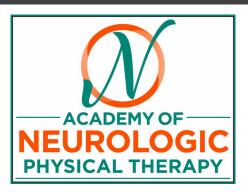
March 31, 2020



Message from the Practice Committee

The Practice Committee increases Academy of Neurologic Physical Therapy involvement with the Departments of Government Affairs and Reimbursement at APTA. Participates in activities, which promote and modify the practice of neurologic physical therapy. Serves as a resource to accrediting agencies to establish guidelines to neurologic practice.

Visit the Academy of Neurlogic Physical Therapy website

Hello Academy Member!

The ANPT Practice Committee is dedicating Part 1 of the March Message to updates and resources related to the COVID-19 pandemic. We hope these resources assist you during these difficult times. Part 2 of the Message from the Practice Committee, which will come out in a week, will include resources from the SIGs and ANPT work groups.

PT - Essential Employees!

Physical therapists are essential healthcare workers and recently were listed as such <u>"Guidance on the Essential Critical Infrastructure Workforce"</u> by the U.S Department of Homeland Security. Physical therapists have an ethical responsibility to deliver only services that are medically necessary and in the patient's best interest, while at this same time practice "Nonmaleficence" (Do No Harm). During this COVID-19 Pandemic, physical therapists need to use sound clinical judgment to determine what would best serve their patients at this time as some practice settings may require us to be essential staff whereas some physical therapy care may not be essential at this time.

The APTA, the APTA Cardiovascular and Pulmonary, and the APTA Acute Care have endorsed the following Austrian-based guidelines for the delivery of PT services in the acute care setting under the current circumstances of COVID-19. Therapists treating people with neurological health conditions in the acute care settings should be familiar with these guidelines. <u>Physiotherapy</u> <u>Management for COVID-19 in the Acute Hospital Setting</u>

Here is the *PT in Motion* Summary Update on Guidelines: <u>Acute Care Hospital</u> <u>COVID Guidelines</u>

Some ways which we may be essential are to:

- Focus on care transitions (now more than ever) in order to free beds that will potentially be needed in the hospital or post-acute care settings
- We need to prevent hospitalization and re-hospitalization in all sites of

- service in order to minimize the burden of the overall healthcare system.
- We need to promote health and wellness in order to combat effects of "social distancing", and limited movement and do what we can to support "aging in place."
- We need to support our interprofessional teams and provide the needed support to care for our patients (help reduce the burden)
- We must continue to serve our patients and our communities in whatever fashion is needed.

We invite you to read APTA President Sharon Dunn's address. <u>Letter From</u> <u>President Dunn on COVID-19 Impact</u> (March 20, 2020)

"This is a challenging time to be in health care....We need each other."

General COVID-19 Resources

- Review the <u>APTA Covid-19 resources</u> for assistance in managing during the COVID-19 pandemic.
- In particular, see the <u>APTA Statement on Patient Care and Practice</u> <u>Management During COVID-19 Outbreak</u>.
- There are CMS Waivers for Medicare, Medicaid, and CHIP due to this pandemic. Here is a resource for <u>these waivers</u>, and a <u>CMS Fact Sheet</u>.
- Refer to this article from the CDC: <u>Interim Guidance for Healthcare</u> <u>Facilities: Preparing for Community Transmission of COVID-19 in the</u> <u>United States</u> about minimizing exposure in the clinic.

CMS allows E-Visits: What is it?

CMS is now allowing e-visits by PT, OT, and SLP. Here is an up-to-date resource to help understand and institute e-visits: <u>Furnishing and Billing E-Visits: Addressing Your Questions</u>.

According to CMS, an e-visit is a "non face-to-face patient-initiated digital communication that requires a clinical decision that otherwise typically would have been provided in the office." An e-visit can only be used for established patients. An e-visit is not a telehealth service. Billing is based on cumulative time during the 7 days following the request from the patient to initiate an e-visit. Physical therapists are eligible to use the following HCPSC codes for e-visits:

- **G2061:** Qualified nonphysician health care professional online assessment and management, for an established patient, for up to seven days; cumulative time during the seven days, **5-10 minutes**.
- **G2062**: Qualified nonphysician health care professional online assessment and management service, for an established patient, for up to seven days; cumulative time during the 7 days, **11-20 minutes**.
- **G2063**: Qualified nonphysician qualified health care professional assessment and management service, for an established patient, for up to seven days; cumulative time during the 7 days, **21 or more minutes**.
- A CR (catastrophe/disaster related) modifier is required for both institutional and noninstitutional Part B billing. For institutional billing, the DR modifier is also required. See the article linked above for complete details of e-visits.

