643
- Passcode: 501
- Meeting URL »

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