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Expansion of Telehealth with 1135 Waiver COVID-19 Public Health Emergency Declaration

Background:

Beginning March 6, 2020 Medicare will expand payment for office, hospital, and other visits furnished via telehealth across the country. Payment will be made for professional services furnished to beneficiaries in all settings, including the patient's home.

- Payment for services delivered via telehealth are the same as if those services were delivered in person.
- While Medicare coinsurance and deductibles would generally apply for these services, HHS OIG is providing flexibility for providers to waive or reduce cost sharing for telehealth visits paid by federal programs.
- HHS OIG will not enforce the established patient requirement for telehealth service claims submitted during the public health emergency.
- HHS Office for Civil Rights (OCR) will not impose penalties for HIPAA noncompliance violations against health care providers make good faith provision of telehealth services.
- Allows the use of cell phones that have video capability for telehealth services.

Issues that Still Need to Be Addressed

Telehealth Services Furnished by Residents: There is a question of whether residents are allowed to furnish telehealth services. We recommend that CMS interpret its rules to allow residents to provide telehealth services for the types of services (such as screenings) that residents are permitted to provide under the primary care exception for evaluation and management services which would include remote supervision

E-Consults: CMS has greatly expanded opportunities for the use of telehealth and is providing flexibility for providers to waive or reduce cost sharing for telehealth visits paid by federal programs. We ask that CMS apply similar flexibility to enable greater use of interprofessional electronic consultations (aka eConsults), and other forms of remote care delivery.

Telehealth Services and State Licensing: The AAMC is pleased that Secretary Azar has asked states to take immediate action to waive licensure requirements to allow for in person and telehealth services to be delivered across state lines. The AAMC strongly supports waiver of license requirements consistent with model language that has been developed. The waivers should cover in-person, telehealth, and mental health services provided by universities to their students who no longer are on campus but still require this support.

Telehealth Services by Phone: Currently audio and video is required for telehealth services to be covered by Medicare. We recommend that audio only communication be permitted during the emergency.

Provider Enrollment: The requirement that physicians contact the enrollment hotline and add their home as a place of service to provide telehealth from their home should be waived or practices should be allowed to provide a master file for enrollment at these locations.

Resources

CMS FAQ Document: <https://edit.cms.gov/files/document/medicare-telehealth-frequently-asked-questions-faqs-31720.pdf>

CMS Telemedicine Fact Sheet: <https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>

HIPAA: <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html>

OIG Waiver of Cost-Sharing: <https://oig.hhs.gov/fraud/docs/alertsandbulletins/2020/policy-telehealth-2020.pdf>

General Telemedicine Toolkit: <https://www.cms.gov/files/document/general-telemedicine-toolkit.pdf>

Provider Enrollment Guidance: <https://www.cms.gov/files/document/provider-enrollment-relief-faqs-covid-19.pdf>