Telehealth in Physical Therapy in Light of COVID-19

At the time this was written, Medicare **does not** reimburse physical therapists for telehealth, but some private insurance providers are covering telehealth services for PT. It is important to know the rules and regulations in the state you are practicing and check with the third party payer to confirm coverage and coding requirements. Check out these <u>Telehealth Resources</u> from the APTA or the resources below to see how telehealth may fit into your practice.

- Check out this APTA update about <u>Cigna</u>. Here is a list of CPT codes accepted by Cigna from PT providers: <u>CIGNA Telehealth PT CPT codes</u>.
- Here is an update from United Health Care: <u>UHC Physical Therapy</u> <u>Telehealth</u>. Here is a list of CPT codes that UHC will reimburse: <u>Accepted PT CPT Codes for UHC</u>.
- Also, Tricare has announced limited telehealth coverage for PT: <u>Tricare</u> <u>Telehealth Update</u>.
- The APTA will post a recording of a webinar-*Implementing Telehealth in Your Practice STAT: Practical Guidance from Experienced Telehealth PTs* that was recorded March 26 and was shown via Facebook live on March 30. Look for this on the APTA website beginning March 31, 2020.
- See this <u>Telehealth News Advisory</u>. Be sure to tell Congress to waive restrictions on the use of telehealth for Medicare beneficiaries. Use <u>this</u> <u>link</u> to lobby your US Representatives and Senators.
- Here is a blog post published by the APTA: <u>Challenges and</u> <u>Opportunities in Telehealth: A Q&A With the Experts</u>.
- Check out these research articles related to Telerehabilitation.

Keep your older clients living with neurologic conditions moving!

- Suggestions from Exercise in Medicine: See this link: <u>Staying Active</u> <u>During COVID-19</u>
- Suggestions from the National Council on Aging (NCOA): <u>Encouraging</u> Older Adults to Stay Active and Safe during the Coronavirus Pandemic

Good News for Physical Therapy Assistants!

PTAs Will be Authorized TRICARE Providers Beginning Mid-April! The Department of Defense has issued a final rule, effective April 16, that establishes PTAs and COTAS as providers in ways similar to Medicare provisions. Find out more <u>here</u>.

Neuro Educators

Neurologic educators in the didactic and clinical settings are managing new and unforeseen challenges. Academic faculty are working diligently to transition courses online while maintaining high quality learning experience related to neurologic rehabilitation, and clinical educators are working tirelessly to find solutions to keep students and patients safe while supporting student learning in their clinical environments. Below are resources to support and connect neurologic PT educators across the continuum of PT education during this unprecedented time.

• Google Classroom for Neurologic PT Educators started by

Neurologic PT Educators. It includes discussion threads for academic, clinical, and residency related issues Join by clicking on the following link: <u>Classroom.google.com</u> After clicking on the link listed here, click the "+" in the upper right hand corner and enter the class code of 2f5olac. Contact Lauren Rachel at <u>Irach2@lsuhsc.edu</u> for additional questions. Below are examples of resources this group has already shared. A big thank you to everyone who has contributed to this initiative!

- <u>Physio U</u> is allowing FREE access to online resources for faculty and students through June 1st.
- <u>McGraw Hill, FA Davis, and Elsevier</u> are offering complimentary access to online resources through May. See instructions in the educator group for full instructions on signing up.
- FREE online access to **neuroanatomy resources**. Click here: <u>Anatomy</u> <u>Resources</u>
- This <u>30-minute presentation about online learning</u> by ACAPT board member, Mary Blackinton, answers FAQs, and shares online teaching ideas and best-practices for engaging students online.

Social Distancing? Neuro Resources to Keep Your Neurons Firing

ANPT Podcasts

All ANPT podcasts are in one spot now! Visit the <u>Synapse Education Center</u> and click on Podcasts to access all current and archived ANPT podcasts.

ANPT Synapse Learning Center

Catch up on new and contemporary content available in self-paced learning modules. Did you know some of the modules are free, such as topics on wheelchair prescription or management of Huntington's Disease? Check them out at <u>https://www.anptsynapsecenter.com/</u>

Social Media

Stay connected and up to speed on all things PT? Follow the ANPT and APTA on Facebook or Twitter.

@APTAtweets For the physical therapy community to stay connected to APTA.@APTANeuroPT For updates from ANPT

We hope you have found these resources useful. The ANPT Practice Committee welcomes your feedback and questions. Please send all inquiries to Heather Knight at <u>info@neuropt.org</u>

The Practice Committee

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