FOR IMMEDIATE RELEASE: COVID-19, Novel (new) Coronavirus information within the Collective platform

March 5, 2020

Background

COVID-19 is an illness caused by a new coronavirus. The situation in Oregon regarding this infection is evolving. As cases of COVID-19 are diagnosed, and individuals present themselves at hospitals with health concerns, it is possible that end users of the Collective platform may begin to see information in the system related to a patient with whom there is a HIPAA-covered relationship. This is an opportunity to better understand how the Collective platform relays patient information.

Patients in the platform with "coronavirus" or "COVID-19"

Users of the Collective platform should follow their organizational procedures for interactions with patients experiencing flu symptoms or who have been identified with an infectious disease.

Users are encouraged to stay up-to-date on COVID-19, by signing up for Oregon Alerts and/or by visiting the CDC Coronavirus website.

How to tell the difference in the platform between self-reporting, differential diagnosis, and final diagnosis

Self-Reporting by a provider of a patient's Chief Complaint

Self-reporting coronavirus does not mean the patient has COVID-19. When a patient is admitted to a hospital, a patient's Chief Complaint (i.e., nausea, vomiting, fever) is registered within the hospital electronic health record (EHR). This data is sent through a hospital Admit, Discharge, Transfer (ADT) feed and is pulled into the Collective platform as patient encounter history. As patients visit hospitals with concerns of COVID-19, you may see the words "coronavirus" or "COVID-19" show up on the Patient Encounter page. A Chief Complaint will not have an ICD-10 code preceding it. End Users can drill down into the Encounter detail by clicking the blue highlighted Encounter Date under the Encounter section to see additional details.

Differential Diagnosis (physician use of ICD-10 Code)

A Differential Diagnosis with ICD-10 narrative in Chief Complaint or Primary Diagnosis does not mean the patient has COVID-19. A Differential Diagnosis is made by a physician who has assessed a patient's symptoms, medical history, basic laboratory results, and performed a physical examination. After careful

assessment of a patient, if a physician feels a test for COVID-19 is necessary, the physician may add an ICD-10 code to a patient's Chief Complaint or Primary Diagnosis. After developing a Differential Diagnosis, a physician will perform additional tests to rule out specific conditions or diseases and come to a final diagnosis. When reviewing a patient in the platform, a user may see a Differential Diagnosis related to COVID-19 within an Encounter under Diagnoses or Chief Complaint. An ICD-10 entry by a provider will contain a "coronavirus" descriptor and a code (typically B97.29). Users can drill down into the Encounter detail by clicking the blue highlighted Encounter Date under the Encounter section to see additional details.

Final Diagnosis

Final Diagnosis is made once the physician has performed all necessary evaluations and tests. <u>Final Diagnoses are not always updated within the Collective platform depending on how a hospital has set up their Admit, Discharge, Transfer (ADT) feed. Once a patient has been tested for COVID-19, currently it may take one to two days before a physician knows the patient test results and updates the Final Diagnosis.</u> If test results are positive, an ICD-10 entry by a provider will contain a "due to COVID-19" descriptor (e.g., pneumonia due to COVID-19, or acute bronchitis due to COVID-19). Additionally, there are two status entries which may be entered as ICD-10 codes and show up under Discharge Diagnosis: 1) Encounter for observation for suspected exposure to other biological agents ruled out, and 2) Contact with and (suspected) exposure to other viral communicable diseases. There may also be information related to Final Diagnosis included under Discharge Disposition, either hospital discharge or discharge from the emergency department. Users can drill down into the Encounter detail by clicking the blue highlighted Encounter Date under the Encounter section to see additional details.

Discharge planning and care coordination

If you are an ED or inpatient treating physician, OHA recommends that you include the Discharge Diagnosis, so other providers are aware of the outcome of the COVID-19 test results. If you are a community provider, OHA recommends that you reach out to the discharging hospital provider to confirm test results in preparation for scheduling the patient for ongoing outpatient care.

IT support and help

If you are working at a hospital, health plan, or health system and have a process that might be supported through a cohort or notifications to track patients in your population, please contact support@collectivemedical.com.

Questions

- If you have further questions about the Collective Platform, please email: support@collectivemedical.com
- If you have further questions about COVID-19, please visit the Oregon Health Authority website to access an FAQ and see the latest situational updates.