

# CMS Expands Access to Telehealth Benefits During COVID-19 Outbreak | Oncology Practice Management

The Centers for Medicare & Medicaid Services (CMS) has broadened access to Medicare telehealth services so that beneficiaries can receive a wider range of services from their physicians without having to travel to a healthcare facility. Clinicians can bill immediately for services starting March 6, 2020.

The policy change builds on the regulatory flexibilities that are now in place under the president's emergency declaration. CMS is expanding this benefit on a temporary and emergency basis under the 1135 waiver authority and the Coronavirus Preparedness and Response Supplemental Appropriations Act. The benefits are part of the broader effort by CMS and the White House Task Force to ensure that all Americans—especially older adults and those with underlying health problems, such as lung conditions, diabetes, or heart issues—are aware of easy-to-use, accessible benefits while helping to contain the community spread of the coronavirus disease, COVID-19.

“The Trump Administration is taking swift and bold action to give patients greater access to care through telehealth during the COVID-19 outbreak,” said the administrator of CMS, Seema Verma, during the White House briefing. “These changes allow seniors to communicate with their doctors without having to travel to a healthcare facility so that they can limit risk of exposure and spread of this virus. Clinicians on the frontlines will now have greater flexibility to safely treat our beneficiaries.”

Before this policy change, Medicare was only permitted to pay clinicians for telehealth services such as routine visits in certain circumstances. For example, the beneficiary receiving the services must live in a rural area and travel to a local medical facility to use telehealth services from a physician in a remote location. In addition, the beneficiary would generally not be allowed to receive telehealth services in their home.

Now, Medicare beneficiaries will be able to access services, including routine office visits, mental health counseling, and preventive health screenings, via telehealth. This will help to ensure that Medicare beneficiaries, who are a high-risk population, can have some of their healthcare needs met remotely, thereby reducing their exposure to the virus. For example, a Medicare beneficiary can consult with a physician about his or her diabetes management or refilling a prescription via audio and video technology without having to travel to the physician's office. As a result, the physician has more time available to treat patients who require care in person.

This policy change comes at a critical time when many hospitals and healthcare practices across the United States are already operating at high capacity. Workers and administrators have expressed ongoing concern regarding shortages of medicines, equipment, hospital beds, and personnel. The new policy allows healthcare institutions the flexibility of offering some medical services to patients online, so that facilities such as hospital emergency departments are available to deal

with more critical cases.

Telehealth services are paid under the Physician Fee Schedule at the same amount as in-person services. Medicare coinsurance and deductibles still apply for these services. In addition, the Health and Human Services Office of Inspector General is providing flexibility for healthcare providers to reduce or waive cost-sharing for telehealth visits paid by federal healthcare programs.

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**Source:** [www.cms.gov/newsroom/press-releases/president-trump-expands-telehealth-benefits-medicare-beneficiaries-during-covid-19-outbreak](http://www.cms.gov/newsroom/press-releases/president-trump-expands-telehealth-benefits-medicare-beneficiaries-during-covid-19-outbreak)