

NYSPA EXECUTIVE COMMITTEE MEETING
Conference Call
May 19, 2020

8:00 P.M.

- 1. February 25, 2020 Minutes**
- 2. Dues Comparison Statement**
- 3. Albany Report**
- 4. Membership Survey**
- 5. E-Bulletin – Audio Only Codes**



New York State Psychiatric Association, Inc.

Area II Council of the American Psychiatric Association
400 Garden City Plaza, Garden City, New York 11530 • (516) 542-0077

MINUTES OF THE MEETING OF THE EXECUTIVE COMMITTEE

February 25, 2020

Meeting by Conference Call

PRESENT:

JEFFREY A. BORENSTEIN, M.D., President
EDWARD HERMAN, M.D., Vice President
MARVIN KOSS, M.D., Treasurer
VIVIAN PENDER, M.D., Area II Trustee
JEFFREY FREEDMAN, M.D., Chair, Public Affairs
JAMIE PAPAPETROS, Legislative Staff
SETH P. STEIN, ESQ., Executive Director
RACHEL FERNBACH, ESQ., Deputy Director
DONNA GAJDA, Coordinator

Dr. Borenstein called the meeting to order. The following issues were discussed:

1. Minutes. The minutes for the January 28, 2020 Executive Committee meeting were reviewed and accepted.
2. Dues Comparison Statement. The Committee reviewed a dues comparison statement for the months October through February for the years 2010 through 2020. Mr. Stein reported that we are beginning to see dues stabilize this year as a result of the 2020 dues increase.
3. Albany Report. In addition to the written Albany Report that was included in the meeting packet, Mr. Papapetros reported on the following:

The Governor's budget came out last month and the 30 day budget amendments were released last week. As discussed in the written report, the amendments included allocation for the Excess Medical Malpractice program through June 30, with the expectation that the program will be part of the Medicaid Redesign Team II discussion; establishment of a "Curing Alzheimer's Health Consortium;" collaborative drug therapy management; and expansion of Medication Assisted Treatment under Medicaid.

Mr. Papapetros reported that MSSNY has prepared a letter in response to the Executive Proposal regarding physician oversight at the Office of Professional Medical Conduct and thanked Mr. Stein and Ms. Fernbach for their revisions regarding publication of administrative warnings. MSSNY has updated the letter incorporating these revisions.

Mr. Papapetros reported that letters have been sent to district branch presidents and legislative representatives offering to assist district branches in scheduling visits with legislators in their district offices. Thus far, affirmative responses have been received from the Bronx, Brooklyn, West Hudson, Queens and Western New York district branches.

Mr. Papapetros reported on the following legislation:

Senator Harchkham has introduced companion legislation (S.7758) to Assembly A.6132 which would authorize psychologists to prescribe.

Legislation (S.6831/A8820) amending New York's Civil Practice Law and Rules to prohibit the application for admission to practice law in New York State from including questions requiring the disclosure of mental health and substance use disorder diagnoses and treatment.

Legislation (A.1033/S.5441) prohibits a health care professional from ordering or increasing psychotropic medication for a patient without written informed consent of the patient or patient's lawful representative. The bill does not identify situations where consent would not be required.

Legislation (A.8890/S7709) requiring health plans to cover medically necessary services including habilitative and reconstructive services as a result of a congenital anomaly.

Mr. Papapetros updated the Committee on NYSPA's Veterans Mental Health-Primary Care Training Initiative. Two additional presentations were held in February at South Nassau Hospital. Recording of two training webinars have now been completed. Edits are being completed and the webinars will be housed on the NYSPA website and CME will be available and emailed to participants upon successful completion of the post test. Finally, NYSPA continues to work with MSSNY and NASW-NYS on a joint conference planned for Friday and Saturday, May 1st and 2nd to be held at HNA Palisades Conference Center, located in Palisades, NY.

4. April 4, 2020 NYSPA/Area Council Meeting. The Committee reviewed the draft agenda for the Spring NYSPA/Area II Council Meeting.

5. MSSNY HOD Delegate. The position of NYSPA Delegate to the MSSNY House of Delegates remains open. Unfortunately, the 2020 MSSNY HOD meeting conflicts with the APA Annual Meeting. Since the meetings are often held in Westchester County, Ms. Gajda will reach out to members in the Westchester District Branch to see whether one of the members would be available and interested in serving as NYSPA's delegate.

