



Florida Chapter of the American Academy of Pediatrics

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FCAAP's COVID-19 Related FAQs – Week Two

FCAAP worked with Drs. Mobeen Rathore, Tommy Schechtman, Lisa Gwynn, and Paul Robinson in the compilation of this FAQ sheet, providing information and resources in response to questions posted by Florida pediatricians. This information is provided as of April 7, 2020 and is subject to change without notice based upon new information, resources, and directives from federal, state, and local authorities and medical experts. The information shared in this FAQ will NOT be updated to reflect changes. Please visit the FCAAP COVID-19 resource page for the most up-to-date information. This information is provided only as general guidance and is not being offered as a medical or legal opinion.

QUESTION: If Florida begins more stringent self-isolation orders and well visits are delayed, can we expect an influx of catch-up well visits/immunizations in late summer and how we deal with this increase demand with back to school season?

RESPONSE: It's too early to predict what the future of pediatric health care will look like, but I expect "normal" will look quite different. I am afraid that well visits delayed during the spring may be "lost" forever as families will have many other priorities on their agenda. Demand for back to school physicals is no longer guaranteed. Pediatricians should begin strategizing on how best for their practice to re-connect with their patients and market the importance of the vital services we provide. We should take this opportunity positively to adapt to the new future. Some suggestions may include "ramping up" your telemedicine capabilities and encouraging patient portal adoption.

QUESTION: We have a Provider who is 73 year old with well controlled Type 2 Diabetes mellitus and hypertension with aortic murmur, who is in good health, exercises regularly and is asymptomatic, Can that provider attend Pediatric outpatient clinic to see patients exclusively for Physicals for one full day and another half a day ? Please advise, Thanks.

RESPONSE: That is a decision you will have to make with the provider. The 73-year-old is at an increased risk for severe diseases and complications, especially if they have underlying condition.

QUESTION: My first claim submitted to Florida Blue for a telehealth visit was not paid. The patient usually has a copay for and office visit, but this visit, coded with the 95 modifier at the 02 location, was shifted to the deductible. Should I just resubmit in a few weeks? Is it just too early for the Florida Blue juggernaut to be processing the claims as they have promised?

RESPONSE: Currently Florida Blue is still adhering to its policy applying regular cost-sharing rules (co-pays, deductibles) for telemedicine visits as it does for in-office visits. Please refer to [FCAAP's website](#) for more information on how payers are handling telemedicine and e-visits payments during the COVID-19 pandemic. Currently, Florida Blue is not allowing for e-visits (telephonic, portal) from the PCMH, instead they require their clients to utilize Tel-a-doc for these services. They do allow telemedicine (virtual) visits originating from the PCMH. The FCAAP has reached out to Florida Blue to explore other options for pediatricians to connect with their patients

QUESTION: Is there a place for physicians who are not on the front line forming a network, in conjunction with state and local health departments, for tracing cases and contacts? Has it been deemed too late for this to have an impact, or is there still a place for it? I believe many physicians who are currently providing well care, vaccines, and tele-visits for their non-COVID patients would be interested in helping the epidemiologists with their enormous task and would have the medical background needed for understanding the algorithms involved.

RESPONSE: The FCAAP experts are looking into this question. A response will be posted once available.



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QUESTION: I understand that the AAP is recommending that children up to 2 years old maintain their well child visits and immunizations. Would you also recommend the 4-5-year-olds and the 11-12-year-olds to come in for their immunizations - provided everyone is healthy?

RESPONSE: a. Yes, it is important that all children under 2 years old come to our offices for their normally scheduled well visits and immunizations. I believe we should do our best to continue to provide necessary anticipatory guidance and psycho-social support we usually provide during our well child visits for all ages during this pandemic. This can be accomplished either via telemedicine (of course physical examination is limited) or in the office setting. The later will depend on an individual practice's ability to manage safely well visits in their office setting and their community's epidemiology.