ASCO’s Response and Resources for Coronavirus Disease (COVID-19)

March 19, 2020
Speakers

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Agenda

- Situation Update: national & global
- ASCO’s response to COVID-19
- Advice on limiting transmission
- Legislative update
- Regulatory update
- ASCO’s Coronavirus Oncology Resource Center
Situation Update
Resources for Situation Updates

- World Health Organization: who.int
- Centers for Disease Control and Prevention: www.cdc.gov
- Johns Hopkins Bloomberg School of Public Health: coronavirus.jhu.edu
- National Conference of State Legislatures: www.ncsl.org
### Situation Update – March 18, 2020

<table>
<thead>
<tr>
<th>Region</th>
<th>Confirmed Cases</th>
<th>Past 24 Hours</th>
<th>Deaths</th>
<th>Past 24 Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western Pacific Region</td>
<td>91,845</td>
<td>312</td>
<td>3,357</td>
<td>23</td>
</tr>
<tr>
<td>European Region</td>
<td>74,760</td>
<td>10,911</td>
<td>3,352</td>
<td>604</td>
</tr>
<tr>
<td>South-East Asia Region</td>
<td>538</td>
<td>63</td>
<td>9</td>
<td>1</td>
</tr>
<tr>
<td>Eastern Mediterranean</td>
<td>18,060</td>
<td>1,552</td>
<td>1,010</td>
<td>140</td>
</tr>
<tr>
<td>Regions of the Americas*</td>
<td>4,979</td>
<td>2,243</td>
<td>68</td>
<td>18</td>
</tr>
<tr>
<td>African Region</td>
<td>233</td>
<td>42</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Global</td>
<td>191,127</td>
<td>15,123</td>
<td>7,807</td>
<td>786</td>
</tr>
</tbody>
</table>

*More recent data in ECDC report: 11,804 cases; 174 deaths*
Epidemic curve of confirmed COVID-19 cases, by date of report and WHO region, 18 March 2020
Geographic distribution of cumulative number of reported COVID-19 cases per 100,000 population, 19 March 2020
CDC Update, 18 March 2020

As of 16:00, March 18:
10,442 cases
150 deaths
State Actions

- Example state and local actions:
  - Funding appropriations
  - Sick leave and unemployment
  - Bans on public gatherings (10, 50, 100, 250)
  - Closure of schools, virtualization of classes
  - Closure of restaurants, movie theatres, etc.
  - Bans on non-essential or elective surgeries
  - Legislative or executive action to delay elections
  - San Francisco Bay: Shelter in place order (limited)
ASCO’s Response to COVID-19
Annual Meeting

ASCO is committed to delivering the latest cancer research to the global community in 2020 as we do every year. We put the safety and well being of our members, attendees, and their patients first and if we determine that our meeting cannot be held safely, we are planning alternative virtual approaches that will allow us to effectively fulfill our mission.

Regardless of format, ASCO will host a robust educational and scientific program. Abstracts will be published online and in the *Journal of Clinical Oncology* as always. A final decision on the meeting format will be made soon to allow participants adequate time to adjust their plans.

Thank you for your patience as we navigate this rapidly evolving situation and strive to deliver the latest cancer science and learning for the benefit of our patients.
Quality & Practice Health Initiatives

- **QOPI Certification Program:**
  - ASCO has suspended all March and April travel for on-site surveys for the safety of our Quality Oncology Practice Initiative (QOPI) Certified practices, patients, and staff. Certification extensions will be granted for all re-Certifying practices affected by this travel restriction and delay of on-site surveys.

- **Oncology Consulting Services:**
  - ASCO has suspended all March and April travel for on-site visits for the safety of our Consulting Services practices, patients, and staff. Planning conversations are continuing for visits during summer and fall. Remote, tele-consulting support is being provided for practices currently engaged with the consulting team, as well as, offered for practices interested in ASCO consulting resources and support.

- **Practice Engagement Program:**
  - Onsite visits to practices and participation in conferences have been suspended through April. These onsite visits will be converted to virtual meetings for presentation and demonstration purposes.
ASCO’s COVID-19 Resources
Approach to Answering COVID-19 Questions

**Clinical Care**
- Literature searches
- Expert insights from volunteers in ASCO clinical practice guideline programs

**Practice Operations**
- Practical application of CDC facility preparedness and infection control recommendations
- Expert panel from ASCO’s Clinical Practice Committee and Quality Care Council leadership

**State & National Policy**
- CDC, CMS, and other regulatory updates
- Communication with administrative & legislative contacts
- Information provided by partners & affiliates
Limiting Transmission
How to Protect Yourself in Public

- Know how it spreads:
  - Between people who are in close contact (~ 6 feet)
  - Through respiratory droplets produced when an infected person coughs or sneezes.

