CMS Expands Telehealth Coverage to Widen COVID-19 Care

The move is part of the national response to the coronavirus outbreak.

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Expanded Medicare coverage for telehealth visits is one of several recent measures the federal government is taking to counter the COVID-19 outbreak from the Centers for Medicare and Medicaid Services.
Beneficiaries could pay clinicians for telehealth services with Medicare coverage under certain circumstances previously, such as if an individual receiving medical services lived in a rural area and had to travel far to receive treatment. But the March 13 White House national emergency declaration over the COVID-19 pandemic is expanding the range of telehealth services that beneficiaries can cover with Medicare.

“Medicare beneficiaries will be able to receive various services through telehealth including common office visits, mental health counseling and preventative health screenings,” according to a CMS news release. “This change broadens telehealth flexibility without regard to the diagnosis of the beneficiary because at this critical point it is important to ensure beneficiaries are following guidance from the CDC including practicing social distancing to reduce the risk of COVID-19 transmission.”

A CMS fact sheet also highlights that the telehealth coverage expansion will also allow a wider range of providers — such as doctors, nurse practitioners, clinical psychologists and licensed social workers — to offer telehealth to their patients.

Further, the Department Health and Human Services Office of Inspector General is expanding flexibility for providers to reduce or waive cost-sharing for telehealth visits paid through federal health programs.

The HHS Office for Civil Rights announced it will also waive potential penalties under the Health Insurance Portability and Accountability Act, which safeguards how patient health information is shared. CMS Administrator Seema Verma said in a Tuesday press conference that easing HIPAA requirements will more easily allow providers to provide telehealth with their own phones.

“OCR will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA Rules against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency,” HHS OCR said in a statement.

CMS released a fact sheet detailing three different kinds of virtual services that providers can conduct for Medicare beneficiaries: Medicare telehealth visits, virtual check-ins and e-visits.
Medicare telehealth visits would be conducted in the same fashion and paid at the same rate as typical in-person appointments. Beneficiaries would pay for their telehealth services under the Physician Fee Schedule, more specifically.

Virtual check-ins will enable brief communication services with providers through telephone or other virtual telecommunication platforms. CMS recommends that practitioners educate beneficiaries on the availability of virtual check-ins, which can also only be reported when billing practices have established relationships with their respective patients.

E-visits are the least formal of the three telehealth services and involve a non-face-to-face patient-initiated communication with providers through online patient portals. These services are also intended for patients who have preexisting relationships with their providers and require patient consent for these virtual check-in services.

HHS officials highlighted that expanding these services will provide cost-effective, flexible and fast communication between providers and patients amid the growing cases of COVID-19, while also supporting social distancing practices that the Centers for Disease Control and Prevention recommends in its COVID-19 countermeasures.

“Providers will be allowed to use everyday technologies to talk to telehealth patients, more telehealth services will be covered for millions more Medicare beneficiaries, and providers will be allowed to offer these telehealth benefits to Medicare beneficiaries at a lower cost than traditional services,” HHS Secretary Alex Azar said in a statement.

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