

## Pediatric Practice Management Tips During the COVID-19 Pandemic

Pediatric practices around the country are facing the challenge of providing care to their patients and families amidst the COVID-19 pandemic. Practice management resources for independent practices, and approaches used by other practicing pediatricians are provided below. Please note that the information provided below is not AAP policy or official guidance, but are suggestions for consideration.

### Practice Management Resources

#### Small Business Assistance

The Small Business Administration (SBA) is now offering small businesses impacted by COVID-19 up to \$2 million in Economic Injury Disaster Loan Assistance (EIDL). Under the EIDL program, the SBA makes loans available to small businesses and private non-profit organizations in designated areas of a state or territory to help alleviate economic injury caused by COVID-19. Contact the National Business Emergency Operations Center at: <https://bit.ly/2rb1vM> / [nbeoc@max.gov](mailto:nbeoc@max.gov) / 202-212-8120.

#### Expansion of Unemployment Benefits

Per [federal Department of Labor guidelines](#), each state may now add flexibility around what's considered "eligible for unemployment benefits" through their unemployment insurance programs. Federal law now permits states to pay benefits in these situations:

- An employer temporarily ceases operations due to COVID-19, preventing employees from coming to work;
- An individual is quarantined with the expectation of returning to work after the quarantine is over; and
- An individual leaves employment due to a risk of exposure or infection or to care for a family member.

The federal law does not require an employee to quit (or be fired/laid off) to get the unemployment benefits due to COVID-19. **States may or may not have implemented these changes. Contact your state's Department of Labor/ UI program for more details.**

An individual receiving paid sick leave or paid family leave is still receiving pay. Thus, generally speaking, the individual is not "unemployed," so the individual is ineligible for unemployment insurance. However, if their time out is more than their PTO availability, they could draw unemployment benefits after their PTO runs out.

#### FMLA during COVID-19

While Congress has passed an emergency federally funded paid sick and family and medical leave policy for qualifying employees at firms of 500 or fewer employees, employers of health care providers and emergency responders have flexibility to exempt those staff from this requirement. For practices  $\geq 50$  employees whose employee to care for themselves are covered by FMLA, you are required to grant up to 12 weeks of unpaid job-protected leave for your employee or a qualifying family member. Technically, however, you are not required to grant FMLA leave for:

- Employees who are afraid of getting COVID-19
- Employees who need to stay home to care for healthy children because said children's school is closed

In these instances, telework options (in the first case) or childcare options (in the second case) would probably be better.

#### [OSHA Guidance on COVID-19](#)

It is an OSHA workplace safety violation to require a worker to put themselves at risk. The General Duty clause of the OSHA Act requires employers to furnish each worker "a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm." PPE must be provided at the employer's expense, along with a comprehensive respiratory protection program. Requiring an employee to perform patient care without providing the necessary PPE puts the employee's health at risk and puts the employer at risk of an OSHA violation.

#### [HHS Good Faith Provision of Telehealth](#)

The HHS Office of Civil Rights recently announced that it will not impose penalties for noncompliance with HIPAA for good faith provision of telehealth service during the COVID-19 crisis. A covered health care provider that wants to use audio or video communication technology to provide telehealth to patients such as Apple FaceTime, Google Hangouts video, Facebook Messenger video chat, and others during the COVID-19 nationwide public health emergency can use any non-public facing remote communication product that is available to communicate with patients.

The following list includes some vendors that provide HIPAA-compliant video communication products that would include a HIPAA BAA.

- Skype for Business
- Updox
- VSee
- Zoom for Healthcare
- SnapMD
- Doxy.me
- Google G Suite Hangouts Meet

#### **Staffing Concerns**

- Staff members who see patients who are COVID-19 positive without minimum adequate PPE must self-quarantine for 14 days. Current guidance on what types of exposure qualify to sit out from work for 14 days vs. self-monitoring and reporting to work can be found here: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html>.
- Several practices have started checking the temperatures of all staff each morning upon arrival.

- Health care workers who are parents of school-aged children (particularly where both parents work in health care) are concerned that school closures will require one parent to stay home with the children. Encouraging parents to seek alternative childcare arrangements for their children is helpful.
  - While having on-site/practice-based large group childcare for children is a helpful idea, there are a large number of restrictions states put on childcare for more than a small number of children who are unrelated.
  - High school and college students who are home from classes might be able to provide childcare or extend existing childcare providers.
  - There may be tax credits for small and medium size businesses who link up employees to healthcare and/or provide actual childcare reimbursement or services to their staff.
  - Families with similar aged children might be able to “go in on” an in-home sitter.

## **Office Workflow**

### Office Processes

- Extra adults and siblings are discouraged from attending visits.
- “Pre-work” items such as forms and surveys are deferred, completed by families in the car by hand, or ahead of time via the patient portal. Payments are handled virtually when possible (payment through patient portal, even taking credit card number over the phone).
- A staff member is assigned to review existing schedules to determine which visits can be done remotely and which visits are able to be rescheduled.
- Telehealth may be used to increase practice capacity. Pediatricians have begun using various telemedicine software such as SnapMD and Doxy.Me.
- Specific room are dedicated for sick visits and well visits. A back/side entrance is used for ill patients.

### Scheduling

- Well visits are conducted for infants and younger children who require immunizations. Well visits for those in middle childhood and older are rescheduled to a later date.
- Walk-in visits have been suspended. Same-day visits are allowed but first must be triaged before appointment can be established.
- Patients ages 0 & 1 with appointments between now and June 1<sup>st</sup> have been rescheduled for 7:30, 8:00, and 9:00 AM appointments (leaving the 8:30 slot free for newborns and add-ins) on each provider’s morning schedule. This ensures that well patients will have left the office by 9:30 AM.

### Exam Room Cleaning

- When disinfecting exam rooms you should wipe down each room with the usual approved cleaning solutions, this will allow for immediate turnover. The only time rooms are required to be to shut down is when aerosolized procedures occur; which is for 2 hours.

### Waiting Rooms

- All toys, books, tables etc. have been removed from the waiting room and extensively cleaned.
- Waiting room has been shut down altogether. Patients wait in their car; they text the office that they have arrived. When a room is open, the office texts the patient and instructs them to come straight in (picking up a mask for adult & child) and walk directly to a pre-assigned exam room number (sent to them by text).