

Catalyst

Care Alert

CATALYST COVID-19 STRATEGY

This is an evolving health alert and protocols will be continually updated

Updated: 04/28/2020

SPECIAL EDITION: COVID-19 ANTIBODY TESTING

THE PATIENT JOURNEY

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GENERAL UPDATES

Governor Greg Abbott announced the plan to **reopen businesses statewide** with the initial phase of his plan beginning on **Friday, May 1st**. Phase I includes allowing restaurants, retail stores, and malls to resume service at no more than 25% capacity. Museums and libraries can reopen so long as interactive displays remain closed. Outdoor sports of four or less participants—namely golf and tennis—can resume with proper social distancing. Dental and doctor’s offices are greenlighted to resume seeing patients in office.

As many ease back into the workplace and various spots across their communities in the coming days and weeks, **further reopening will be dependent on testing**. *Only after two successive weeks of lower rates can the state move forward to Phase II of reopening*. The Governor points out that identifying the prevalence of COVID-19 with a targeted testing strategy is key. Antibody testing will play a role and will be discussed in Today’s Care Alert.

(For more information on the Governor’s plan to reopen businesses in the state, click [HERE](#).)

Beginning this Friday, May 1st, and each Friday thereafter, you should receive a **weekly Catalyst communication e-mail** from us **in lieu of a Care Alert**. This will provide you with a week in review summary and keep you connected with the entire Catalyst Health Network. Occasional, unscheduled Care Alerts will be sent if an urgent update seems necessary.

To skip to Catalyst Centralized Testing Site Training, click [HERE](#).

With Care,
Jeff Bullard, MD
Chief Medical Officer

SCREENING + INITIAL VISIT

PHONE TRIAGING — SCRIPTING RESOURCE

To support clinic staff **trialoging incoming calls** from increasingly anxious patients with concerns about having COVID-19, this [scripting template](#) aims to **de-escalate the patient’s anxious state**.

- Focus on asking **open-ended questions**, not leading questions
- Use **calming verbiage**
- Help conserve testing resources

CORONAVIRUS 24-HOUR PATIENT HOTLINE – (214) 964-0319

Patients can access a 24-hour hotline dedicated to addressing patient concerns:

- Afterhours patient triage
- Addressing questions from the worried well and those experiencing stress, anxiety and sleep issues related to coronavirus
- Managing your overflow of triage calls during working hours

*The hotline will be **nurse staffed**. In the event a patient needs to, or requests to speak with a physician, patients will be **forwarded to their primary care provider**.*

ASSESSING THE PATIENT

Following the initial phone screen, patients may require a virtual visit with a provider to have their symptoms further assessed. **Virtual visits should be utilized** as part of the triage process for suspected COVID-19 patients. Virtual visits are recommended by the CDC as a way of containing spread and limiting public and healthcare worker exposure.

NOTE: *If you have not already implemented a telehealth platform into your practice, please view the [Catalyst Telehealth Toolkit](#) for a guidance on how to get started quickly.*

CHOOSING THE RIGHT TEST

WHO SHOULD GET ANTIBODY TESTING?

PCR diagnostic testing continues to steer much of the decision making about quarantine and work clearance. With that in mind, patients will fall into one of two categories:

First category includes patients that would be candidates for PCR testing:

- **Follow the current CDC criteria** to determine who is a candidate **for PCR diagnostic testing**
- **Considered for PCR testing** - PCR diagnostic testing to rule in COVID-19 acute infection

Second category includes non-prioritized, asymptomatic patients and non-essential workers:

- Do not meet current criteria for PCR testing
- May have had a remote history of symptoms or concern regarding exposure
- **Consider Antibody only testing** - Antibody testing to assess for possible prior exposure and possible immunity and improve understanding of community impact

NOTE: *New information was released from the CDC on prioritization of PCR testing!*

Providers should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and **whether the patient should be tested**. Most patients with confirmed COVID-19 have developed fever and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing).

