
Telehealth Benefits in Medicare are a Lifeline for Patients During Coronavirus Outbreak

Mar 09, 2020

Program's benefits help patients access their provider without visiting the office

The Centers for Medicare & Medicaid Services (CMS) issued a fact sheet with additional guidance for healthcare providers and patients about the telehealth benefits in the agency's Medicare program. The fact sheet is part of a broader effort by CMS and the White House Task Force to ensure that all Americans – particularly those at high-risk of complications from the COVID-19 virus – are aware of easy-to-use, accessible benefits that can help keep them healthy while helping to contain the community spread of this disease.

“As we continue to learn about the COVID-19 virus, it's important for all Americans, and particularly vulnerable populations who are at heightened risk, to be able to access their providers when they feel sick or have questions” said CMS Administrator Seema Verma. “Over the last three years, President Trump's leadership and historic efforts have made it possible for doctors to bill for their time on the phone or video chat with patients to help triage medical issues. Today, a patient who is not feeling well can call their doctor to decide whether or not they need to go in for a visit, offering solutions and peace of mind immediately.”

CMS' historic effort made virtual check-ins and other services that use telecommunications possible with new policies implemented in 2019 and 2020. These services are available right now to patients and their physicians, providing a great deal of flexibility and an easy way for patients who are concerned about illness to remain in their home avoiding exposure to others. With the COVID-19 virus, there is an urgency to expand the use of virtual care to keep the beneficiaries with mild symptoms in their homes while increasing access to their provider's office.

For the beneficiary, these benefits can be very helpful. For example, a

Medicare beneficiary who is looking for advice about symptoms they are experiencing, can call their doctor and receive medical advice about whether he or she needs to see their doctor in person for a physical exam. If they start to feel more ill, a virtual check-in allows a healthcare provider to offer recommendations about next steps and even take precautions for someone they are concerned may have the COVID-19 virus or flu before they step in the office or hospital putting others at risk. These check-ins are billable services and the Medicare coinsurance and deductible would apply to these services.

Medicare Advantage plans may also provide enrollees access to Medicare Part B services via telehealth in any geographic area and from a variety of places, including beneficiaries' homes, as part of their benefit packages for a plan year. Therefore, enrollees in Medicare Advantage plans that include coverage of such services may be available to receive clinically appropriate services for treatment of COVID-19 via telehealth from many sites, including their home.

This fact sheet, and earlier CMS actions in response to the COVID-19 virus, are part of the ongoing White House Task Force efforts. To keep up with the important work CMS is doing in response to COVID-19, please visit the [Current Emergencies Website](#).

For more information on telehealth benefits in the Medicare program, read our fact sheet: <https://www.cms.gov/files/document/03052020-medicare-covid-19-fact-sheet.pdf>.

Summary of CMS Public Health Action on COVID-19 to date:

March 6, 2020, CMS issued frequently asked questions and answers (FAQs) for healthcare providers regarding Medicare payment for laboratory test and other services related to the 2019-Novel Coronavirus (COVID-19). <https://www.cms.gov/newsroom/press-releases/covid-19-response-news-alert-cms-issues-frequently-asked-questions-assist-medicare-providers>

March 5, 2020: CMS issued a second Healthcare Common Procedure Coding System (HCPCS) code for certain COVID-19 laboratory tests, in addition to three fact sheets about coverage and benefits for medical services related to COVID-19 for CMS programs. <https://www.cms.gov/newsroom/press-releases/cms-develops-additional-code-coronavirus-lab-tests>

March 4, 2020: CMS issued a call to action to healthcare providers nationwide and offered important guidance to help State Survey Agencies and Accrediting Organizations prioritize their inspections of healthcare. <https://www.cms.gov/newsroom/press-releases/cms-announces-actions-address-spread-coronavirus>

February 13, 2020: CMS issued a new HCPCS code for providers and laboratories to test patients for COVID-19.
<https://www.cms.gov/newsroom/press-releases/public-health-news-alert-cms-develops-new-code-coronavirus-lab-test>

February 6, 2020: CMS gave CLIA-certified laboratories information about how they can test for SARS-CoV-2.
<https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and-memos-states-and/notification-surveyors-authorization-emergency-use-cdc-2019-novel-coronavirus-2019-ncov-real-time-rt>

February 6, 2020: CMS issued a memo to help the nation's healthcare facilities take critical steps to prepare for COVID-19.
<https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and-memos-states-and/information-healthcare-facilities-concerning-2019-novel-coronavirus-illness-2019-ncov>

For the updated information on the range of CMS activities to address COVID-19, visit: <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>
