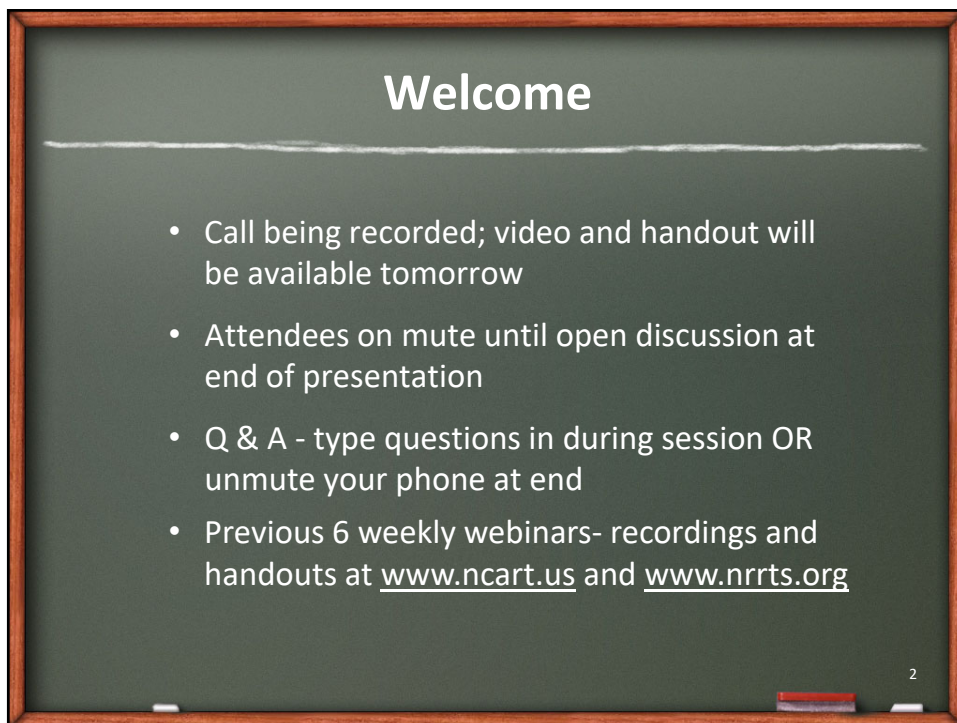


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Today's Topics

1. Overview
2. Legislative Update
3. Medicare Update
4. Remote Services/Telehealth
5. Q & A
6. Next Webinar- Thurs 5/28 at 4:00 PM ET

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Overview

- Continuing to pursue selective areas that require further clarification (i.e. written Medicare MAC implementation instructions)
- While policy landscape has become somewhat clearer, practical challenges to CRT evaluation, documentation, delivery, and repairs/support continue (impacting customer, clinician, supplier, manufacturer)
- Challenges include physical access, safety, operations, financial, other

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Overview (cont'd)

- Need to continue to give attention to immediate/short-term issues, but
- Also start attention to longer term matters:
 - Financial impact to states: Need to guard against Medicaid cuts to CRT
 - Temp. changes expiring at end of the PHE: Need to make permanent those that provide better service delivery and outcomes
 - New Normal: Development of new standards and protocols

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Legislative Update

Congress

House & Senate in session this week

Hearings on COVID Efforts

House D's released their COVID 4 relief legislation

- HR 6800

Senate R's looking to evaluate impact of \$3T+ relief already provided to identify additional needs

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House Legislation

Health & Economic Recovery Omnibus Emergency Solutions (HEROS) Act

- \$100 Billion more for Provider Relief Fund
- Reduced interest rates to 1% for providers who took advanced Medicare payments
- Eliminates cost sharing for COVID-19 treatments
- Full COBRA premium subsidies for furloughed workers
- Special enrollment for Obamacare and Medicare
- Increase FMAP payments to States by 14% July 1 through June 30, 2021

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House Legislation (cont'd)

- Establishes HEROS fund to provide premium pay to essential workers on front line in treating patients
- Expands jobless benefits
- Small business relief; more dollars for PPP & tax credits
- Individual relief - \$2k, plus \$1k recurring monthly to YE
- \$75 billion to public health departments and workforce agencies to support COVID testing and create contact tracing and surveillance system
- State and local governments – \$1 Trillion

Estimated cost is \$3 Trillion

“DOA” according to Senate and White House

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Medicare Non-Rural Non-Bid Rates

- CMS directed the MACs to update the claims processing system to use the NEW 75/25 INCREASED Non-Rural allowable - Done on April 23
- Remember to use the KY on accessories used on K5, E1161 and group 2 complex bases (K0835-K0843) when the bene resides in a former CB area so they pay at the New Non-Rural rate
- There will be a one-time adjustment for claims with a DOS between March 6 - April 22
- **Suppliers do NOT need to take any action to receive the adjustment (increase)**

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Medicare MAC Info

- When the treating practitioner sees the beneficiary, regardless of whether a referral to an LCMP is made, that visit date starts the six (6) month timeline for completion of the SWO for the wheelchair base
- If the treating practitioner chooses to refer the beneficiary to an LCMP for a mobility evaluation, the treating physician's co-signature, dating and indicating agreement or disagreement with the LCMP evaluation must occur within this six (6) month timeframe