NEW AS OF 4/27/2020: CDC PCR TESTING CRITERIA

CDC Priorities for COVID-19 Testing:

High Priority

- Hospitalized patients
- Healthcare facility workers, workers in congregate living settings, and first responders with symptoms
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters, with symptoms
- Persons identified through public health cluster and selected contact investigations

Priority

- **Persons with symptoms** of potential COVID-19 infection
 - *Fever, cough, shortness of breath, chills, muscle pain, new loss of taste or smell, vomiting or diarrhea and/or sore throat*
- **Persons without symptoms who are prioritized** by health departments or clinicians, for any reason, including but not limited to:
 - *Public health monitoring*
 - *Sentinel surveillance*
 - *Screening of other asymptomatic individuals according to state and local plans*

[Reference the full update from the CDC here](#)

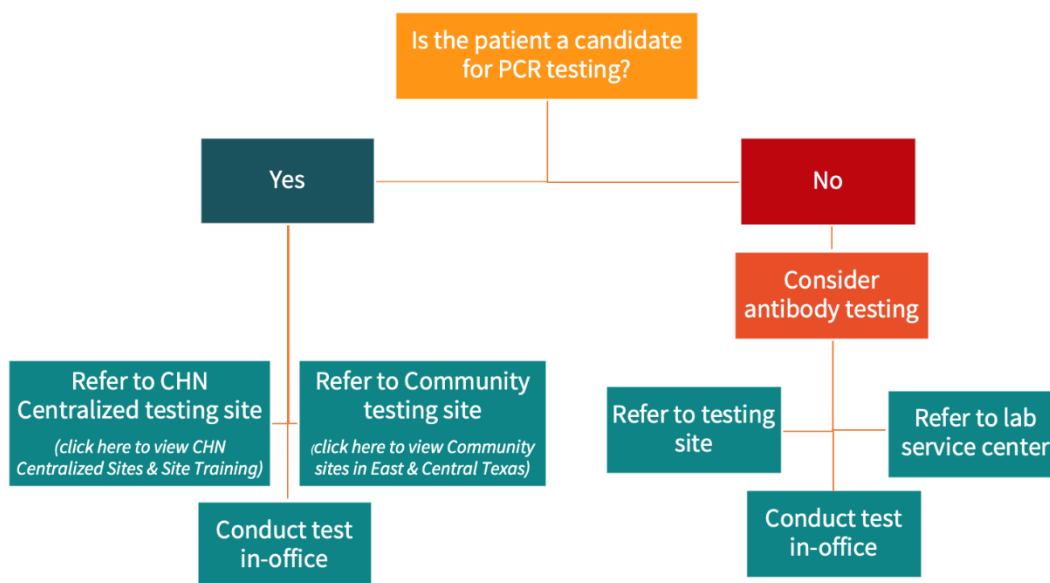
Catalyst Testing Sites will do **PCR diagnostic testing** for both **HIGH Priority** and **Priority** patients as classified by the **CDC**. (UPDATED 4/27/20)

There are **some exceptions** that will also qualify for PCR diagnostic testing. They include:

- Patients who need testing prior to surgery (obtain PCR plus antibody testing)
 - In LeadingReach for NTX Testing Sites, choose “Other” and use the free text field to specify “PCR + Antibody”
 - Asymptomatic, frontline essential worker who was exposed < 14 days prior to testing
 - Patients with a recent history of undiagnosed COVID-like symptoms who need to be cleared for work**, given:
 - No know COVID-19 exposure history
 - Asymptomatic < 3 days
- AND/OR**
- < 7 days since COVID-like symptom onset

****Consider Options:** Obtain PCR PLUS Antibody testing (takes an average of 3 days for results) **OR WAIT for the 3- and 7-day windows** above to pass.

CHOOSING BETWEEN PCR & ANTIBODY TESTING



NOTE: CPL, Quest, and LabCorp are all performing Antibody testing. Catalyst Centralized Testing Sites are partnering with CPL, so PCP training materials included reference CPL.

