NHPCO COVID-19 Update – 05/01/20

NHPCO has created this update for hospice and palliative care providers to share recent news and helpful links.

“What lies behind us and what lies before us are tiny matters compared to what lies within us.”

– Ralph Waldo Emerson

Policy Updates

CMS Allows Advance Care Planning Codes to be Used with Audio-only Telehealth

CMS previously announced that Medicare would pay for certain services conducted by audio-only telephone between beneficiaries and their doctors and other clinicians. On April 30, CMS broadened that list to include many behavioral health and patient education services. CMS is also increasing payments for these telephone visits to match payments for similar office and outpatient visits. This would increase payments for these services from a range of about $14-$41 to about $46-$110. The payments are retroactive to March 1, 2020.

CMS issued new 1135 blanket waivers on April 30. Included in the waivers announced was:

- Audio-Only Telehealth for Certain Services. Pursuant to authority granted under the CARES Act, CMS is waiving the requirements of section 1834(m)(1) of the ACT and 42 CFR § 410.78(a)(3) for use of interactive telecommunications systems to furnish telehealth services, to the extent they require use of video technology, for certain services. This waiver allows the use of audio-only equipment to furnish services described by the codes for audio-only telephone evaluation and management services, and behavioral health counseling and educational services.

- CMS also published the list of designated codes that apply to this change. Unless stated otherwise in this list, other services included on the Medicare telehealth services list must be furnished using, at a minimum, audio and video equipment permitting two-way, real-time interactive communication between the patient and distant site physician or practitioner.

Advance care planning discussions are among the codes allowed to be conducted through audio-only telehealth:
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<th>Code</th>
<th>Short Descriptor</th>
<th>Status</th>
<th>Can Audio-only Interaction Meet the Requirements?</th>
<th>Medicare Payment Limitations</th>
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<td>Advance care plan addl 30 min</td>
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**Provider Update**

**1135 Blanket Waivers for Hospices Summarized and Updated**

CMS announced additional 1135 blanket waivers on April 30. NHPCO has updated the COVID-19 Emergency Declaration Blanket Waivers for Health Care Providers that lists the blanket waivers that apply to hospice, updated as of May 1, 2020.

**Hospice Aides – a Quick Guide**

One of the 1135 blanket waivers that was announced by CMS on April 30 focused on an additional waiver for hospice aides. NHPCO updated the Hospice Aides and COVID-19 – A Quick Guide to include the additional waiver, as of May 1, 2020.

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**NHPCO Members: Reminder of Call to Action**

As we have shared, NHPCO has created a “Commitment to Caring” sign-on letter to demonstrate our members’ commitment to addressing the extraordinary needs brought on by the COVID-19 pandemic. More than 300 provider organizations have already added their names. This letter will show policymakers, grant makers, and our professional community that NHPCO member hospice and palliative care providers are rising to the challenge and providing the person-centered interdisciplinary care that is exactly what is needed during these times. We are requesting that the senior leader from each member add their organization’s name to our letter; those with multiple locations are asked to sign only once.

1. Log into the NHPCO website at [www.nhpco.org](http://www.nhpco.org).
2. Go to this URL: [https://www.nhpco.org/sign-on/](https://www.nhpco.org/sign-on/)
3. Follow the prompt at the bottom of the page to add your organization’s name.

*This Commitment to Caring sign-on letter is intended for current NHPCO members only. More information on membership is available online. We encourage non-member providers to consider joining the NHPCO community and adding your organization to our Commitment to Care letter.*