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CRT Manual WC Accessories

- 2019 Win WC Access: Suspension of CBP rates being applied to CRT Manual Wheelchair accessories from Jan 1, 2020 to June 30, 2021
- The unadjusted payment rates will be implemented July
- The KU modifier should be used for certain accessories and seat and back cushions furnished in connection with a CRT manual wheelchair base for **claims submitted on or after July 6, 2020 through DOS June 30, 2021**

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CRT Accessories (cont'd)

- On or after July 6, 2020, suppliers can adjust previously paid claims with DOS on or after January 1, 2020 for the corrected fee payment
- **Suppliers DO need to take action to receive this adjustment (increase)** - Information on reprocessing claims will be provided on the CMS website as soon as it is available at:
<https://www.cms.gov/Center/Provider-Type/Durable-Medical-Equipment-DME-Center>

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Remote Services/Telehealth

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Documenting Telehealth Visits

- Pre-visit decision making; Consent for visit
- Why you are doing a telehealth visit
- Who is involved/present and where parties are located
- HIPAA review and Platform used (?recording)
- Employer Telehealth Policies



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Documenting a Telehealth Visit

- Back up plan if disconnected
- ICE – in case of emergency
- COVID 19 Safety Statement
- Follow up in person when safe if needed



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Example

- Dan Playback was referred to the wheelchair and seating clinic for repairs to his wheelchair. However based on his medical history, we contacted him to screen him for risk during COVID-19 PHE. Based on the risk, he did not feel safe to come to clinic but agreed to a telehealth visit. He is in his home with his caregiver (Michelle Li) and Wendy Walters, ATP from CRT Inc. as his supplier. Anita Stanridge, PT is located in the Top Notch clinic using SPEED Platform that is HIPAA Compliant. He understood there may or may not be a copay for today's visit. He provided a back up phone number in case we are disconnected and agreed to allow us to call 911 if there is an emergency during this visit.

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Example

- We confirmed others in the room were ok to hear information gathered in today's visit.
- We reviewed the symptoms of COVID-19 and he confirmed he is symptom free and has not been exposed to his knowledge and the recommended safety measures for COVID-19 were reviewed. He understands there may be a need for f/u in the clinic in the future when safe.
- *This is just an example that you are welcome take and modify for your own situation.*

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TeleRehabilitation

Mark R. Schmeler, PhD, OTR/L, ATP

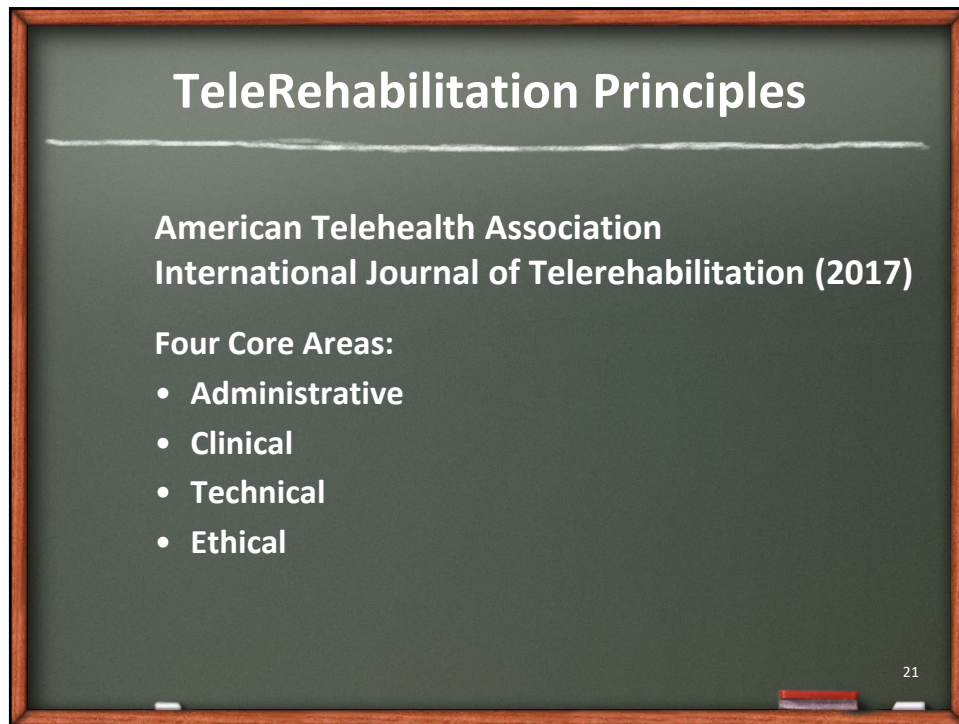
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Clinical

- Comply with Practice Laws or Standards
- Standardized Procedures, Tools, Measures
- Same as Traditional In-Person Service
- Responsibility for Appropriateness & Safety
- Obtain Professional Development / Training
- Right Equipment on Hand
- Obtain Technical Proficiency
- Introductions at the Beginning of the Encounter
- Ensure Setting is Safe & Appropriate
- Readily Available Tech Support
- Telehelper, Telepresenter, Translator on Hand
- Emergency Plan

