



# Preserving Women's Health COVID-19 Newsletter

## NAVY MEDICINE FEMALE FORCE READINESS CLINICAL COMMUNITY (FFRCC)

*The FFRCC developed this Newsletter with the purpose of supporting providers amidst emerging challenges related to COVID-19 and ensuring the continuous delivery of quality care to active duty service women under current circumstances. Please provide any further information, best practices, or resources to address patient and provider needs during this time to the BUMED Office of Women's Health.*

*Disclaimer: Any mention of commercial services or applications is provided as a matter of common interest and is not intended as an endorsement.*

## 01. DISPROPORTIONATE IMPACT OF COVID-19 ON WOMEN

Many challenges caused by the pandemic disproportionately affect women. Because women are more likely to be employed in fields considered as essential (data demonstrates that one in three jobs held by women has been deemed essential) women face a greater workplace risk. Women are also more likely to manage childcare demands resulting from school closures. 18,000 out of 51,000 single parents in the Active Duty Component are women, and travel restrictions as well as the impact of COVID-19 on the elderly has restricted the activation of many Family Care Plans, leaving thousands of service women sole caregivers for their families. To support service members managing childcare and distance learning, the Association of Defense Communities has developed a repository of at-home education resources. In addition, Online Movement Resources can help parents get their families moving. Information on childcare for military families during COVID 19 can be found here.

Social distancing measures under COVID-19 also exacerbate the risk of violence against women by increased isolation and decreased access to services. Service women can find information on coping with violence at home during the pandemic here. There is also specific guidance available on reporting domestic violence through military channels available.

## 02. MENTAL HEALTH RESOURCES

Living through a pandemic **increases challenges to mental health** through isolation, financial insecurity, reduced access to usual coping strategies, and disrupted routines. The following resources provide guidance for leaders and providers to maintain their own mental health and support those around them.

- **COVID-19 Anxiety Workbook:** This workbook includes a series of resources designed to help individuals manage their anxiety during COVID-19. This resource includes exercises focused on self-care and stress management as well as techniques for breathing and cognitive restructuring.
- **Navy Leader's Guide to Managing Sailors in Distress:** This resource provides information for leaders to help their Sailors manage distress and promote healthy coping mechanisms.
- **Provider Resources: Coping during COVID-19:** These resources offer support for providers to help manage the acute stress of treating patients during the coronavirus pandemic.
- **Virtual Wellness Resources:** These resources provide wellness tools and information for a variety of audiences, including healthcare providers, service women, parents, and more.

## 03. PRACTICE GUIDELINES

The Defense Health Agency (DHA) has provided updated guidance on COVID-19 Virtual Encounter Coding Scenarios with example encounters to help providers code different virtual patient interactions. DHA has also provided a COVID-19 Medical Coding Frequently Asked Questions (FAQ) document with guidance on common concerns among providers about proper medical coding practices and information on universal codes that may be helpful during this time.

Key takeaways on updating coding guidance include:

- Add the Healthcare Common Procedure Coding System (HCPCS) “T2025” procedure code in the ‘Assessments & Plan’ section for credit for an appointment rather than a teleconference.
- In the ‘Disposition’ portion of the encounter, use 99213, 99214, 99215 (Established Patient) and 99203, 99204, 99205 (Initial Patient) rather than the 99499 (Evaluation and Management (E&M)) codes according to time spent counseling the patient and discussing plan of care.
- Use the GT modifier under “Additional E&M codes” to identify it as a telehealth visit.

In addition, a compilation of information on COVID-19 and resources to help you and your Commands navigate this pandemic can be found within the High Reliability Network SharePoint Site [here](#). The SharePoint site includes links to leading sources with recent guidance related to the COVID-19 pandemic as well as COVID-related documents organized into folders based on topic.

## 04. REPRODUCTIVE HEALTH

In light of the COVID-19 pandemic, the American College of Obstetricians and Gynecologists (ACOG) has released [information to guide providers](#) caring for pregnant women as well as [patient education resources](#) to address patient concerns about how COVID-19 may affect their pregnancy. In their guidance, ACOG emphasizes that all healthcare professionals must remain vigilant in [screening for exposure as well as symptoms](#) of COVID-19 for all patients, including pregnant patients. This can be done via phone or telehealth before a visit to allow facilities to appropriately prepare. ACOG encourages obstetricians and gynecologists (OB/GYNs) to acknowledge that these are unsettling and anxiety-inducing times when counseling pregnant individuals about COVID-19. OB providers are encouraged to consult the [FAQ document](#) provided by ACOG for more information on common concerns among patients and providers.

## FURTHER RESOURCES

As we weather the impact of COVID-19, it is of utmost importance that we continue to work together as a community to ensure continued provision of critical women’s healthcare and share best practices to promote wellbeing. In addition to the articles and guidance summarized within this newsletter, there are more resources available on the FFRCC SharePoint Site, found [here](#).