There being no further business, the meeting was adjourned.

Dues Income	October	November	December	End of Year Total	January	February	March	April	May	Total through February
2010-2011	14,605	91,371	44,838	150,815	69,101	43,637	17,573	22,804	13,425	317,354
2011-2012	15,190	83,220	41,693	140,103	70,981	58,092	18,316	26,312	21,251	335,055
2012-2013	14,636	74,259	38,841	127,736	72,562	53,114	23,731	19,667	15,814	312,625
2013-2014	11,924	75,397	41,955	129,275	85,030	37,253	25,768	20,778	28,660	326,765
2014-2015	21,960	67,357	41,233	130,550	69,710	43,560	24,278	21,128	19,226	308,453
2015-2016	21,045	73,868	41,805	136,718	104,297	61,695	37,427	29,820	14,948	384,903
2016-2017	16,326	72,458	39,113	127,896	102,690	49,052	35,665	30,305	16,072	361,680
2017-2018	6,625	26,321	62,881	95,828	133,834	47,679	39,420	36,657	20,330	373,747
2018-2019	11,452	39,282	52,916	103,650	103,593	56,409	49,093	28,055	16,732	357,533
2019-2020	6,294	55,190	46,407	107,891	114,895	49,093	25,940	17,032	9,325	324,176

New York State Psychiatric Association, Inc.

Area II Council of the American Psychiatric Association
400 Garden City Plaza, Garden City, N.Y. 11530 • (516) 542-0077

Government Relations Office
123 State Street, Albany, N.Y. 12207 • (518) 465-3545

ALBANY REPORT FOR EXECUTIVE COMMITTEE MEETING **TUESDAY, MAY 19, 2020**

GLENN MARTIN, M.D., CHAIR OF COMMITTEE ON LEGISLATION

Prepared by:
Richard J. Gallo
Jamie Papapetros

I. Legislative Session

The COVID-19 pandemic has upended the regular Legislative Session. The Legislature departed Albany in early April after passing the budget for the 2020-2021 fiscal years and has not returned to date. Before leaving Albany, the Senate and Assembly both passed resolutions to change the rules to authorize the sessions to be held virtually/remotely. As we prepare this report, press reports indicate the Senate will return to session next Tuesday (May 26) and Wednesday (May 27) to address COVID-19 related measures, including housing while the Assembly is also expected to return but there is no confirmed date at this time. Aside from COVID-19 related bills, the Legislature will have to contend with budget cuts if federal aid does not materialize (see next section of report). Legislators continue to work back in their districts handling an influx of calls from constituents and stakeholders on the COVID-19 crisis. COVID-19 resulted in the closure of the State Capitol to visitors since mid-March and, as such, disrupted the day-to-day legislative activity and advocacy as well as the flurry of activity that normally occurs at the end of the Legislative Session. This means the fate of perennial scope of practice bills and other bills are unclear to say the least and likely tabled for the moment.

The regular Legislative Session is scheduled to conclude on June 2, 2020.

II. FY 2020-21 Budget Update: \$8.2 Billion in Cuts to Aid to Localities & 10% Cut to State Agencies Looming if Federal Aid Does Not Materialize

COVID-19 is not only a public health crisis and a mental health crisis, but is also an economic crisis as it has wreaked havoc on the finances of especially hard hit states such as New York. New York's Division of the Budget (DOB) released a financial plan at end of April that projects \$8.2 billion in cuts will be needed to balance the FY20-2021 state budget along with a 10% reduction in state agency budgets and hiring freeze unless NY receives additional federal aid. The financial plan notes tax receipts have fallen 12.4% over the past two months. The \$8.2 billion in reductions would come from reductions in aid-to-localities disbursements, which includes funding for everything from public schools, health care, higher education, mass transit, and substance use disorder treatment programs. The DOB financial plan also expects unemployment in NY to rise to 11.4 percent – "a level higher than any recorded since the current methodology for calculating the rate was introduced." The economic damage from COVID-19 to the State's finances is expected to linger for years amounting to a loss of \$60.5 billion through FY 2024.

The Enacted state budget for FY 2020-2021 gives Division of Budget authority to make reductions when the budget is deemed out of balance. The DOB powers are "activated if actual tax receipts are less than 99 percent of estimated tax receipts, or actual disbursements are more than 101 percent of estimated disbursements, as measured at three points during the year – April 1-April 30; May 1-June 30; and, July 1-December 31."

