



# MAG Fact Sheet

## COVID-19 FAQ

What steps is MAG taking to address the COVID-19 health care threat?

MAG is in day-to-day contact with the Georgia Department of Public Health (DPH), state leaders, and other key stakeholders to obtain the latest information and to let them know what issues physicians and medical practices in the state are dealing with and what resources they need to care for their patients. MAG is also working with DPH and others to get and disseminate the latest and most credible COVID-19 information so physicians and practice staff and patients in Georgia can make the best decisions.

Are there any good COVID-19 resources that MAG can recommend for physicians?

AMA's '[A Physician's Guide to COVID-19](#)' is a good resource. It addresses how physicians can protect themselves and their staff, which patients should be tested, how to manage patients who have COVID-19, who a physician should contact if one of their patients has COVID-19 symptoms, key messages for patients, and Medicare/Medicaid coverage.

Where else can physicians, practice staff and patients get credible COVID-19 information?

MAG has created a [COVID-19 Resource Center](#) that highlights some excellent resources, including the [CDC COVID-19 web page](#), the [Georgia DPH COVID-19 web page](#), and the [AMA COVID-19 Physician Resources web page](#).

What should a patient do if they are experiencing COVID-19 symptoms?

Patients who exhibit COVID-19 symptoms should call their primary care physician before they go to the doctor's office or an urgent care center or emergency room to ensure that they need to be examined or tested for COVID-19, and if it's determined that they need to be examined or tested they should go to a facility that's adequately equipped to perform a COVID-19 examination or test. If a patient needs to be tested, they should discuss their options with their primary care physician. These tests should be reserved for patients who have a physician's order.

Patients who have a fever or symptoms of a respiratory infection or who have been exposed to a person who has COVID-19, the flu, or any other communicable disease or who have recently traveled to an area that the CDC considers to be "high risk" should contact their doctor's office to determine if they should reschedule their appointments or surgeries.

Is there a shortage of COVID-19 testing supplies and kits?

Yes, medical practices need more supplies and kits to test patients who have COVID-19 symptoms. This includes medical-grade masks, gowns, eye/face shields, and gloves. One MAG member practice has reported that their supplier has told them that it could take up to six weeks to obtain medical-grade masks.

“Sani-wipes” and other disinfecting wipes are also reportedly in short supply.

### What can patients do to minimize their exposure to COVID-19?

Patients should follow CDC’s recommendations, which includes tele-working to the extent it’s possible, practicing “social-distancing” (i.e., avoiding large groups of people), and using “relentless hand-hygiene” practices.

### What else can patients do to avoid becoming infected with COVID-19?

- Wash their hands on a regular basis with soap and water for at least 20 seconds
- Use an alcohol-based hand sanitizer if soap and water isn’t available
- Avoid touching their eyes, nose and mouth with their unwashed hands
- Cover their mouth/nose when they cough/sneeze with a tissue
- Stay at home if they’re sick
- Avoid close contact with others if they’re sick
- Clean objects/surfaces that they touch on a regular basis
- Clean their electronic devices on a regular basis

### Are there any labs that can conduct COVID-19 tests?

Quest Diagnostics has announced that it can receive COVID-19 specimens and perform testing on a nationwide basis – although it stresses that, “This test has not been FDA cleared or approved or authorized (i.e., it has been validated by CLIA, but FDA’s independent review is pending).

Quest says, “This new test requires respiratory specimens be collected in appropriate health care settings, such as hospitals and physician offices. Quest Diagnostics Patient Service Centers and phlebotomy sites, including in-office phlebotomists, will not collect respiratory specimens, including those from patients suspected of having COVID 19. Patients should be prioritized for testing of COVID-19 if they meet the CDC criteria, including those who may have been exposed to the virus or had contact with someone confirmed to have COVID-19, who show signs and symptoms (e.g., fever, cough, difficulty breathing), or who live in or recently traveled to a place where transmission of COVID-19 is prevalent.” [Click for details on Quest Diagnostics’ COVID-19 tests.](#)

### Are insurers doing anything to make it easier for patients to get tested for COVID-19?

Georgia Insurance and Safety Fire Commissioner John King issued a directive that encourages insurance companies to “take proactive steps to better provide access to care for their customers during the current COVID-19 public health challenge.” It calls for “insurers to waive cost-sharing for in-network provider office, urgent care center, or emergency room visits when testing for COVID-19, particularly for those individuals with high deductible plans.” And it “instructs insurers to verify their provider networks are

adequate to handle a potential increase in volume of COVID-19 cases and calls on them to provide access to out-of-network providers at an in-network rate if they are not.”

Anthem, Inc. has announced that its plans will “cover the coronavirus screening test at no out-of-pocket-cost” and that “prior authorization is not required for diagnostic services related to COVID-19 testing.”

*MAG members and their practice staff can contact Ryan Larosa at [rlarosa@mag.org](mailto:rlarosa@mag.org) to report any issues that are related to the COVID-19 health care threat. With more than 8,400 members, MAG is the leading voice for physicians in Georgia. MAG represents physicians in every specialty and practice setting. Go to [www.mag.org](http://www.mag.org) for additional information.*

**What HIPAA-compliant applications can physicians use to deliver telehealth services?**

The U.S. Department of Health and Human Services (HHS) has announced that physicians **may use Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype** to provide telehealth services “without risk that OCR might seek to impose a penalty for non-compliance with the HIPAA Rules related to the good faith provision of telehealth during the COVID-19 nationwide public health emergency.”

HHS says that public facing applications like **Facebook Live, Twitch, TikTok, and similar video communication applications should not** be used to provide telehealth services.

HHS explain that, “Covered health care providers that seek additional privacy protections for telehealth while using video communication products should provide such services through technology vendors that are HIPAA-compliant and will enter into HIPAA business associate agreements (BAAs) in connection with the provision of their video communication products.”

The following vendors have indicated that they provide HIPAA-compliant video communications products and will enter into HIPAA BAAs...

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

[HHS ‘Notification of Enforcement Discretion for telehealth remote communications during the COVID-19 nationwide public health emergency’ notification](#)

**Are all Medicaid plans covering telemedicine under the revised COVID-19 policy?**

Yes. The Georgia Department of Health (DCH) says that “all CMOs and fee-for-service (FFS) plans are operating under the same revised policy.”

**Can the Composite Board expedite APRN protocol agreements?**

Yes, the Georgia Composite Medical Board (GCMB) can now expedite new protocol agreements for APRNs. Physicians and supervising APRNs should use the [template](#) that is available on the [GCMB](#) website. There is a “telemedicine” box in the agreement. GCMB says that it will approve these agreements in an “expeditious manner.” Physician assistants who have listed telemedicine in their protocol agreement job description are already authorized to use telemedicine; otherwise, a “simple [email] notification from the delegating physicians [to GCMB] will suffice.”

*Updated March 19, 2020.*