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Technical

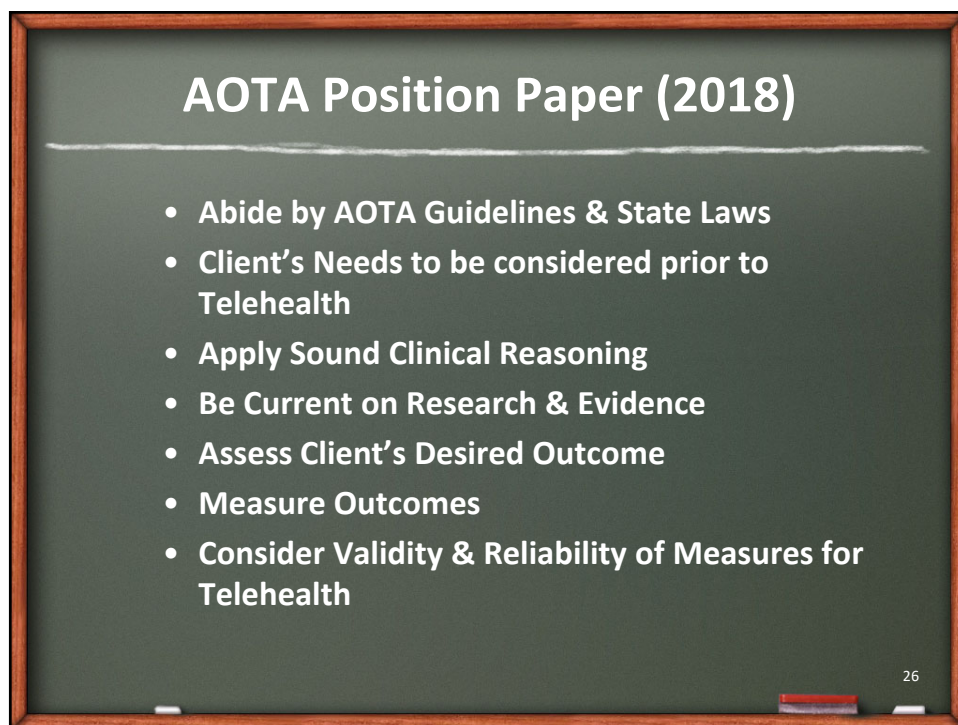
- Ensure Equipment is Safe & Sufficient
- Ensure Functional & Sanitized Prior to Encounter
- Necessary Peripherals
- Audiovisual Quality / Lighting
- Client Accommodations (i.e. motor, vision)
- Diagnostic / Testing Equipment
- Connectivity Strength / Encryption
- Tech Support
- PPE

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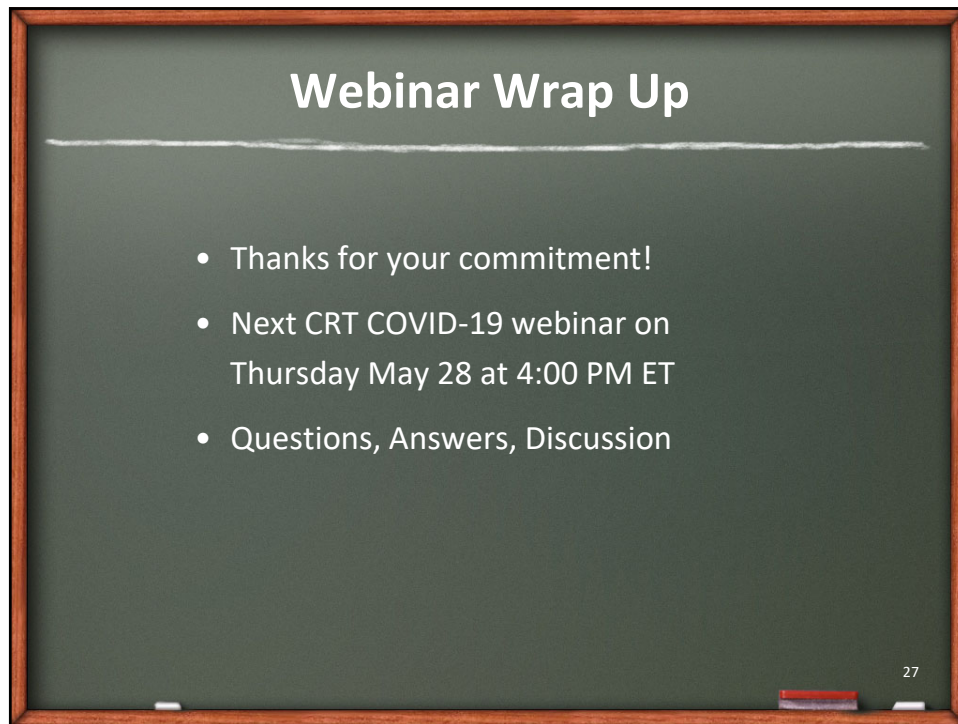
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