

SPECIAL EDITION

Friday, April 17, 2020

News

- RHC & FQHC Flexibilities During COVID-19 Public Health Emergency
- CMS Increases Medicare Payment for High-Production Coronavirus Lab Tests
- CMS Implements CARES Act Hospital Payment and Inpatient Rehabilitation Facility Waivers
- COVID-19 Call: Audio Recording and Transcript

News

RHC & FQHC Flexibilities During COVID-19 Public Health Emergency

To support Rural Health Clinics (RHCs), Federally Qualified Health Centers (FQHCs), and their patients, Congress and CMS made changes to requirements and payments during the COVID-19 Public Health Emergency. See MLN Matters Special Edition Article 20016 to learn about:

- New payment for telehealth services, including how to bill Medicare
- Expansion of virtual communication services
- Revision of home health agency shortage requirement for visiting nursing services
- Consent for care management and virtual communication services
- Accelerated/advance payments

CMS Increases Medicare Payment for High-Production Coronavirus Lab Tests

CMS announced that Medicare will nearly double payment for certain lab tests that use high-throughput technologies to rapidly diagnose large numbers of COVID-19 cases. This is another action the Trump Administration is taking to rapidly expand COVID-19 testing. Along with the March 30 announcement that Medicare will pay new specimen collection fees for COVID-19 testing, CMS's actions will expand capability to test more vulnerable populations, like nursing home patients, quickly and provide results faster. Medicare will pay laboratories for the tests at \$100 effective April 14, 2020, through the duration of the COVID-19 national emergency.

Press Release

CMS Implements CARES Act Hospital Payment and Inpatient Rehabilitation Facility Waivers

The Coronavirus Aid, Relief, and Economic Security (CARES) Act increases payment for Inpatient Prospective Payment System (IPPS) and long-term care hospital (LTCH) inpatient hospital care attributable to COVID-19. CMS provided guidance for IPPS hospitals and LTCHs on how to code claims to receive the higher payment.

The CARES Act also waives the requirement that Medicare Part A fee-for-service patients treated in inpatient rehabilitation facilities receive at least 15 hours of therapy per week.

COVID-19 Call: Audio Recording and Transcript

An <u>audio recording</u> and <u>transcript</u> are available for the <u>April 7</u> Medicare Learning Network call on 2019 Novel Coronavirus (COVID-19) Updates. Learn about CMS waivers and COVID-19 response.

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