It is expected the budget will be out of balance once the April measurement is complete. This means \$10.1 billion in budget control actions is needed, consisting of \$8.2 billion in reductions to aid to localities, \$1.6 billion in savings from State agency operations, and \$293 million in savings from expected debt service costs.

Next Steps:

- DOB is preparing a detailed plan for closing budget gap, which will itemize the specific appropriations to be reduced or withheld.
- DOB will send plan to Senate and Assembly in the month of May depending on the action taken by Congress to assist states and local governments.
- Senate and Assembly will have 10 days to adopt, by concurrent resolution, their own plan for closing budget gap.
- If legislative plan is adopted or if it is inadequate to close gap, as determined by DOB, the plan prepared by DOB will take effect immediately.

Link to *City & State* Article: <https://www.cityandstateny.com/articles/politics/new-york-state/cuomo-warns-82-billion-cuts-localities.html>

Link to DOB Financial Plan: <https://www.budget.ny.gov/pubs/archive/fy21/enac/fy21-enacted-fp.pdf>

III. COVID-19: Overall Statistics & Impact

We have been providing daily summaries from Governor Cuomo's briefings.

The latest numbers:

Top Line Numbers (as of 5/18)

1,467,739 tested as of 5/18/20 (28,182 tested on 5/18/20)

352,845 COVID-19 positive cases (1,474 new positives on 5/18 – 591 in NYC, 883 in counties excluding NYC)

- **NYC – 193,821**
- **Rest of State – 159,024**

22,843 deaths (+105 on 5/18, 85 in hospitals, 20 in nursing homes)

New York State is divided up into ten regions. The regions must meet the following 7 metrics in order to proceed with four-phased re-opening under the *NY Forward Plan*. The 7 metrics:

- #1 – 14-day decline in hospitalizations OR under 15 new hospitalizations (3-day average)
- #2 – 14-day decline in hospital deaths OR fewer than 5 deaths (3-day average)
- #3 – New hospitalizations – under 2 per 100K residents (3-day rolling average)
- #4 – Share of Total Beds available – threshold of 30%
- #5 – Share of ICU Beds available – threshold of 30%
- #6 – 30 per 1K residents tested monthly (7-day average of new tests per day)
- #7 – 30 contact tracers per 100K residents or to meet current infection rate

The regional dashboard provides a status of the metrics by region: <https://forward.ny.gov/regional-monitoring-dashboard>. The dashboard will be updated every 24 hours. Six regions have now met the criteria for Phase I re-opening: Finger Lakes, Western NY, Southern Tier, North Country, Central NY, and Mohawk Valley. The Capital District has identified the requisite amount of contact tracers and will be able to proceed with Phase I reopening tomorrow (Wednesday, May 20). In Phase I of re-opening, the following businesses are able to reopen within a region: construction, manufacturing, wholesale supply, retail with curbside pickup and agriculture, forestry and fishing. Elective surgeries have been able to resume in 49 of New York's 62 counties.

In the last week, the Legislature has held to joint virtual public hearings: (1) to evaluate the current and future economic impact of COVID-19 on small businesses; and (2) the disproportionate adverse impacts of COVID-19 on minority communities. MSSNY submitted testimony for the small business hearing. MSSNY noted it worked with specialty and county specialty societies to conduct a survey of membership over the last month addressing the loss of patient visits; loss of practice revenue; whether or not physicians had to furlough, or layoff, staff; adoption of telehealth; and whether or not they'd received funding

from one of the available programs included in the federal CARES Act stimulus bill, among others. Key takeaways from the first survey include as reported in MSSNY's testimony:

- 83% had a reduction of more than 50% in the volume of patients visiting their practices.
- 80% suffered a loss of revenue of more than 50% since the outbreak of COVID19.
- More than a quarter had to layoff, or furlough, more than 50% of their staff.
- 73% applied for forgivable loans through the Small Business Administration's (SBA) 7(a) Loan Program.

The second survey, which was conducted after Congress replenished funding for small businesses, including the Paycheck Protection Program, found:

- 79% have seen a reduction of more than 50% in the volume of patients visiting their practices.
- Nearly 3/4 had a greater than 50% drop in practice revenue.
- More than a quarter had to lay off or furlough more than 50% of their staff, and 40% had to lay off or furlough at least 25% of their staff.

