Coronavirus Aid, Relief, and Economic Security (CARES) Act

Background: On March 27th, Congress passed the Coronavirus Aid, Relief, and Economic Security (CARES) Act. The legislation is the third bill Congress has passed to address the spread of COVID-19 and is the largest economic stimulus bill in U.S. history. The $2-trillion bill includes provisions to boost the economy and provide support to those fighting COVID-19.

Below is a summary of health IT-related provisions.

Division A

- **Sec. 3212 – Telehealth network and telehealth resource centers grant programs**
  - Reauthorizes the HRSA’s Telehealth Resource Centers grant program at $29/m year for fiscal years 2021-2025

- **Sec. 3221 – Confidentiality and disclosure of records relating to substance use disorder**
  - Amends 42 CFR Part 2, which governs the sharing of substance use disorder treatment patient records
  - Allows for one-time consent to be given for future sharing of information
  - Sharing of information must be allowed currently under HIPAA (sharing for purposes of treatment, payment, and operations)

- **Sec. 3224 – Guidance on protected health information**
  - Requires the Secretary of HHS to issue guidance within 180 days on the sharing of patient health information during the public health emergency

- **Sec. 3701 – Exemption for telehealth services**
  - Allows high-deductible health plans with health savings accounts (HSAs) to cover telehealth services prior to a patient reaching the deductible

- **Sec. 3703 – Increasing telehealth flexibilities during emergency period**
  - Removes the COVID-19 telehealth waiver requirement that a provider must have seen the patient within the last 3 years (which CMS has already stated they would not enforce)
- Removes the definition of telehealth under the waiver as real-time audio/visual technology, allowing the Secretary of HHS to give flexibility to providers to use audio-only telehealth
- Allows flexibility to open the waiver to additional providers

- **Sec. 3704 – Enhancing Medicare telehealth services for Federally qualified health centers and rural health clinics during emergency period**
  - Adds FQHCs and RHCs as “distant site” providers for purposes of the COVID-19 telehealth waiver, allowing them to bill for telehealth services under the waiver

- **Sec. 3706 – Use of telehealth to conduct face-to-face encounter prior to recertification of eligibility for hospice care during emergency period**
  - During the COVID-19 public health emergency period telehealth can be used to fulfill the hospice face-to-face recertification requirements

- **Sec. 3707 – Encouraging use of telecommunications systems for home health services furnished during emergency period**
  - Requires the Secretary of HHS to issue clarifying guidance encouraging the use of telecommunications systems, including remote patient monitoring, to furnish home health services during the COVID-19 public health emergency period

Division B – Supplemental Appropriations

- **$200 million** for the Federal Communications Commission to support the efforts of health care providers by providing telecommunications services, information services, and devices necessary to enable the provision of telehealth services during the COVID-19 emergency period

- **$1 billion** for the Indian Health Service, for activities including telehealth, electronic health record modernization, and other information technology upgrades

- **$27 billion** for the Public Health and Social Services Emergency Fund, for activities including telehealth access and infrastructure

- **$180 million** for Health Resources and Services Administration to carry out telehealth and rural health activities

- Allows the Secretary of the VA to enter into short-term agreements or contracts with telecommunications companies to provide temporary, complimentary or subsidized, fixed and mobile broadband services for the purposes of providing expanded mental health services to isolated veterans through telehealth or VA Video Connect during the public health emergency

- Requires the Secretary of the VA to ensure that telehealth capabilities are available during the public health emergency for case managers, and homeless veterans participating in, the Department of Housing and Urban Development – Department of Veterans Affairs Supportive Housing program

About eHealth Initiative

eHealth Initiative (eHI) convenes executives from every stakeholder group in healthcare to discuss, identify and share best practices to transform the delivery of healthcare using technology and innovation. eHI, and its coalition of members, focus on education, research, and advocacy to promote the use and sharing of data to improve health care. Our vision is to harmonize new technology and care models in a way that improves population health and consumer experiences. eHI has become a go-to resource for the industry through its eHealth Resource Center. For more information, visit ehidc.org.