

COVID-19 Update

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December 14, 2020

Dear Colleagues:

In order to provide updates on the evolving response and best practices related to the COVID-19 pandemic, AHP will be delivering brief, critical updates on an ongoing basis addressing important highlights and frequently asked questions.

TONIGHT: Forum on School and Community Healthcare Alignment for COVID

The Finger Lakes Reopening Schools Safely Taskforce together with other community stakeholders will be hosting its next online forum from **7:00 to 8:30 pm this evening, Monday, December 14th** for health care providers who care for children and youth to join a dialogue with the Monroe County Department of Health, school physicians, administrators and school nurses on COVID-19 screening and response related to schools. **Registration is required to attend this meeting. Please click [here](#) to register.** After registering, you will receive a confirmation email with information about dialing in to the event.

COVID Employee Screening, Testing and Monitoring Guidance for Private Practices

We have adapted the algorithm found [here](#) for practices requesting guidance on what to do when an employee is COVID suspected or positive. The important points from today's call and this document, which was adapted from Employee Health at the U of R, include:

- A **symptomatic** worker must isolate while awaiting PCR test results. If positive, he/she must continue to isolate for at least ten days following the result, and he/she may return to work only when, at the end of the isolation period, afebrile for 72 hours and if mild symptoms are improving.
- If a worker tests positive, the county health department will take over contact tracing, making the determination if exposures occurred, and notifying impacted individuals, including co-workers.
- If workers are appropriately wearing PPE and observing social distancing, exposure within the healthcare workplace is unlikely.
- An **asymptomatic** worker for whom testing has been ordered (due to DOH notification of an exposure or due to travel activity) may work while awaiting results, but must follow quarantine requirements outside of work until negative results are obtained.

What Clinicians Need to Know About the Pfizer COVID Vaccine

Click [here](#) to view the presentation from the CDC's recent presentation about the Pfizer COVID vaccine, including info about vaccine administration, contraindications, and guidance around vaccine safety for special patient populations.

Reporting COVID Test Results

As **we reported** in September, New York State requires providers that perform point-of-care testing to report all COVID and influenza test results via the Electronic Clinical Laboratory Reporting System (ECLRS). All test results (e.g., positive, negative, indeterminate) must be reported within 24 hours of receipt. If your practice is testing and resulting for COVID and

influenza at the point of care but does not currently report via ECLRS, contact the NYS ECLRS Help Desk (866-325-7743 or eclrs@health.ny.gov) for instructions on how to initiate reporting. Additional guidance can be viewed [here](#).

Practices may also choose to report positive results only to the DOH in the county of which their patient is a resident, but ECLRS is the best and mandated method of reporting. Positive results for residents of Monroe County may be faxed to the Monroe County DOH at 585-753-5188.

For providers collecting specimens but sending them out to be resultated, the lab will be responsible for reporting results via ECLRS. However, the executive order requires the ordering provider to inquire: (i) whether the individual receiving the test attends, works, or volunteers in a school, and if so, where; (ii) for the individual's place of employment; and (iii) for the individual's local address. Information obtained must be included in the ECLRS report, so that information must be shared with the lab via the requisition form.

TOMORROW: Behavioral Health Call - Tuesday, December 15th, 12:15 to 1:00 pm

Join the AHP Behavioral Health team as well as members from our pharmacy, care management and social work teams every Tuesday from 12:15 pm – 1:00 pm via Zoom and/or phone for just in-time, virtual consultation support for the behavioral health needs of both your pediatric and adult patients.

Users have two options for participation:

- Phone only: Dial 1 (646) 876-9923, enter Meeting ID 92843450755 and Password 702578
- Computer: Click the link below which has the password embedded <https://urmc.zoom.us/j/92843450755pwd=c2UxS0FJM3ISUXRVRXE5bTIBNmV5dz09>

Please note that December 15 will be the last behavioral health call in 2020. The Tuesday schedule will resume on January 5, 2021.