CATALYST CENTRALIZED TESTING

CATALYST CENTRALIZED TESTING SITE LOCATIONS (NORTH TX)

Beginning Wednesday, April 29th, Antibody testing will be available through Catalyst Centralized Testing Sites in North Texas. View the map below for testing site locations:

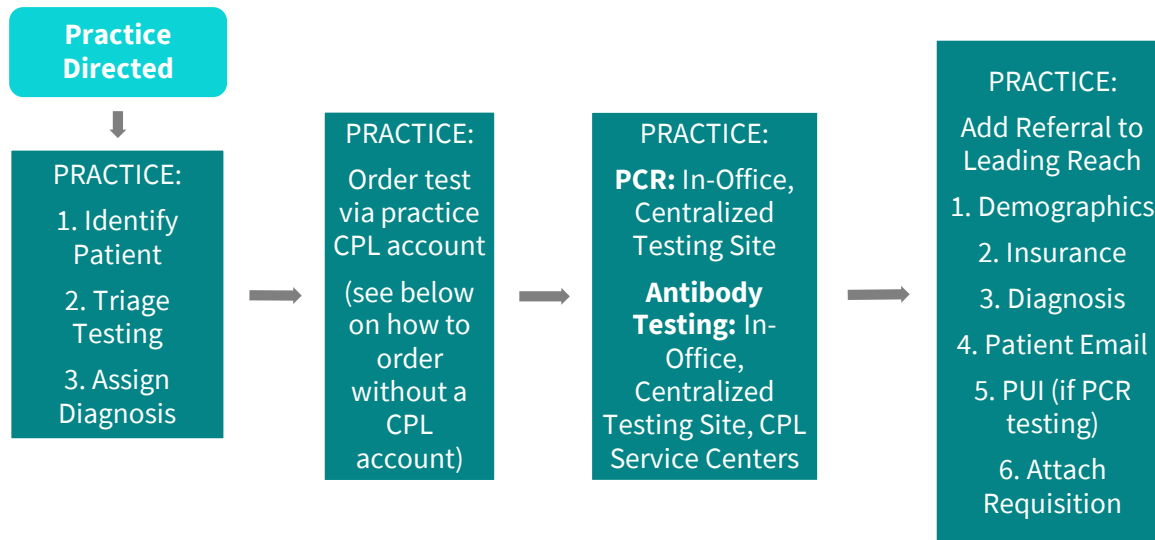


Site	Locations
Questcare Medical Clinic	McKinney
Questcare Medical Clinic	Coppell
Questcare Medical Clinic	Burleson
Questcare Medical Clinic	Arlington
Questcare Medical Clinic	Fort Worth
Watermark Urgent Care (Questcare Partnership)	Dallas
MaxHealth Family & Sports Medicine	Colleyville
Village Health Partners – Independence	Plano

**Hours and location vary by day and are subject to change without notice due to supply and staffing availability*

CATALYST CENTRALIZED TESTING SITE TRAINING

As Antibody Testing is introduced at Catalyst Centralized Testing Sites and we continue to learn, **our training has been updated**. Before sending patients to a testing site, either for PCR or antibody testing, review the updated workflows found below.



The following changes have been made to our workflow, **effective Wednesday, 4/29/2020**, to improve end to end workflow and accommodate for the addition of antibody testing:

- A **CPL lab requisition is now required** for Centralized Testing Site referrals
- To limit data entry, we've incorporated **Reason Field dropdown options**
- **Test results will be delivered directly to the PCP** via their CPL account or fax

Here are our **updated training materials**:

- [COVID-19 Testing: PCP Practice Overview](#)
- [COVID-19 Testing: LeadingReach PCP Referral Training](#)
- For PCR testing, complete and attach a [PUI Form](#)
- If you DO NOT have a CPL account, complete and attach the [CPL CHN Infectious Disease Lab Requisition](#) to your LeadingReach referral
- **NOTE:** If you DO have a CPL account, order the lab through your normal pathway
- [Guidance for Testing Next Steps](#) helps you set expectations for your patient, but we also include this handout in our email to support a smooth experience

REMINDER: Today's webinar discussed all workflow changes AND MORE! If you weren't able to join us live, you can watch the recording [HERE](#) or view the slides [HERE](#).