The positive news from MSSNY's survey:

- 74% were awarded a PPP loan.
- 63% received a CARES Act relief pool grant in the first round which was based on a small % Medicare fee for service payments received in 2019.
- 21% received a Medicare Advance payment (loan).

MSSNY has four recommendations/requests:

- "Direct commercial insurers in New York to provide "advance" payments to physicians in the same manner as Medicare is required to in the CARES Act. Recently, Empire announced that it would advance payments to certain independent primary care physician organizations and multi-specialty groups that include primary care, beginning in May. United and CDPHP have also implemented these programs. **MSSNY urges other New York insurers to do the same.**
- Establish a 9/11-style program to provide hazard pay for frontline healthcare providers, including physicians, to help compensate for lost revenue as a result of the COVID19 crisis.
- Providing needed relief from insurer-imposed administrative burdens, like pre-authorization, which were recently waived for hospitals.
- Require health insurers to make bonus payments to their network physicians to account for the costs associated with additional Personal Protective Equipment (PPE) and the mark-up in price, that will be essential as practices begin to open up. Given that insurers have recently seen a precipitous drop in claim submissions, this seems a reasonable request."

More than 300 bills have been introduced since the beginning of April by members of the Legislature addressing a variety of aspects of the COVID-19 crisis ranging from a rent freeze, bill of rights for essential workers, and increased transparency and reporting by nursing homes.

IV. COVID-19: "A Mental Health Crisis" As May Marks Mental Health Awareness Month

Governor Cuomo has drawn attention to the mental health impact and toll of the COVID-19 crisis. Over the weekend, Governor Cuomo reiterated the COVID-19 crisis is a mental health crisis, and it deserves far more attention than it has gotten. Governor Cuomo warned not to underestimate the trauma this has created for people.

On Monday, May 18, 2020, OMH announced a series of public service announcements to raise awareness of the Emotional Support Helpline available 7 days a week (8 a.m. to 10 p.m.) at 1-844-863-9314. The hotline was established at the direction of Governor Cuomo at the onset of the crisis. The OMH announcement of public service announcements notes that as of May 18, more than 14,000 New Yorkers had called the Helpline since its launch on March 25. The OMH press release notes, "The Public Service Announcements (PSAs), currently running on social media and digital outlets, reached more than 1.1 million New Yorkers in the first week of promotion." At the time the Governor Cuomo called for the establishment of the hotline, he

made a plea to mental health professionals to volunteer to staff the hotline. NYSPA issued an E-Bulletin encouraging members to volunteer. More than 12,000 mental health professionals have volunteered.

The hotline has a disclaimer -- *"The Office of Mental Health's ("OMH") Emotional Support Line ("Line") is not licensed or unlicensed mental health care or treatment of any type regardless of what is discussed or who provides support. It is for emotional support purposes only. Use of the Line does not create any confidential provider-therapist relationship of any type. The Line not a substitute for professional health care."*

Governor Cuomo has also highlighted The Mental Health Coalition initiative launched by his brother-in-law and fashion designer, Kenneth Cole, and more than three dozen advocacy organizations, which focuses on removing the stigma surrounding mental health and encouraging folks to ask "How are you, really?" Governor Cuomo stressed we all need to really pause when we are asked or ask someone else, "how are you, really?" We all often give rhetorical response – Fine, good, ok....but need to take time to really assess. Governor Cuomo noted we are "going through hell." For more information on this visit www.howareyoureally.org or use hashtag #HowAreYouReallyChallenge

MSSNY has established a peer-to-peer help line specifically for physicians who are experiencing COVID-19 related stress. MSSNY's May 18th Enews reports:

"The MSSNY helpline is staffed by psychiatrists that will provide one-time support for those in need. **The helpline number is: 518-292-0140.** Physicians can call this number 24/7 and will get an answering service who will ask for the individuals name and contact information. There will be a return call to the individual within an hour of the call being received. The MSSNY helpline is part of the MSSNY Peer to Peer (P2P) support program which is currently in development by MSSNY. MSSNY is seek volunteer peer supporters for this program and additional information will be forthcoming within the next several weeks. Additional information on how to become a volunteer peer support may be obtained by contacting Cayla Lauder at clauder@mssny.org or Pat Clancy at pclancy@mssny.org."

