

Long-Term Care Nursing Homes Telehealth and Telemedicine Tool Kit

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Intent of Toolkit:

Under President Trump’s leadership to respond to the need to limit the spread of community COVID-19, 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 doctors without having to travel to a healthcare facility. These policy changes build on the regulatory flexibilities granted under the President’s emergency declaration. CMS is expanding this benefit on a temporary and emergency basis under the 1135 waiver authority and 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 – particularly those at high-risk of complications from the virus that causes the disease COVID-19, are aware of easy-to-use, accessible benefits that can help keep them healthy while helping to contain the community spread of this virus.

Note, this toolkit is designed to provide information only and not intended to endorse any non-federal entities. Information specific to nursing homes is indicated by an asterisk (*).

Under this new waiver, Medicare can pay for office, hospital, and other visits furnished via telehealth across the country and including in patient's places of residence starting March 6, 2020. A range of providers, such as doctors, nurse practitioners, clinical psychologists, and licensed clinical social workers, are able to offer telehealth to their patients. Additionally, the HHS Office of Inspector General (OIG) is providing flexibility for healthcare providers to reduce or waive cost-sharing for telehealth visits paid by federal healthcare programs announced in this bulletin,

<https://oig.hhs.gov/fraud/docs/alertsandbulletins/2020/policy-telehealth-2020.pdf>.

Nursing homes do not need to apply for a waiver to use telehealth and telemedicine services.

Telehealth, telemedicine, and related terms generally refer to the exchange of medical information from one site to another through electronic communication to improve a patient's health. Innovative uses of this kind of technology in the provision of healthcare is increasing. And with the emergence of the virus causing the disease COVID-19, there is an urgency to expand the use of technology to help people who need routine care, and keep vulnerable beneficiaries and beneficiaries with mild symptoms in their homes while maintaining access to the care they need. Limiting community spread of the virus, as well as limiting the exposure to other patients and staff members will slow viral spread.

There are three main types of virtual services physicians and other professionals can provide to Medicare beneficiaries summarized in this fact sheet <https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>: Medicare telehealth visits, virtual check-ins and e-visits.

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TYPE OF SERVICE	WHAT IS THE SERVICE?	HCPCS/CPT CODE	Patient Relationship with Provider
MEDICARE TELEHEALTH VISITS	A visit with a provider that uses telecommunication systems between a provider and a patient.	Common telehealth services include: <ul style="list-style-type: none"> • 99201-99215 (Office or other outpatient visits) • G0425-G0427 (Telehealth consultations, emergency department or initial inpatient) • G0406-G0408 (Follow-up inpatient telehealth consultations furnished to beneficiaries in hospitals or SNFs) For a complete list: https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes	For new* or established patients. *To the extent the 1135 waiver requires an established relationship, HHS will not conduct audits to ensure that such a prior relationship existed for claims submitted during this public health emergency
VIRTUAL CHECK-IN	A brief (5-10 minutes) check in with your practitioner via telephone or other telecommunications device to decide whether an office visit or other service is needed. A remote evaluation of recorded video and/or images submitted by an established patient.	<ul style="list-style-type: none"> • HCPCS code G2012 • HCPCS code G2010 	For established patients.
E-VISITS	A communication between a patient and their provider through an online patient portal.	<ul style="list-style-type: none"> • 99421 • 99422 • 99423 • G2061 • G2062 • G2063 	For established patients.

Effective immediately, the HHS Office for Civil Rights (OCR) will exercise enforcement discretion and waive penalties for HIPAA violations against health care providers that serve patients in good faith through everyday communications technologies, such as FaceTime or Skype, during the COVID-19 nationwide public health emergency. For more information: <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html>

CMS encourages all providers to share with patients these new abilities to provide healthcare through telemedicine.

Immediate Key Implementations:

- Starting March 6, 2020 and for the duration of the COVID-19 Public Health Emergency, Medicare will make payment for professional services furnished to beneficiaries in all areas of the country in all settings.
- Medicare will make payment for Medicare telehealth services furnished to beneficiaries in any healthcare facility and in their home.
- The provider must use an interactive audio and video telecommunications system, including commonly used services like FaceTime and Skype that permits real-time communication between the distant site and the patient at home. Distant site practitioners who can furnish and

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get payment for covered telehealth services (subject to state law) can include physicians, nurse practitioners, physician assistants, nurse midwives, certified nurse anesthetists, clinical psychologists, clinical social workers, registered dietitians, and nutrition professionals.