Next COVID-19 Response Call, Wednesday December 16th

Due to the increasing impact of COVID on the community, AHP's COVID-19 response calls will now be held at **12:15 pm every Monday and Wednesday. Our next COVID-19 Response teleconference will be held at 12:15 pm, Wednesday, December 16th.** Click on the Zoom link <https://urmc.zoom.us/j/98969184459> or dial in to (669) 900 6833, Meeting ID: 989 6918 4459

UPDATED: Excellus Reimbursement for COVID In-Office Testing

Excellus recently released the communication found [here](#) detailing recent updates to their administrative policy for PCR point-of-care COVID testing coverage, reimbursement and billing guidelines. **UPDATE: Excellus has confirmed that 87637 has been loaded and will be backdated to October 6, 2020.**

SAVE THE DATE: PPE Pickup, Wednesday, December 30th

Our next PPE pick-up will be held **Wednesday, December 30th between 9:00 and 10:30 am.** Eligible practices will be sent a survey link to communicate their current PPE needs, and detailed instructions for the pick-up will be provided early next week. Contact [Kevin Kelley](#) with any questions.

COVID Testing

Clinical Guidance - Serologic Testing

Primary care providers may consider ordering IgG antibody testing for:

- Individuals who have fully recovered from COVID-19 who are interested in donating convalescent plasma
- Pediatric patients with suspected or confirmed Multi-System Inflammatory Syndrome in Children (MIS-C)
- Patients who had illness suggestive of COVID but who were unable to receive PCR testing

Referring patients to UR Labs collection site for phlebotomy may be difficult due to volume of patients able to be accommodated, so community providers are advised to draw in the office and

send the tube (SST or standard red top tube) to the lab. For more information about the methodology and performance of UR Labs' testing assay, click [here](#).

Reimbursement Guidance - Serologic Testing

The only patient cohort for whom health insurance will reliably cover serologic testing are those patients who had symptoms consistent with COVID infection but who were unable to receive PCR testing, and thus antibody testing is being used to confirm prior COVID exposure. Provider claims for medically appropriate COVID-19 testing **MUST** be submitted with one of the following codes: CPT® codes U0001, U0002, U0003, U0004, 0202U, 86328, 87635, and/or 86769. These codes may be billed with diagnoses of B97.29, U07.1, Z03.818, and/or Z20.828 when appropriate.

Clinical Guidance: PCR Testing

In addition to testing for symptomatic healthcare and other essential workers and long term care residents, primary care providers may consider testing for the following patients:

- Mild to moderately symptomatic patients
- Patients whose living arrangements are not amenable to isolation (e.g., multi-generational household, limitations of physical space, etc.)
- Patients whose employers require evidence of testing either to return to work or to access benefits related to COVID status
- Patients who will be undergoing an aerosolizing procedure (e.g., exercise stress test, endoscopy procedure, transesophageal echocardiography [TEE])
- Pediatric patients with symptoms suggestive of Multi-System Inflammatory Syndrome in Children (MIS-C)
- Children with complex health needs whose specialized childcare providers (e.g., Daystar) require testing prior to returning

Antigen Testing

New York State recently updated their recommendations about potential allowances for use of COVID antigen testing in the schema for verifying COVID status. At this time, antigen testing is most helpful in hotspots and areas where a significant increase in testing is required (ZIP codes or school districts with high prevalence of COVID-19). With lower prevalence of COVID-19, the predictive value and risk of false negative testing remains high when using antigen or molecular testing compared with PCR. **A negative COVID antigen test requires a COVID PCR test to definitively remove the patient from isolation for presumed COVID.** Therefore, at this time we do not see a significant utility for antigen testing, but we will continue to update these recommendations as prevalence and recommendations evolve.

We continue to partner with Dr. Mendoza and County Health Department officials on preparedness and response protocols and will convey information as it becomes available.

Thank you for your continued collaboration in this important public health endeavor.

All the best,



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COVID-19 Resource Links

[Golisano Children's Hospital Coronavirus Information for Families](#)

Project Teach: Seven Ways to Support Kids and Teens Through the Coronavirus Pandemic, in [English](#) and [Spanish](#)

[American Academy of Pediatrics COVID-19 Site](#)

[Monroe County Health Department](#)

[CDC Coronavirus Site](#)

[New York Department of Health Coronavirus site](#)

COVID-19 Online Databases

- [Greater Rochester Area COVID-19 Tracker](#)
- [Monroe County COVID-19 Dashboard](#)
- [NYSDOH COVID-19 Tracker](#)
- [NYS Nursing Home Fatalities](#)
- [CDC Coronavirus Interactive](#)
- [Johns Hopkins COVID-19 Dashboard](#)

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