In addition, MSSNY is hosting a webinar tomorrow (Wednesday, May 20) at 7:30 a.m. on Mental Health and COVID-19 for Health Professionals conducted by Craig Katz, MD. To register for webinar, [click here](#).

As we previously reported in the daily summaries, the Executive Orders/actions taken related to mental health during COVID-19 include:

- Authorizing social workers licensed in another State or Canada to practice in New York State without civil or criminal penalty related to lack of licensure. (effective through June 7, 2020).
- Authorizing mental health practitioners licensed in another State to practice in New York State to practice in New York State without civil or criminal penalty related to lack of licensure. (effective through June 7, 2020).
- Department of Financial Services issued emergency regulations and a circular letter requiring State-regulated insurers to cover outpatient mental health services for frontline essential workers with no cost sharing (copayments, coinsurance or deductibles) whether in person or via telehealth.

V. Regulatory News

OMH proposed rule published in NYS Register on May 6, 2020 with changes to 599.10 NYCRR regarding clinic treatment plans including when the initial plan must be completed. Among changes in the proposed rule is one to allow the treatment plan to be reviewed on an annual basis.

It also makes changes on who can sign the treatment plan: "For recipients who are Medicaid Fee-for-service beneficiaries, treatment plans shall be signed by a psychiatrist or other physician. For all other payers or plans, treatment plans containing prescribed medications shall be signed by a psychiatrist, other physician or nurse practitioner in psychiatry and treatment plans which do not contain prescribed medications shall be signed by a psychiatrist, other physician, licensed psychologist, nurse practitioner in psychiatry, licensed clinical social worker, or other licensed practitioner to the extent permitted by such other payer or plan's requirements."

The rule has a 60-day public comment period ending on July 5, 2020.

The rule can be accessed starting on page 6 of the May 6th edition of the NYS Register:
<https://www.dos.ny.gov/info/register/2020/050620.pdf>

VI. NYSPA VMH-PCTI Update

NYSPA's VMH-PCTI is hard at work trying to develop ways to deliver the content of its VMH-PCTI presentations through webinars given the restrictions that remain in place prohibiting large meetings and gatherings because of COVID-19.

The webinar recordings of NYSPA's VMH-PCTI tracks on PTSD/TBI and veteran suicide and suicide prevention are almost complete. NYSPA is in the process working out the technical details and aspects of housing the webinars on the NYSPA website with the ability of viewers to complete the pre and post presentation evaluations. We expect to have the PTSD/TBI webinar up on the NYSPA website within the next few weeks. The veteran suicide and suicide prevention webinar is undergoing some final edits and should be provided to NYSPA within the next few weeks as well.

In addition, NYSPA's VMH-PCTI presentations covering women veterans' issues and military culture have been finalized and we are in the midst of evaluating a recording of both and hosting train-the-trainer sessions.

As we previously noted, Richard Gallo and Marianne Goodman, M.D., Coordinator of VMH-PCTI Curriculum, have been appointed to New York State Division of Veterans' Services Policy Academy: Governor's Challenge to Prevent Suicide Among Service Members, Veterans, and their Families. A contingent of those appointed to the policy academy will go to Washington DC in June for VA/SAMSHA's VA/SAMHSA Governor's Challenge to Prevent Suicide Among Service Members, Veterans, and their Families. Work with the Governor's challenge is ongoing and we have provided them with the PowerPoint presentations of NYSPA's presentation tracks on PTSD/TBI and veteran suicide and suicide prevention.

Resources & Links

NYS OMH's COVID-19 Emotional Support Helpline

- 1-844-863-9314
- Open 7 days a week 8 a.m. to 10 p.m.
- Volunteers who staff helpline complete a 2-hour webinar.
- Provides free and confidential support, helping callers experiencing increased anxiety due to the coronavirus emergency. The Helpline is staffed by volunteers, including mental health professionals, who have received training in crisis counseling.
- **DISCLAIMER: The Office of Mental Health's ("OMH") Emotional Support Line ("Line") is not licensed or unlicensed mental health care or treatment of any type regardless of what is discussed or who provides support. It is for emotional support purposes only. Use of the Line does not create any confidential provider-therapist relationship of any type. The Line not a substitute for professional health care.*
- Additional Information: <https://omh.ny.gov/omhweb/covid-19-resources.html>

MSSNY Peer-to-Peer Line for Physicians

- 518-292-0140
- Physicians can call this number 24/7 and will get an answering service who will ask for the individuals name and contact information. There will be a return call to the individual within an hour of the call being received

