

## Physician Guide on CMS Flexibilities to Fight COVID-19

The Trump Administration is issuing an unprecedented array of temporary regulatory waivers and new rules to equip the American healthcare system with maximum flexibility to respond to the 2019 Novel Coronavirus (COVID-19) pandemic.

**Medicare Telehealth** Clinicians can now provide more services to beneficiaries via telehealth so that clinicians can take care of their patients while mitigating the risk of the spread of the virus.

1. Under the public health emergency, **all beneficiaries across the country can receive Medicare telehealth** and other communications technology-based services
2. **No originating site requirement**
3. **Clinicians can provide these services to new or established patients.**
4. **Providers can waive Medicare Copayments** for telehealth services for beneficiaries in Original Medicare.
5. **Many new services are included in Telehealth,**  
A few of them are listed below
  - a. **Initial nursing facility visits**  
All levels (Low, Moderate, and High Complexity) and nursing facility discharge day management (CPT codes 99304-99306; CPT codes 99315-99316).
  - b. **Critical Care Services**  
(CPT codes 99291-99292)
  - c. **Home Visits**  
***New and Established Patient***  
All levels (CPT codes 99341- 99345; CPT codes 99347- 99350).  
***Home visits services***  
(CPT codes 99341-99350)  
It can be billed when services are provided in the beneficiary's private residence.  
*To bill these codes, physicians must be physically present in the beneficiary's home however these requirements are now waived.*
  - d. **Care Planning for Patients with Cognitive Impairment**  
(CPT code 99483)  
It can be billed once per 180 days with a payment Amount of \$289.79

**6. Removal of Frequency Limitations on Medicare Telehealth:**

The following services no longer have limitations on the number of times they can be provided through Medicare telehealth:

- a. A subsequent inpatient visit can be furnished via Medicare telehealth, without the limitation that the telehealth visit is once every three days (CPT codes 99231-99233);
- b. A subsequent skilled nursing facility visit can be furnished via Medicare telehealth, without the limitation that the telehealth visit is once every 30 days (CPT codes 99307-99310)
- c. Critical care consult codes may be furnished to a Medicare beneficiary by telehealth beyond the once per day limitation (CPT codes G0508-G0509)

**7. No face-to-face visit requirement for evaluations and assessments:**

To the extent that a National Coverage Determination (NCD) or Local Coverage Determination (LCD) would otherwise require a face-to-face visit for evaluations and assessments, clinicians would not have to meet those requirements during the public health emergency.

**8. No requirement for In-person visits for nursing home residents:**

CMS is waiving the requirement in 42 CFR 483.30 for physicians and non-physician practitioners to perform in-person visits for nursing home residents and allow visits to be conducted, as appropriate, via telehealth options.

**9. Virtual Check-Ins & E-Visits for both new and established patients:**

Clinicians can provide virtual check-in services (HCPCS codes G2010, G2012) to both new and established patients. Virtual check-in services were previously limited to established patients.

**10. Remote Patient Monitoring allowed for both acute and chronic conditions and patients with only one disease:**

Clinicians can provide remote patient monitoring services to both new and established patients. These services can be provided for both acute and chronic conditions and can now be provided for patients with only one disease.

**Accelerated/Advance Payments' repayment to begin after 120th day**

In order to increase cash flow to providers impacted by COVID-19, CMS has expanded the current Accelerated and Advance Payment Program. Traditionally repayment of these advance/accelerated payments begins at 90 days, however for the purposes of the COVID-19 pandemic, CMS has extended the repayment of these accelerated/advance payments to begin 120 days after the date of issuance of the payment.