DEPARTMENT OF HEALTH AND HUMAN SERVICES Division of Health Care Financing and Policy

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Suzanne Bierman, JD, MPH Administrator

Update to Telehealth Services

for Home Health and Hospice Agencies

April 15, 2020

The Division of Health Care Financing and Policy has been developing memos to address provider concerns regarding telehealth services amid the COVID-19 crisis in the state. As information is updated from federal guidelines, the following information applies to telehealth services provided to Nevada Medicaid recipients:

- For Home Health Agencies, telehealth is allowable for the initial and recertification assessments and to determine patients' homebound status remotely or by record review. CMS is waiving the requirements in 42 CFR §484.80(h), which requires a nurse to conduct an onsite visit every two weeks. This would include waiving the requirements for a nurse or other professional to conduct an onsite visit every two weeks to evaluate if aides are providing care consistent with the care plan, as this may not be physically possible for a period of time. This waiver is also temporarily suspending the 2-week aide supervision by a registered nurse for home health agencies requirement at §484.80(h)(1), but virtual supervision is encouraged during the period of the waiver. Providers must maintain visual sight of recipients when providing specific care or services. Therefore, telehealth via a telephone is not allowed. The provider must use a telehealth platform that utilizes both audio and visual modalities.
- For Hospice Agencies, telehealth is allowable for the initial and recertification assessments. CMS is waiving the requirement for hospices to use volunteers including the 5% patient care hours. Comprehensive Assessments timeframes have been extended for updating the assessment from 15 to 21 days. Non-Core Services are waived, including the hospice requirement to provide physical therapy, occupational therapy, and speechlanguage pathology. CMS is waiving the requirements for a nurse to conduct an onsite supervisory visit for hospice aid supervision every two weeks. Providers must maintain visual sight of recipients when providing specific care or services. Therefore, telehealth via a telephone is not allowed. The provider must use a telehealth platform that utilizes both audio and visual modalities.

^{*}This memo does not supersede the previous memos. It is a supplement to the memos released on 3/17/2020, 3/19/2020 and 3/27/2020.