## This quarter's focus is: **COVID-19's Impact on Patient Behavior**



"I hate to say this doc, but I don't give a dam."

A study published in the Journal of the American Medical Association (JAMA) in May 2020, noted that Ambulatory Care Practices had a 60% drop in patient visits. With telemedicine and less stringent state orders, many physician practices have rebounded, but are nowhere near the pre-pandemic level. People remain afraid of waiting in offices due to the potential COVID-19 exposure and some that finally make their follow-up appointments end up "no-shows." Even pediatric well-child visits plummeted leading the American Academy of Pediatrics to start a campaign to prevent children from falling behind with immunizations.

Physicians are not only altering their practice, but are also noticing a change in *patient behavior* during the COVID-19 crisis. A survey of physicians was completed to understand the impact of COVID-19 on their physician practice. A total of 140 physicians responded from the following specialties: pulmonary medicine, oncology, neurology, and urology. Changes from a physician's perspective included the shift to telemedicine, the change in prescribing practice and the financial burden and anxiety related to running a practice and having to make choices regarding process changes and staff downsizing. Prescribing patterns were adjusted and changes included: shifting to medicines that did not require as much follow up or monitoring; prescribing medications that required less frequent dosing, or prescribing medications where side effects were more easily

managed. Practice environments changed with the physical barrier requirements with PPE and social distancing, to the shift with telemedicine being embraced by patients who have access to it, practitioners, and payors.

With respect to changes in patient behavior, the physicians surveyed noted changes specific to overall anxiety and financial stress. More specifically:

- Patients were discontinuing or skipping doses of medications due to cost,
- Patients no longer were able to afford medication and may not have been able to fill new prescriptions,
- Patients lost insurance coverage, and/or
- Patients requested changes in their prescriptions so that they could have less costly generic medication in place of their current regimen.

From a legal perspective, physician practices and health clinics, regardless of the new burdens related to COVID-19 compliance, continue to be accountable for the care provided to their patients. A patient's modification to a medication regimen that goes unnoticed or unreported, or failure to follow up on obtaining tests or tests results could put a patient's health at risk as well as increasing the prescribing physician's legal exposure.





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During a time of changing patient behavior, how can the health care provider better protect their patient's health and safety with regard to treatment management, while at the same time protect the practice from increased liability?

# ASSESSING A PATIENT'S CURRENT CONDITION AND BEHAVIOR — LOSS PREVENTION TIPS

#### Assess the impact of COVID-19 on each patient.

- What financial loss has taken place that may impact access to the treatment provided?
- How are they managing the related stress?

### Perform a thorough assessment during medication reconciliation

- Complete a thorough medication reconciliation to include:
  - Frequency of taking medication,
  - Dosage (is the full dose being taken each time),
  - When was the last refill, and,
  - What challenges are present

## Be clear on important instructions for patients that require follow-up appointments whether in-person or via telemedicine

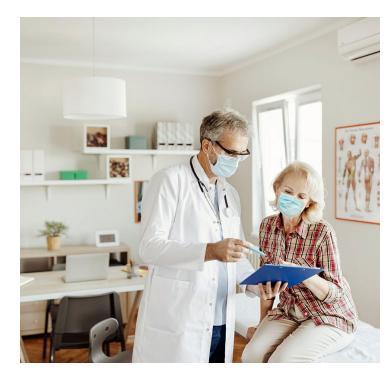
- If a test is prescribed, is there a timeframe? Will a follow-up appointment be required after?
- If an elective surgery is discussed, is there a chance that an elective issue could become more of an urgent issue?
- If there is a new finding on a remote visit, is an in-person visit warranted to minimize the risk of misunderstanding the new finding or failing to appreciate the severity?

Identify office outreach programs for patients. Considering asking vendors whether there are programs that patients can utilize.

Follow the most up-to-date practices from the CDC, and keep track of changes made and when.

#### **REFERENCES**

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