Help for Frontline Workers

- NYS is partnering with Kate Spade New York Foundation and Crisis Text Line on a 24/7 emotional support service for frontline healthcare heroes – Text NYFRONTLINE to 741-741.
- Western NY - *WIVB News* reports UBMD Psychiatry has established the COVID-19 Emotional Support Task Force to assist their fellow health care colleagues who are on the frontline. The tasks force consists of UBMD and UB psychiatrists, psychologists, social workers, and psychiatry residents and fellows, as well as therapists at the John R. Oishei Children's Hospital Children's Psychiatry Clinic. The task force created a hotline accessible 7 days a week from 8 a.m. to 8 p.m., which forward calls directly to cell phone of over a dozen psychiatrists who have volunteered. Article reports "all calls will be treated confidentially." The hotline number is (716) 859-2010.
- Mount Sinai launched the Center for Stress, Resilience and Personal Growth, which will aim to assist frontline health care workers who have been treating COVID-19 patients. Dr. Deborah Marin, a professor of psychiatry at Mount Sinai's Icahn School of Medicine will lead the center. The goal is open center by June. The article states, "The program will include support and "resilience" groups aimed at helping workers process and cope with their experiences — both at work and at home." The center will be open to all Mount Sinai staff.

NYC H & H

- NYC Health + Hospitals' "Help Healers Heal" program.
 - "The program offers frontline health care workers direct mental health support in the form of a dedicated, 24/7 behavioral health helpline staffed by psychiatrists/psychologists; peer support champions for one-on-one or group support; and 26 wellness areas across 11 hospitals and five skilled nursing facilities for staff to take a break from patient care areas. The program also supports wellness rounds at all facilities to actively engage employees working in areas heavily affected by COVID-19. Wellness rounds focus on identifying and supporting employees showing symptoms of anxiety, depression, fatigue and burnout, and connecting them to services if requested—including one-on-one telephonic, in-person debrief, or anonymous counseling."
- Mayor de Blasio and First Lady Chirlane McCray announced a collaboration between the U.S. Department of Defense (DoD), NYC Health + Hospitals, and Greater New York Hospital Association (GHNYA) to provide mental health programs to support health care workers and first responders on the front lines of the COVID-19 pandemic. The new program will tailor elements of the US DoD's combat stress management and resilience program for military

personnel into needs assessments and a webinar training series to be used in civilian healthcare and first responder settings across the city. Trainings are expected to be available by the end of the month.

- Behavioral health and staff support leaders at local hospitals will receive formal training from military subject matter experts. Those who receive training will facilitate trainings to mental health specialists, spiritual care and second victim program leads at their respective health care systems. The 'Train the Trainer' education will be available virtually on GHNYA hosted webinars for all participating NYC healthcare systems. To better support health care workers, in-person and virtual training sessions can be customized based on targeted needs assessments.
- The US Department of Defense-led webinar trainings will begin late next month for health care systems. NYC Health + Hospitals will begin to deploy trainers for facility-based trainings in early June. Source: <https://www1.nyc.gov/office-of-the-mayor/news/301-20/mayor-de-blasio-first-lady-mccray-collaboration-u-s-department-defense-help>

Other Resources

- Disaster Distress Helpline (*SAMHSA*)
Call 1-800-985-5990 or text TalkWithUs to 66746
- National Suicide Prevention Lifeline (*Link*)
Call 800-273-8255 or Chat with Lifeline
- Crisis Textline (*Link*)
Text TALK to 741741
- Veterans Crisis Line (*VA*)
Call 800-273-8255 or text 838255
- American Psychiatric Resource Page: <https://www.psychiatry.org/psychiatrists/covid-19-coronavirus>
- NYS Psychiatric Association: <https://www.nyspsych.org/covid-19-updates>

Other Helpful Links

COVID-19 Guidance for Medicaid Providers: https://health.ny.gov/health_care/medicaid/covid19/index.htm

DOH Provider Information: <https://coronavirus.health.ny.gov/information-healthcare-providers>

OMH COVID-19 Public Resources: <https://omh.ny.gov/omhweb/covid-19-resources.html>

OMH COVID-19 Guidance for Providers: <https://omh.ny.gov/omhweb/guidance/>

To Find COVID-19 Testing Location Near You: <https://coronavirus.health.ny.gov/covid-19-testing>

MSSNY's List of Resources for Physicians: <http://www.mssnyenews.org/covid-19/covid-19-update/>

NY Forward Plan & Access To Regional Dashboard: <https://forward.ny.gov/>

NYSPA Member Survey in the Time of COVID-19

We have developed an anonymous membership survey to determine how the current public health emergency is impacting you and your practice and how NYSPA can continue to assist its members and advocate on your behalf. Kindly complete the questions below and click “submit” at the end. We hope that you and your family are safe and well.

