



## Medicare Changes Telehealth Rules Again!

Medicare issued another change to telehealth rules on April 30, 2020 with an interim final rule with comment period (IFC). CMS releases a second IFC with policy changes during the public health emergency. Although it is titled “with comment period,” CMS is making these changes effective immediately, not after a 60-day comment period. Some of those changes are retroactive to March 2020.

The rule outlines changes to a number of issues including: 1) Advance practice providers ordering and furnishing diagnostic tests; 2) Hospital outpatient departments; and 3) Hospital based clinics billing an originating fee. However, the most significant change for physicians is the new rule regarding payment for Telephone Calls.

### Telephone calls, audio only, 99441 – 99443 will be paid at rates for 99212-99214

These are now considered telehealth services. Continue to use these codes for audio only visits, but the reimbursement will be higher. CMS is not recognizing 98966 – 98968, which is what they said in their 2020 Final Rule. Continue to use the telephone codes 99441 – 99443 for E/M services provided through audio only. CMS has increased the reimbursement for those codes. This section of the rule refers back to the March 30, 2020 rule and appears to take the effective date of March 1, 2020.

CMS has cross-walked the value for 99441 – 99443 to the values for 99212 – 99214. CMS has previously said that these phone call codes could be used for new or established patient visits, during the PHE, but there is no crosswalk to new patients in this interim rule.

	2020 wRVU	National non-facility payment	National facility payment
99211	0.18	\$23.43	\$9.37
99212	0.48	\$46.13	\$26.31
99213	0.97	\$76.04	\$52.26
99214	1.50	\$110.28	\$80.37
99215	2.11	\$148.12	\$113.53

### Times for E/M service codes 99201 – 99215

In the March rule, CMS published different typical times for E/M services done via telehealth based on time. CMS now says that stakeholders told them that was too confusing. Use CPT times.

*Some other quick notes:*

- CMS is paying for serology testing for COVID-19
- PT and OT can provide services via telemedicine. This was announced in the 4/29/2020 “COVID-19 Emergency Declaration Blanket Waivers for Health Care Providers”
- NPs and PAs may now certify and recertify HHA services. The CARES Act required CMS to allow NPs and PAs to perform services related to ordering HHA services previously restricted to physicians. The CARES Act gave CMS 6 months from enactment of the law to enact these changes. These are enacted in this rule. The state must allow this within their scope of practice for these professionals.