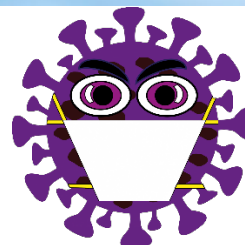




## *On the COVID-19 Front*



First and foremost, as we approach this holiday season with uncertainty of what the new year will bring, we are encouraged and hopeful a vaccine will soon be on the market and available for all. On behalf of WHA Information Center, we again want to thank you for your efforts, communication, and commitment to timely submission of discharge data during this difficult year.

### **Covid-19 Caveat**

A caveat was written for Q1 and Q2 to address the significant decline and fluctuations in the data related to COVID-19 for each data type. Quarter three is shaping up to be a little more in line with historical norms.

### **Additional COVID-19 Resources**

[ForwardHealth](#) has a nice web page dedicated to COVID-19. There's numerous resources and program specific COVID-19 information about the many programs run and maintained by DHS.

[CMS](#) has also been doing a good job of keeping up to date on changes to codes, coverage and reimbursement benefits.

### **BREAKING NEWS from the [AMA](#): CPT Codes for COVID-19 Vaccines Just Released**



Working closely with the Centers for Disease Control and Prevention, the CPT Editorial Panel has just approved a unique CPT code for each of two coronavirus vaccines as well as administration codes unique to each such vaccine. The new CPT codes clinically distinguish each coronavirus vaccine for better tracking, reporting and analysis that supports data-driven planning and allocation. Importantly, these CPT codes are available prior to the public availability of the vaccines to facilitate updating of health care electronic systems across the U.S.



## WIpop News!

### WIpop Education and Training

Due to COVID-19, we hosted three virtual WIpop Submitter and User Education webinars in November using Microsoft Teams. Two of the sessions targeted hospitals and the third focused solely on ASCs.

We had just over 130 participants combined for the three sessions, which represented 173 facilities that submit, edit or work the WIpop files. For those that were unable to participate in the live (online) events, The presentations and a recording of the second session is posted on our website in the Education & Training section: [2020 Virtual WIpop Training](#)

If there is enough interest, we will offer an abbreviated pick-up training session on December 16, 2020 from 10-11:00 A.M. In order to gauge interest, please [register here](#).

#### *Below are a few of the most important highlights covered at training:*

1. Navigating the newly redesigned website with fewer clicks and frustration.
2. WHAIC does not add new users. Please review the roles and registration process.
3. Report Update: Unknown Payer Report now includes the name of the payer and the mapped code it was assigned to. This report alone should help facilities to audit and better manage payer mapping.
4. **2021 Updates:** Submission response emails will be clearer, with better instructions with 2021 “Alerts” added. Examples of alerts will be unknown payer, declined race, patient over 65 with non-Medicare payer, payer codes to be “faded out” in the future, possibly others to be determined. The number of alerts will be summarized on the batch submission email. Alerts will also appear on the WIpop edit screen. Although individual alerts are informational, not errors that need to be corrected, a high volume of the same type of alert may indicate an area of concern to be addressed.
5. **\*\*2021 Updates to the Expected Source of Payment and 837 Payer Mapping** – this is a big change and one that was recently endorsed by the WHAIC Data Advisory Committee (DAC).
  - a. To minimize confusion and maximize the results of the data outputs, some of the payer codes will be combined with like codes and then phased out. For example, OTH 21 and OTH 31 both address self-funded, private insurance and/or benefit plan administrators. There’s no reason to keep both codes so OTH 21 will be the main code and *OTH 31 will be phased out*.
  - b. The Payer Table will be updated in 2021 with the Phased-OUT codes grayed out leaving the relevant codes in use.
  - c. We also decided that this it is not necessary to ask hospitals and ASCs to identify if a payer or plan is an HMO or FFS plan. There are too many variables in these decisions.
  - d. You do not need to remap everything. Our objective is to work towards accurate mapping to the betterment of the data.
  - e. For more information, refer to the [2020 Training PowerPoint](#).



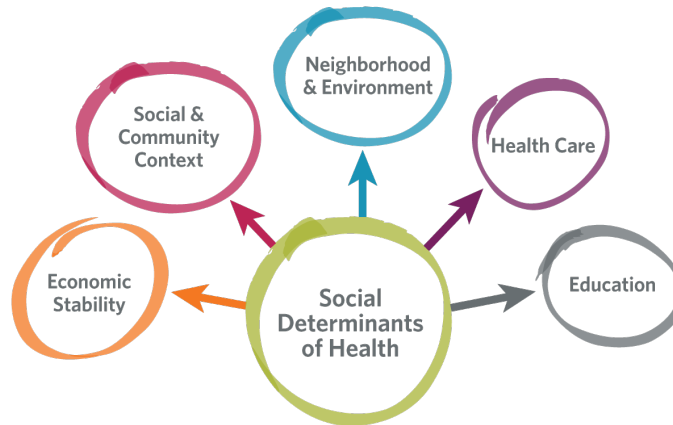
## 2021 Social Determinants of Health Care

Throughout 2021 WHAIC will make a continuous effort to improve our outward dashboards and incorporate community health surveys to provide the data users a more robust dataset.

### [Understanding Social Determinants of Health \(SDoH\)](#)

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as “place”. (Social Determinants of Health, 2020)

Our senior leadership team and the WHAIC staff will continue to work with hospitals to find areas of improvement on asking, recording and coding of the patient SDoH data in the EMR and claim files.



***Thank you for your time and attention. We wish you and yours a happy and safe holiday season!***