Question 1. What is your primary practice setting?

Solo Private Practice
Group Private Practice
Facility based, clinic staff
Facility based, administrative staff
Retired

Question 2. Enter the zip of code of your primary practice location.

Question 3. I accept the following insurance (select all that apply):

Medicare
Medicaid
In-network Commercial Insurance
Out-of-network Commercial Insurance
I don't take insurance

Question 4. During the public health emergency, I have been seeing patients as follows (select all that apply)?

In the office
Telemedicine (audio and video, including Facetime, Skype, etc)
Telephone (audio-only)

Question 5. Are you or your patients receiving timely and appropriate reimbursement for telemedicine services?

Yes
No

Question 6: How has your practice volume been impacted by the public health emergency (select all that apply)?

Seeing more patients
Seeing fewer patients
Seeing same number of patients
Seeing existing patients more frequently

Question 7: Has COVID-19 had a financial impact on your practice?

Negative financial impact

Positive financial impact

No financial impact

Question 8: Have you provided volunteer psychiatric services during the public health emergency?

Yes

No

Question 9: Any suggestions on how NYSPA can support you and your practice during this time:

May 19, 2020

MEDICARE COVERAGE FOR TELEPHONE-ONLY SERVICES

CMS has confirmed that the Medicare program will now cover audio-only telephone evaluation and management (E/M) services during the COVID-19 public health emergency. Payments will be retroactive to March 1, 2020 and will be increased to match standard fees for similarly-timed office and outpatient visits. Claims for telephone services that were previously denied or paid at the lower rate will be automatically reprocessed.

This new rule will permit reimbursement for E/M telephone codes 99441, 99442, and 99443:

99441 - Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical decision

99442 - 11-20 minutes of medical discussion

99443 - 21-30 minutes of medical discussion

These codes may be billed along with the traditional psychotherapy add-on codes (i.e., 90833 for a 30 minute session, 90836 for a 45 minute session and 90838 for a 60 minute session). However, as the telephone codes are time-based and not based on documentation of elements, we strongly suggest that when billing with an add-on code psychiatrists limit their use to 99441, which requires a minimum of five minutes of medical discussion. Codes 99442 and 99443 performed in connection with a psychotherapy add-on code will require longer than usual face-to-face time with the patient. If you plan to provide telephone (audio-only) services, you must use telephone service code 99441 in place of the traditional E/M code for office or outpatient visits (99212 or 99213).

Reimbursement will also be provided for the following CPT® codes provided via telephone:

90785 (interactive complexity)
90792 (psychiatric diagnostic evaluation)
90839 and 90840 (psychotherapy for crisis)
90845 (psychoanalysis)
90846 (family psychotherapy without the patient present)
90847 (family psychotherapy with the patient present)
90853 (group psychotherapy)

In addition, although not customarily required in connection with an E/M code, we recommend documentation of start and stop times for telephone sessions in order to confirm the time spent with the patient.

Please keep in mind that this new coverage is for services provided via telephone only

and should only be used during the pendency of the public health emergency. Telemedicine services provided via two-way audio-video technology should continue to be billed using the traditional E/M codes (e.g., 99212 or 99213) plus a psychotherapy add-on code. With respect to both telephone-only services and telemedicine services, the claim should be accompanied by modifier 95 (or other modifier required by the individual carrier). In addition, for such services provided during the public health emergency that otherwise would have been provided in an office or outpatient setting, continue to use Place of Service Code 11 until the emergency has ended.

To view the new fee schedules for telephone services please [click here](#).

For additional information, please see the APA page devoted to Telepsychiatry and COVID-19, which can be accessed by [clicking here](#).

PRACTICING
TELEPSYCHIATRY?

ACCESS FREE
RESOURCE >

MEDICAL PROFESSIONAL
LIABILITY INSURANCE