- Take steps to protect yourself:
  - Clean your hands often – soap & water for 20 seconds, 60%+ alcohol hand sanitizers.
  - Avoid touching your eyes, nose & mouth
  - Avoid close contact with people that are sick
  - Put distance between yourself and other people
How to Protect Yourself in Public

- Take steps to protect others:
  - Stay home if you are sick
  - Cover coughs & sneezes
  - Throw used tissues in the trash
  - Immediately wash hands with soap & water for 20 seconds
  - Wear a facemask if you are sick
  - If you are NOT sick, you do not need to wear a facemask in public
- Clean and disinfect frequently touched surfaces daily
- If surfaces are dirty, clean before disinfection
How to Protect Yourself in Clinic

- Limit entry points
- Screen patients & visitors upon arrival (BEFORE waiting room), outside or in dedicated area
- Immediately isolate patients with suspected infections
- All staff entering room with known or suspected infection should adhere to Standard Precautions and use a respirator or facemask, gown, gloves & eye protection
WHO Facility Training

Infection Prevention and Control (IPC) for Novel Coronavirus (COVID-19)

This course provides information on what facilities should be doing to be prepared to respond to a case of an emerging respiratory virus such as the novel coronavirus, how to identify a case once it occurs, and how to properly implement IPC measures to ensure there is no further transmission to HCW or to other patients and others in the healthcare facility.

This training is intended for healthcare workers and public health professionals, as it is focused on infection prevention and control.

Self-paced
Language: English

Enroll for this course
Coronavirus Preparedness & Response Supplemental Appropriations Act

- $8.3 billion package fully enacted
- Funding to multiple federal agencies
- Requires regular reporting
The Families First Coronavirus Response Act

- Insurance coverage for testing, funding for testing uninsured
- Medicaid federal funding increases
- Paid sick leave
- Family and Medical Leave Act extension
- Unemployment insurance
- Food assistance
What’s Next

- Congress continues work on a third emergency package
- Focus on economic stimulus to impacted industries
- Consideration of cash payments to individuals
Regulatory Update
New HCPCS codes for coronavirus lab tests

- Effective DOS Feb 4, 2020
- U0001 CDC lab testing
  - $35.91
- U0002 non-CDC lab testing
  - $51.31
  - Zero beneficiary cost sharing (Medicare)
  - Waived or reduced cost sharing (MA)
HHS Guidance

- Public Health Emergency effective January 27th
- CMS flexibility to support Medicare beneficiaries

- Licensure requirements for out-of-state providers waived
- Request for early prescription refills approved
- Prior Authorization may be waived in Medicare Advantage and Part D
- Coverage for COVID-19 vaccine, when it is available
**HHS Guidance**

**Telehealth**
- Waivers under Coronavirus Preparedness and Response legislation
- Effective: DOS March 6th
- Providers may waive or reduce cost sharing
- No penalties if physicians use popular video-chatting apps that are not HIPAA compliant
- CMS encouraging physicians to inform patients that telehealth is an option

**Original Medicare**
- **Telehealth**
  - All beneficiaries regardless of geography
  - Prior relationship requirement waived
  - Paid at in-person rates
  - Telehealth code [list](#)
  - Facility or in-home
  - Real-time audio and visual communication

**Medicare Advantage**
- No Geographic or format limitations
- Includes treatment and check-ins
- MAOs may waive beneficiary cost sharing
HHS Guidance

Community-based Technology Services
- Currently covered under Medicare
- Beneficiary cost sharing applies

Virtual Check-Ins
- Beneficiary Initiated
- Requires established patient relationship
- Any location
- Codes: G2010 or G2012

E-Visits
- Beneficiary Initiated
- Requires established patient relationship
- Any location
- Online patient portals
- Codes: 99421-99423, G2061-G2063
ASCO’s Coronavirus Oncology Resource Center
Coronavirus (COVID-19) Oncology Resource Center

- Available from asco.org
- Updated frequently
- Answers to COVID-19 questions
- Link to ask questions
- Key links and summaries of other resources
Thank You for Attending