

Teaching Hospital Update April 30, 2020



Teaching Hospitals, Teaching Physicians and Medical Residents: CMS Flexibilities: COVID-19

Workforce Updates:

- **Application of Teaching Physician (TP) Regulations:**

- TP can provide services with medical residents virtually through audio/video real-time communications technology
- Does **not** apply in the following cases:
 - Surgical, high risk, interventional or complex procedures via endoscope and anesthesia services

- **Counting Resident Time at Alternate Locations**

- Now allows medical residents to perform their duties in alternate location, including their home or a patient's home so long as it meets appropriate physician supervision requirements

- **Traditional Medicare telehealth services**

- Professional claims should use place of service (POS) 02, to indicate the billed service was furnished as a professional telehealth service from distant site
- No change to facility/non-facility payment differential applied based on POS
- Claims submitted with POS 02 will continue to pay at the facility rate

- **No billing changes for institutional claims**

- Critical access hospital method II claims continue to bill with GT modifier

Per Medicare Telehealth FAQ released March 17, 2020:

Q: Should on-site visits conducted via video or through a window in the clinic suite be reported as telehealth services?

- **A:** Services should only be reported as telehealth services when the individual physician or professional providing the telehealth service is not at the same location as the beneficiary

Updated April 30:

- Teaching hospitals can increase number of temporary beds without facing reduced payments
- Payments will not be reduced for teaching hospitals that shift residents to other hospitals to meet COVID-related needs or penalize hospitals without teaching programs that accept these residents