- Effective immediately, the HHS Office for Civil Rights OCR will exercise enforcement discretion and waive penalties for HIPAA violations against health care providers that serve patients in good faith through everyday communications technologies, such as FaceTime or Skype, during the COVID-19 nationwide public health emergency. For more information: <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html>
- A staff member will need to facilitate the telemedicine experience between the patient and clinician by managing the technology onsite at the nursing home.

Tool Kit Contents:

This document contains electronic links to reliable sources of information regarding telehealth and telemedicine. Most of the information is directed towards providers who may want to establish a permanent telemedicine program. There are specific documents identified that will be useful in choosing telemedicine vendors, initiating a telemedicine program, monitoring patients remotely, and developing documentation tools. However, there is also information that will be useful for providers who wish to care for patients through the virtual services that may be temporarily used during the COVID-19 situation. The HIPAA waiver described above is particularly important during this time as it allows the immediate utilization of commonly available programs such as FaceTime and Skype (in addition to others), which are now a very low cost option for any provider in any setting.

Please note that after the first block of information provided in the table below (1135 Waiver Information which was released on 17 March 2020), each of the other resources listed were created prior to this date, and therefore will mainly refer to rules and regulations, and other requirements which have mostly been waived for the duration of the COVID-19 Public Health Emergency. The CMS Press Release and accompanying documents from 17 March 2020 should be taken as the most authoritative position reflecting the current situation.

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Focus Area	List of Resources
1135 Waiver Information	<ul style="list-style-type: none"> • President Trump Expands Telehealth Benefits for Medicare Beneficiaries During COVID-19 Outbreak: https://www.cms.gov/newsroom/press-releases/president-trump-expands-telehealth-benefits-medicare-beneficiaries-during-covid-19-outbreak • Medicare Telemedicine Health Care Provider Fact Sheet: https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet • Medicare Telehealth Frequently Asked Questions (FAQs) March 17, 2020: https://edit.cms.gov/files/document/medicare-telehealth-frequently-asked-questions-faqs-31720.pdf • Telehealth and COVID-19: https://www.cms.gov/files/document/03052020-medicare-covid-19-fact-sheet.pdf <p>1135 Waiver Requests should be directed to the Divisions from which they originate. The email addresses for our Divisions are listed below:</p> <ul style="list-style-type: none"> • ROATLHSQ@cms.hhs.gov (Atlanta Division): Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee. • RODALDSC@cms.hhs.gov (Dallas Division): Arkansas, Louisiana, New Mexico, Oklahoma, and Texas. • ROPHIDSC@cms.hhs.gov (Northeast Division): Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia, New York, New Jersey, Puerto Rico, Virgin Islands, Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont. • ROCHISC@cms.hhs.gov (Chicago Division): Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin • ROSFOSO@cms.hhs.gov (San Francisco and Seattle Division): Alaska, Idaho, Oregon, Washington, Arizona, California, Hawaii, Nevada, and the Pacific Territories. • CMD@cms.hhs.gov (Central Mountain Division): Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming, Iowa, Kansas, Missouri, and Nebraska.

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CMS Telemedicine General Policy Guidance	<ul style="list-style-type: none"> • Medicare Telemedicine Health Care Provider Fact Sheet: https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet • Coverage and Payment Related to COVID-19 Medicare: https://www.cms.gov/files/document/03052020-medicare-covid-19-fact-sheet.pdf • HCPCS codes and the Physician Fee Schedule: https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes
Telehealth Implementation Guide	<ul style="list-style-type: none"> • Medicare Telemedicine Health Care Provider Fact Sheet: https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet • Telehealth Start-Up and Resource Guide: https://www.healthit.gov/sites/default/files/telehealthguide_final_0.pdf
State Statute Guidance	<ul style="list-style-type: none"> • Center for Connected Health Policy: State Telehealth Laws and Reimbursement Policies: https://www.cchpca.org/sites/default/files/2019-10/50%20State%20Telehealth%20Laws%20and%20Reimbursement%20Policies%20Report%20Fall%202019%20FINAL.pdf
Basics on Setting up Telehealth	<ul style="list-style-type: none"> • University of Arizona: Telemedicine Checklist: https://telemedicine.arizona.edu/blog/telemedicine-checklist • Great Plains Telehealth Resources and Assistance Center: Checklist for Initiating Telehealth Services: https://www.telehealthresourcecenter.org/wp-content/uploads/2019/07/checklist190508-gpTRAC.pdf • Mid-Atlantic Telehealth Resource Center: MATRC Remote Patient Monitoring Toolkit: https://www.matrc.org/remote-patient-monitoring-toolkit/ • Telehealth 101: https://www.telehealthresourcecenter.org/wp-content/uploads/2018/09/Telehealth-101.pdf • Washington State Guidebook, includes checklist for implementing a new telehealth system: https://www.dshs.wa.gov/sites/default/files/BHSIA/FMHS/DSHSTelehealthGuidebook.pdf • Telehealth Services-MLN Booklet: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/TelehealthSrvcsfctsh.pdf • Sample documents (American Association of Pediatrics) https://www.aap.org/en-us/professional-resources/practice-transformation/telehealth/Pages/Sample-Documents.aspx

