



Telehealth & Licensure

Below is a summary of current allowances for telehealth and licensure rules and regulations. This includes:

- [Flexibilities provided only during the COVID-19 public health emergency \(PHE\);](#)
- [Flexibilities extended or made permanent through the CY 2021 Physician Fee Schedule Final Rule;](#)
- [Allowances under the Public Readiness and Emergency Preparedness Act \(PREP Act\);](#)

COVID-19 PUBLIC HEALTH EMERGENCY

These flexibilities extend through the end of the COVID-19 PHE, currently scheduled to expire April 21, 2021, but the Biden Administration has indicated that it will likely be extended through at least the end of 2021.

- Medicare will pay for office, hospital, and other visits furnished via telehealth across the country and including in patient's places of residence. Read the [fact](#) sheet from the Centers for Medicare and Medicaid Services (CMS) for more information.
- CMS waived Medicare and Medicaid's requirements that physicians and non-physician practitioners be licensed in the state where they are providing services. State requirements will still apply. Read more [here](#).
 - The American Medical Association (AMA) created a [chart](#) outlining "State Actions related to licensure in response to COVID-19" as well as a [chart](#) outlining state-by-state directives related to telemedicine, including Executive Orders, Department of Insurance directives, and Medicaid activity.
- CMS will cover and reimburse audio-only services. Reimbursement was increased to align with comparable in-person office visits. Read more [here](#).
- Physicians can now supervise residents remotely by audio or video.
- Physicians using telehealth will not receive penalties in the event of noncompliance with the regulatory requirements under HIPAA. Read more [here](#).
- Physicians can provide telehealth services using any non-public facing service that is available to communicate with patients. This includes, but is not limited to, Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype.

CY 2021 PHYSICIAN FEE SCHEDULE FINAL RULE

Telehealth Service Changes

CMS is not extending most of the telehealth flexibilities and increased payments allowed during the public health emergency (PHE) but did finalize the following.

- CMS finalized a **new audio-only code**, G2252, (0.50 Work RVUs) to describe 11-20 minutes of medical discussion to determine the necessity of an in-person visit.

- CMS is adding **new permanent covered services** under Telehealth Category 1 list (similar to telehealth services covered pre-PHE):
 - Group Psychotherapy (CPT code 90853)
 - Psychological and Neuropsychological Testing (CPT code 96121)
 - Domiciliary, Rest Home, or Custodial Care services, Established patients (CPT codes 99334-99335)
 - Home Visits, Established Patient (CPT codes 99347-99348)
 - Cognitive Assessment and Care Planning Services (CPT code 99483)
 - Visit Complexity Inherent to Certain Office/Outpatient Evaluation and Management (E/M) (HCPCS code G2211)
 - Prolonged Services (HCPCS code G2212)
- CMS is adding new services under Category 3 (**services added during the PHE on a temporary basis**), which will remain covered through the calendar year in which the PHE ends:
 - Home Visits, Established Patient (CPT codes 99349-99350)
 - Emergency Department Visits, Levels 1-5 (CPT codes 99281-99285)
 - Nursing facilities discharge day management (CPT codes 99315-99316)
 - Psychological and Neuropsychological Testing (CPT codes 96130-96133 ; CPT codes 96136-96139)
 - Therapy Services, Physical and Occupational Therapy, All levels (CPT codes 97161-97168; CPT codes 97110, 97112, 97116, 97535, 97750, 97755, 97760, 97761, 92521-92524, 92507)
 - Hospital discharge day management (CPT codes 99238-99239)
 - Inpatient Neonatal and Pediatric Critical Care, Subsequent (CPT codes 99469, 99472, 99476)
 - Continuing Neonatal Intensive Care Services (CPT codes 99478-99480)
 - Critical Care Services (CPT codes 99291-99292)
 - End-Stage Renal Disease Monthly Capitation Payment codes (CPT codes 90952, 90953, 90956, 90959, 90962)
 - Subsequent Observation and Observation Discharge Day Management (CPT codes 99217; CPT codes 99224-99226)
- CMS finalized policy to permit teaching physicians to meet the requirements to bill for their services involving residents through virtual presence, but only for services furnished in residency training sites that are located outside of an OMB-defined metropolitan statistical area (MSA).

PUBLIC READINESS AND EMERGENCY PREPAREDNESS ACT (PREP Act)

On December 3, the U.S. Department of Health and Human Services issued a [fourth amendment](#) to the Declaration under the Public Readiness and Emergency Preparedness Act (PREP Act) to increase access to critical countermeasures against COVID-19. The amendment:

- Authorizes healthcare personnel using telehealth to order or administer Covered Countermeasures, such as a **diagnostic test** that has received an Emergency Use

Authorization (EUA) from the Food and Drug Administration (FDA), for patients in a state other than the state where the healthcare personnel are already permitted to practice.