Lab Codes for Antibody Testing & PCR Testing (CPL & CHN Centralized Testing Sites)

CPL LAB TEST CODES	
7300	COVID PCR – Swab Diagnostic Testing
7301	COVID Antibody Testing (IgG)
7305	COVID PCR Swab <i>for HEALTHCARE WORKERS</i>

NOTE: Additional lab testing codes will be released for combination IgA, IgG, IgM at a later date

ICD-10 Codes for Antibody Testing & PCR Testing

- **Z20.828: Contact with and (suspected) exposure to other viral communicable diseases**
 - *Use when the patient has been exposed to someone with confirmed or suspected COVID-19*
- **Z03.818: Encounter for observation for suspected exposure to other biological agents ruled out**
 - *Used when concerned of possible exposure to COVID-19 has been ruled out*
- **Z11.59: Encounter for screening for other viral diseases**
 - *Screening for COVID-19 for asymptomatic & non-exposed patients*

TESTING FOLLOW-UP

RESULTS - GENERAL

- Lab results will take **3 days on average**
- **PCR tested** patients **should STAY at home and separated** from others to limit the potential spread of illness until results are received.
- PCP contacts patients with test results.
 - A follow-up virtual visit is recommended to address patient questions.
 - *For positive test results, PCP contacts the Health Department and should document all actions in a patient's chart to reflect instructions and care plan*

The false negative rate of testing is not completely understood. For this reason, to limit the risk of spread, PCR diagnostic testing patients should:

- Follow the guidance given in the [Guidance for Care and Isolation After Testing Fact Sheet until](#) symptoms resolve
- During home isolation, patients should monitor their symptoms. Ask patients to utilize the [COVID-19 14-Day Symptom Monitoring Log](#) to obtain a clear picture of the patients' progress.
- Notify their healthcare provider when they are symptom free to get further direction about next steps

POST-TESTING FOLLOW-UP

Following any COVID-19 testing, patients require different types of follow up, depending on the type of testing performed and the results. For detailed guides on post-testing follow up, regardless of where their test was performed, click the applicable link below:

PCR Diagnostic Testing ONLY	
Negative PCR Test	Positive PCR Test
Click here to download the PCR Diagnostic Testing Only Follow-Up Guide	
Combination Testing	
Negative PCR/Negative Antibody Test	Negative PCR/Positive Antibody Test
Positive PCR/Negative Antibody Test	Positive PCR/Positive Antibody Test
Click here to download the Combination Testing Follow-Up	
Antibody Testing ONLY	
Negative Antibody Test	Positive Antibody Test
Click here to download the Antibody Testing Only Follow-Up Guide	

Exception for Healthcare Workers:

*The current **CDC guidelines** for **exposed healthcare worker restrictions** are below. Negative PCR with positive antibody testing suggests past exposure without current infection. Until more is known about incubation period, seroconversion and viral shedding, asymptomatic frontline worker who received antibody testing as part of a work readiness assessment should follow these guidelines.*

RETURN-TO-WORK GUIDELINES FOR EXPOSED HEALTHCARE WORKERS

As a **healthcare worker**, or any critical infrastructure worker (e.g. law enforcement, first responders, food/agricultural vendors, 911 personnel), the **CDC recommends** the following practices **for asymptomatic, exposed** workers:

- **Prior to each shift**, employer should **assess** employee or the presence of **symptoms** and **elevated temperature**
- Employee should **wear a face mask**, surgical or cloth mask, for **14 days** after last exposure
- Employee should **maintain a social distance** of 6 feet whenever possible
- Employer should **disinfect all shared areas and equipment** (e.g. restrooms, computers, workspaces)
- Employee **should not share objects** that are used near the mouth, nose (e.g. headsets)
- Employee should **avoid sharing space** when possible (e.g. stagger lunches and breaks)
- Should the **employee become symptomatic**, they must be **sent home**. Additionally, employer should **assess the other employees for potential exposure** to the symptomatic employee, including the 48 hours prior to the employee becoming symptomatic

NOTE: Exposure is defined as **contact** with a COVID-19 positive person, **including the 48 hours before** that person became symptomatic, under the following situation:

- **Within 6 feet** of a COVID-19 positive person for a period of 10 minutes or longer
- A **household contact** with a COVID-19 positive person

ADDITIONAL POST-TESTING RESOURCES

- [How to Care for Someone Who is Sick – The CDC recommends caregivers should follow these protocols when taking care of someone who has tested positive](#)
- [How to Clean Your Home During COVID-19 – The CDC recommends households with a COVID-19 positive patient should follow these extra cleaning steps](#)

BILLING & REIMBURSEMENT

NOTE: Cash pay pricing for Antibody tests range from \$40 - \$50 with labs and is roughly \$50 for PCR testing, depending on the lab being used.

Coding Quick Reference Guides

REMINDER: If you have questions about **billing for telehealth visits**, visit the [Catalyst Health Network Resources Page](#) to view the following resources:

- [Telehealth Coding Quick Reference Guide](#)
- [Medicare Coding Opportunity quick reference guide](#)
- [E/M Coding Elements reference guide](#)

Telehealth Payer Grids

We are communicating with the payers daily to get the most up-to-date information surrounding Telehealth and COVID-19-related impacts. The below payer grids are updated on the [Catalyst Health Network Resources Page](#) as updates are learned:

- For a one-page, **SIMPLIFIED Payer Grid**, click [HERE](#).
- For the **DETAILED Payer Grid**, click [HERE](#).

NEED TO KNOW

CATALYST HEALTH NETWORK IN THE NEWS

The hard work and dedication of Catalyst Health Network is not going unnoticed! Read about all the ways **Catalyst PCPs are showing up to help our communities thrive** in the [Catalyst Health Network News Room](#).

NEW! Join Catalyst Health Network's President and CEO, Dr. Christopher Crow for a **Virtual Breakfast Panel on Saving Primary Care** hosted by *D CEO Healthcare* this **Thursday, April 30th from 8 AM – 9 AM**. Other DFW healthcare leaders, Dr. Sanjay Doddamani and Alvaro Saenz, will also serve as panelists. A majority of ticket sales will go to the [Parkland Foundation](#).

More details on the Virtual Breakfast Panel, including how to register, can be found [HERE](#).

CATALYST WELLNESS SERIES

NEW WORKOUT VIDEO! Tune in for the health and wellness series led by Sean Terwilliger by following [Catalyst Health & Wellness Videos](#). These videos can be shared with your staff or patients. Please share other ideas about ways we can help our communities thrive during the COVID-19 Pandemic.

ZOOM CORNER

The next Catalyst Webinar, **Prospective Payment Models** is scheduled for **Thursday, April 30th from 12 PM – 1 PM**. We will cover:

- *COVID-19's impact on PCP reimbursement*
- *How prospective payments will impact the future of primary care and help to stabilize revenue*

Please click the link below to join the webinar:

<https://stratifi.zoom.us/j/98755233204>

Password: 2sKEa#z@

Or join by phone:

Or iPhone one-tap :

US: +13462487799,,98755233204#,,1#,076053# or
+12532158782,,98755233204#,,1#,076053#

Or Telephone:

Dial(for higher quality, dial a number based on your current location):

US: +1 346 248 7799 or +1 253 215 8782 or +1 669 900 6833 or +1 301 715 8592 or
+1 312 626 6799 or +1 646 876 9923

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