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Telehealth Technical Assistance	<ul style="list-style-type: none"> Northeast Telehealth Resource Center: COVID-19 Epidemic Telehealth Toolkit: https://netrc.org/docs/COVID-19-Epidemic-Telehealth-Toolkit-NETRC-March-2020.pdf Office of the National Coordinator for Information Technology: https://healthit.gov National Consortium of Telehealth Resource Centers: https://www.telehealthresourcecenter.org/resources/ National Consortium of Telehealth Resource Centers: https://www.telehealthresourcecenter.org/resource-documents/ Telehealth Resource Contacts: https://www.telehealthresourcecenter.org/wp-content/uploads/2019/08/08.23.19-2019-Contact-Sheet.pdf
Selecting a Vendor	<ul style="list-style-type: none"> National Organization of State Offices of Rural Health: Telehealth Technologies and Preparing to Select a Vendor: https://nosorh.org/wp-content/uploads/2016/11/NOSORH-Telehealth-Vendor-Fact-Sheet-FINAL.pdf University of Arizona: Directory Service Provider Telemedicine & Telehealth: https://telemedicine.arizona.edu/servicedirectory
Articles	<ul style="list-style-type: none"> Virtually Perfect? Telemedicine for Covid-19: https://www.nejm.org/doi/full/10.1056/NEJMp2003539?af=R&rss=currentIssue&utm_campaign=hsric&utm_medium=email&utm_source=govdelivery The Centers for Medicare & Medicaid Services (CMS) announced critical new measures designed to keep America’s nursing home residents safe from the 2019 Novel Coronavirus (COVID-19). The measures take the form of a memorandum and is based on the newest recommendations from the Centers for Disease Control and Prevention (CDC). It directs nursing homes to significantly restrict visitors and nonessential personnel, as well as restrict communal activities inside nursing homes*. CMS Announces Findings at Kirkland Nursing Home and New Targeted Plan for Healthcare Facility Inspections in light of COVID-19 https://www.cms.gov/newsroom/press-releases/cms-announces-findings-kirkland-nursing-home-and-new-targeted-plan-healthcare-facility-inspections?utm_campaign=hsric&utm_medium=email&utm_source=govdelivery

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Focus Area	List of Resources
Patient and Community Resources	<ul style="list-style-type: none"> • Coronavirus (COVID-19): https://www.cdc.gov/coronavirus/2019-ncov/index.html • Emergency and Preparedness resources and tools from the U.S. Department of Health & Human Services, Office of the Assistant Secretary for Preparedness and Response (ASPR) here: https://www.phe.gov/emergency/news/healthactions/section1135/Pages/covid19-13March20.aspx • Ongoing Response and Recovery for COVID-19 https://www.phe.gov/emergency/events/COVID19/Pages/default.aspx
Nursing Home Resources	<ul style="list-style-type: none"> • CMS Announces Actions to Address Spread of Coronavirus* https://www.cms.gov/newsroom/press-releases/cms-announces-actions-address-spread-coronavirus • Suspension of Survey Activities*: https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and/suspension-survey-activities • Guidance for Infection Control and Prevention Concerning Coronavirus Disease (COVID-19): FAQs and Considerations for Patient Triage, Placement and Hospital Discharge: https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and/guidance-infection-control-and-prevention-concerning-coronavirus-disease-covid-19-faqs-and • Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in nursing homes*: https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and/guidance-infection-control-and-prevention-coronavirus-disease-2019-covid-19-nursing-homes • Preparing for COVID-19: Long-term Care Facilities, Nursing Homes*: https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html • Contact national, state, and local associations for additional resources.

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