

March 13, 2020

How Physician Practices Can Prepare for Coronavirus

By Ericka Adler

Physician practices must be prepared to deal with the coronavirus pandemic. There are a variety of issues to consider, but the following should provide some guidance to our clients:

- 1. Medical practices, whether or not they are on the forefront of treating patients impacted by COVID-19, can expect to have healthcare workers who become ill with the virus. This may include physicians, nurses and non-professional staff. Medical practices should be aware of their legal obligations to workers who miss work for illness or to take care of family members. Employees must be allowed to use any paid time off or sick leave available under an employer's policies and any FMLA leave (if the employer is covered). Additional leave is at the employer's discretion and clearly this issue, and the affordability of paying for additional time off, is a challenge with which many practices will need grapple in the weeks ahead. Practices should talk with legal counsel as soon as possible to be well prepared.
- 2. It is essential that medical practices, like all businesses, have clear policies to address sick workers and enforce such policies for the health and safety of all. Employers have a right to send an employee home if the employee presents with COVID-19 symptoms but will not self-quarantine. A clear statement of the practice's COVID-19 guidelines should be posted prominently at the practice site(s) and shared with all staff members. It is recommended the guidance also be shared electronically (and in every other manner possible) so there is no misunderstanding of the practice's policies. Practice guidelines should follow CDC guidance. Some key items which are recommended include the following:
 - The practice should maintain confidentiality of employees with confirmed coronavirus infection and encourage the need for employees to reveal any positive test on themselves or a family member (or someone with whom they had contact). While confidentiality of tests results should be maintained as required by law, fellow employees of someone with confirmed COVID-19 should be informed. There also needs to be a review of CDC guidance for how to conduct a risk assessment of potential exposure and how it may also impact other staff and patients in the practice.
 - Sick employees and contractors must be required to stay home until they are symptom free for the time period recommended by the CDC. Send home any staff with symptoms and put in place policies to keep the office as virus free as possible.
 - Put into place flexible policies, such as no notes being required to validate illness or return to work, in order to lessen stress on the healthcare system.

For more guidance on practice requirements, please see the following:

U.S. Department of Labor Offers Guidance for Preparing Workplaces for Coronavirus

What You Should Know About the ADA, the Rehabilitation Act and the Coronavirus



- 3. Communication with patients is key not only to limit the spread of the virus but also to protect health care workers and the practice's reputation. Patients should be given a clear message of when to come (or not come) to the practice's office, what testing is (or is not) available and how patients can obtain information about the virus and any changes in practice hours, testing and guidance. Practices should be using email, social media accounts and practice portals often and effectively to make sure the message is clear. There are reports of patients showing up ill in offices that are unable to test for COVID-19 which increases risk to practice patients and workers and could reflect poorly on the practice.
- 4. There have been updates made to HIPAA policies in light of the pandemic and these can be found here. Make sure you are aware of the requirements to assure compliance.
- 5. Practices can consider looking to telemedicine as a possible way to help screen patients. Telemedicine requirements continue to be relaxed and updated in light of the pandemic. Some guidance is available here.

Additionally, be sure the practice is aware of special guidance that has been made available on billing for testing and services related to COVID-19. See here.

Many practices are considering options for servicing patients at home through onsite visits for PT, imaging and other possible services. This may be an option for practices to consider should communities be shut down or travel to physician offices become impossible. Patients still require medical care for illnesses unrelated to COVID-19 and finding a way to provide this treatment may become a challenge.

- 7. It is likely the pandemic will impact physicians and others who own, operate and manage physician practices. At such time it is essential the practice have a clear plan in place for decision-making should key personnel become unavailable. In the worst outcome where a practice owner should die, it is also important to think about documentation that may be in place to address practice succession. Such planning will help the family of the deceased as well as its key employees. Please talk with counsel for guidance on this issue as it is not too late to plan.
- 8. We have received calls from providers who are concerned about family members with particularly sensitive medical conditions who do not want to be required to work with potential COVID-19 patients to avoid the risk of becoming ill. Unfortunately, providers must continue to honor their contractual obligations and any hospital bylaw requirements unless they can obtain an exclusion, find someone to cover from them or take a permitted leave of absence. Physicians have no reason to expect that their legal obligations will not be enforced.

The pandemic facing the country at this time is unprecedented. It is not a time for panic, but for preparation.

Feel free to contact Ericka Adler by email eadler@ralaw.com or by phone at 312.582.1602 if you have any questions or concerns.



March 13, 2020

Ericka Adler, Manager

312.582.1602 | eadler@ralaw.com

Anna Moore Carulas

Practice Group Manager
Medical Defense/Health Care Litigation
216.615.7401 | <u>acarulas@ralaw.com</u>

Lesley Arca

312.582.1621 | larca@ralaw.com

Avery Delott

312.582.1636 | adelott@ralaw.com

David Hochman

312.582.1686 | <u>dhochman@ralaw.com</u>

Christina Kuta

312.582.1680 | ckuta@ralaw.com

Lee Levin

312.580.1248 | <u>llevin@ralaw.com</u>

John B. Waters

312.582.1685 <u>jwaters@ralaw.com</u>

This alert is informational only and should not be construed as legal advice. ©2020 Roetzel & Andress LPA. All rights reserved. For more information, please contact Roetzel's Marketing Department at 330.762.7725