

The Trump Administration issued an unprecedented array of temporary regulatory waivers and new rules to equip the American healthcare system with maximum flexibility to respond to the 2019 Novel Coronavirus (COVID-19) pandemic. This unprecedented temporary relaxation in regulation will help the healthcare system deal with any patient surges by giving it tools and support to create non-traditional care sites and staff them quickly.



Telehealth

People with Medicare can now get telehealth services from their home, increasing their access to care.



Care by Phone

Patients can consult with a doctor, nurse practitioner, psychologist, and others and Medicare will cover it.

Rapidly Expand Health Care Workforce



A physician who has to self-quarantine can be recruited to provide care virtually, or oversee care delivered by other clinicians through interactive video/ audio conferencing. And Medicare will pay for providers who are licensed in one state to provide care in a different state if they are needed. Health systems can provide care options that use population management strategies like triaging based on COVID status as well as clinical status, employing doctors, nurses and other staff to better manage high patient volumes. Clinicians who are not fully employed during the emergency can be repurposed to provide care in other areas.

Testing Patients Where They Are

If a person has a physician order for a lab test for COVID-19, they can go to a drive-up testing center. Or, a laboratory may be able to send someone to their home to collect a test sample.



Making the Most Use of Community Health Care Resources

Hospitals can transfer patients to different types of units and facilities to keep patients safe and free up beds.



COVID-only Care Centers

During the Public Health Emergency, hospitals and dialysis centers can set up COVID-only centers to help reduce transmission to others.



PATIENTS OVER PAPERWORK

Expanding Hospital Capacity

Community resources like hotels, convention centers and surgery centers can be converted for hospital care.

Patients Over Paperwork

Administrative burdens have been reduced dramatically and permit frontline providers to triage patients and coordinate care despite high volume and extraordinary system stresses. By extending quality reporting deadlines and suspending medical necessity documentation, we are giving time back to doctors so they can focus on their patients. For example, provider documentation requirements for prior authorization are temporarily suspended. Additionally, we've made regulatory changes to provide temporary relief from many audit and quality reporting requirements so that providers, healthcare facilities, Medicare Advantage health plans, Part D prescription drug plans, and states can focus on providing needed care to Medicare and Medicaid beneficiaries affected by COVID-19.

