MI Quarterly Meeting
Washington Update

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National Association of Rural Health Clinics
Agenda

• New Policies for 2022
  • Vaccine Mandate
  • Good Faith Estimate
  • CMS updates
• Telehealth Policy Post-PHE
• Federal Programs for RHCs to Fight COVID-19
Grandfathering Implementation

- Grandfathered RHCs are allowed to move and CHOW between hospitals with less than 50 beds and retain grandfathering status ~ confirmed by 2022 pfs final rule

- Still looking to clarify exactly how grandfathered rates will be set for newer RHCs that don’t have cost report periods ending in 2020 or 2021 and/or don’t have a full year’s worth of cost data
COVID Vaccine Mandate

- [https://www.narhc.org/News/29245/Supreme-Court-Upholds-CMS-Vaccine-Mandate-in-All-50-States](https://www.narhc.org/News/29245/Supreme-Court-Upholds-CMS-Vaccine-Mandate-in-All-50-States)

- All RHCs need policies and procedures in place regarding the CMS vaccine mandate.

- NARHC created a template P&P which can be located [here](https://www.narhc.org/News/29245/Supreme-Court-Upholds-CMS-Vaccine-Mandate-in-All-50-States).

- This spring, all staff need to be vaccinated or properly granted a religious or medical exemption.

- ND – phase 1 deadline Feb. 14, phase 2 Mar. 15

Good Faith Estimate

• [https://www.narhc.org/News/29225/Good-Faith-Estimate-Details](https://www.narhc.org/News/29225/Good-Faith-Estimate-Details)

• Outpatient offices must adjudicate during the scheduling process if a Good Faith Estimate which includes an estimated diagnosis, treatment, cost of services is required.

• NARHC has already asked HHS and CMS to waive the policy for the rest of the PHE as this is very administratively burdensome

• Detailed NARHC webinar on policy [here](#).
Other 2022 Updates

• COVID vaccine admin billed to Medicare Advantage plans directly in 2022
• Telehealth Mental Health Encounters are billed normally and paid through AIR (instead of G2025)
• RHCs can now bill for Hospice Attending Physician Services using modifier GV
• Payment Rates:
  • G0511 - $79.25, G0512 - $151.23, G2025 - $97.24, G0071 - $23.88
Telehealth Policy Post PHE

• NARHC goal is to retain the ability to provide telehealth services post-PHE but through normal coding, normal reimbursement, and normal cost reporting mechanisms.

• Would like to eliminate the G2025 system and expand the way telehealth for mental health services works to all telehealth services

• NARHC is in support of occasional in-person requirement because it prevents abuse of RHC reimbursement structure and protects RHCs from competing with out of market providers.

Post-PHE Telehealth Policy for Rural Health Clinics

Dear ________,

Many have identified the growth of telehealth as a “silver lining” of the COVID-19 pandemic, and the just over 5,000 Rural Health Clinics (RHCs) across the country have embraced telehealth in their efforts to increase and enhance care for rural underserved communities.

The National Association of Rural Health Clinics (NARHC) is encouraged to see Congress moving to extend and improve telehealth beyond the PHE and we strongly support both S.3593, Telehealth Extension and Evaluation Act, and H.R.6202, Telehealth Extension Act of 2021, which create explicit payment parity between in-person visits and telehealth visits for RHCs.

Presently, RHCs are able to offer valuable telehealth services to their communities but are paid under a “special payment rule” that lowers reimbursement for safety net providers and unnecessarily adds administrative burden. Under this special payment rule, safety-net providers such as rural health clinics are not incentivized as much as their fee-for-service peers to invest in telehealth services for their patients.

NARHC strongly supports continued Medicare coverage of telehealth, but it is imperative that we eliminate the special payment rule as soon as possible and reimburse safety-net providers through their normal reimbursement structure.

As Congress considers extending Medicare coverage of telehealth this spring, NARHC would greatly appreciate the support of Sen. ___________ and Rep. ___________ on this telehealth policy.

Please feel free to contact me if you would like to further discuss telehealth policy or if you have any questions about Rural Health Clinics.

Sincerely,

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Federal Programs to Combat COVID

- Provider Relief Fund Phases 1-4
- RHC Testing, RHC Testing and Mitigation, RHC Vaccine Confidence, RHC Vaccine Distribution, OTC Testing Kit Distribution
- https://www.rhccovidreporting.com/
- https://prfreporting.hrsa.gov/s/
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