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Health Care ADVISORY •

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Congress Expands Medicare Telehealth Benefit Amid Coronavirus Concerns

Today, Congress sent legislation to the President to provide \$8.3 billion in emergency funds to be used to fight COVID-19, known as the coronavirus. Included in this package is a significant change to the telehealth statute that promises to expand Medicare beneficiaries' access to care and providers' reimbursement opportunities under Medicare for services provided via telemedicine. Despite many champions within Congress for advancing digital medicine and expanding Medicare coverage of telehealth, concerns about federal budget implications have, until now, slowed statutory changes.

However, in today's coronavirus emergency appropriations bill, Congress has allowed the Department of Health and Human Services (HHS) to waive long-standing constraints on the use of telehealth under Medicare Part B—with certain limitations. In particular, the bill:

- Waives the "originating site" requirement so that telehealth could be used (and reimbursed) in nonrural areas and even in patients' homes or other nontraditional sites (as opposed to the approved list of originating sites only in rural areas).
- Permits the use of telephones to provide telehealth services if the telephones have two-way, real-time interactive audio and video capabilities.

These waivers apply in the following circumstances:

- During the public health emergency for the 2019 novel coronavirus, which was declared nationwide by the Secretary of Health and Human Services on January 31, 2020 (including any renewals).
- When the distant site practitioner—or a practitioner within his or her same practice—has a pre-existing relationship with the patient within the last three years (as demonstrated by having provided a Medicare reimbursed service or item).

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Because all of the United States is currently under this public health emergency designation, any Medicare beneficiary would now be eligible for care from a provider via a two-way audio-video mechanism, including a smartphone. This applies anywhere in the U.S. for any Medicare-reimbursable telehealth service—not just for treatment of the coronavirus. Note also that, although the originating-site requirement may be waived, a facility fee is still available only to the previously approved types of eligible originating sites (e.g., hospitals, physician offices, nursing facilities).

Also, although telephones with interactive audio-video capabilities may now be used for the delivery of telehealth services to Medicare beneficiaries, neither Congress nor the Office for Civil Rights (OCR), which enforces the Health Insurance Portability and Accountability Act (HIPAA), have relaxed privacy or security standards. In fact, the OCR recently stated that "the protections of the [HIPAA] Privacy Rule are not set aside during an emergency"; even in "an emergency situation, covered entities must continue to implement reasonable safeguards to protect patient information against intentional or unintentional impermissible uses and disclosures."

Accordingly, physicians treating coronavirus patients via telehealth, even over smartphone per the new rules, should still seek to disclose protected health information only as permitted by the HIPAA Privacy Rule, such as for treatment purposes, to public health authorities, pursuant to other applicable HIPAA Privacy Rule provisions, or as required by law. Additionally, covered entities should continue to "apply the administrative, physical, and technical safeguards of the HIPAA Security Rule to electronic protected health information." Practitioners desiring to take advantage of the new rules should consider implementing secure videoconferencing solutions with vendors via signed, HIPAA-compliant business associate agreements. Indeed, a number of videoconference service providers are now offering their services for free (generally on an extended trial basis).

HHS is authorized to implement these provisions by instruction or otherwise, meaning implementing guidance could come out very quickly.

In addition to advising clients on how to comply with this and other telemedicine changes, Alston & Bird has established a <u>multidisciplinary task force</u> to aid clients in answering the wide array of questions arising from the coronavirus.

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If you have any questions, or would like additional information, please contact any of the following:

Donna P. Bergeson 404.881.7278 donna.bergeson@alston.com

R. Joseph Burby IV 404.881.7670 joey.burby@alston.com

Cathy L. Burgess 202.239.3648 cathy.burgess@alston.com

Angela T. Burnette 404.881.7665 angie.burnette@alston.com

Mark T. Calloway 704.444.1089 mark.calloway@alston.com

Brendan Carroll 202.239.3216 brendan.carroll@alston.com

Justin Chavez 404.881.7898 justin.chavez@alston.com

MacKenzie Dickerman 404.881.7242 mackenzie.dickerman@alston.com

Sen. Robert J. Dole 919.862.2289 bob.dole@alston.com

Peter Eckrich 202.239.3021 peter.eckrich@alston.com Sarah Ernst 404.881.4940 sarah.ernst@alston.com

Larry Gage 202.239.3614 larry.gage@alston.com

Joyce Gresko 202.239.3628 joyce.gresko@alston.com

Elinor Hiller 202.239.3766 elinor.hiller@alston.com

Russell A. Hilton 404.881.7866 russell.hilton@alston.com

Daniel G. Jarcho 202.239.3254 daniel.jarcho@alston.com

Samuel D. Jockel 202.239.3037 sam.jockel@alston.com

Jasmine Johnson 404.881.7244

jasmine.johnson@alston.com

Bill Jordan 404.881.7850 bill.jordan@alston.com

Ted Kang 202.239.3728

edward.kang@alston.com

Rebecca Kennedy 404.881.7437 rebecca.kennedy@alston.com

Brian Lee 202.239.3818 brian.lee@alston.com

Jane Lucas 202.239.3229 jane.lucas@alston.com

Justin Mann 202.239.3115 justin.mann@alston.com

Dawnmarie R. Matlock 404.881.4253 dawnmarie.matlock@alston.com

Wade Pearson Miller 404.881.4971 wade.miller@alston.com

Elise N. Paeffgen 202.239.3939 elise.paeffgen@alston.com

Michael H. Park 202.239.3630 michael.park@alston.com

Tyler Pate 404.881.7871 tyler.pate@alston.com

Amy Pleasance 404.881.7875 amy.pleasance@alston.com Hon. Earl Pomeroy 202.239.3835 earl.pomeroy@alston.com

Steven L. Pottle 404.881.7554 steve.pottle@alston.com

T.C. Spencer Pryor 404.881.7978 spence.pryor@alston.com

J. Mark Ray 404.881.7739 mark.ray@alston.com

Mark H. Rayder 202.239.3562 mark.rayder@alston.com

Marc J. Scheineson 202.239.3465 marc.scheineson@alston.com

Emily Shaw 202.239.3768 emily.shaw@alston.com

Frank E. Sheeder 214.922.3420 frank.sheeder@alston.com

Robert G. Siggins 202.239.3836 bob.siggins@alston.com

Bradley M. Smyer 214.922.3459 brad.smyer@alston.com John Snyder 202.239.3960 john.snyder@alston.com

Heidi A. Sorensen 202.239.3232 heidi.sorensen@alston.com

Robert D. Stone 404.881.7270 rob.stone@alston.com

Sean Sullivan 404.881.4254 sean.sullivan@alston.com

Timothy P. Trysla 202.239.3420 tim.trysla@alston.com

Benjamin K. Wolf 202.239.3035 ben.wolf@alston.com

Marilyn K. Yager 202.239.3341 marilyn.yager@alston.com

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