

## Report on Medicare Compliance Volume 31, Number 39. October 24, 2022 OPPS Rule May Cover Some Services at Home That End After PHE

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By Nina Youngstrom

Medicare payments for certain hospital outpatient department services provided to patients in their homes by telehealth will dry up at the end of the COVID-19 public health emergency (PHE) but then partially reappear because of a new regulation, an expert says.

When the PHE is over, coverage for the services, along with other “hospitals without walls” waivers, will disappear. Although HHS on Oct. 13 extended the PHE for another 90 days, that’s expected to be the last extension, which means an end to most waivers and flexibilities, said Martie Ross, a consulting principal with PYA.

In the hospital-without-walls category, CMS gave hospitals the flexibility to temporarily relocate provider-based departments to patient homes for the purpose of providing certain hospital outpatient services—counseling, therapy, education (e.g., diabetes self-management) and partial hospitalization services—by hospital clinical staff via telehealth. Hospitals bill the Outpatient Prospective Payment System (OPPS) for the services.

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