

# What the \$2 trillion coronavirus relief plan means for doctors

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**What's the news:** The AMA and other physician organizations sought congressional help to the tune of \$100 billion to aid practices financially battered by the global pandemic that has upended American life—and they got it. The \$2 trillion COVID-19 relief bill was signed into law by President Trump and contains numerous provisions to mitigate the economic damage that the deadly respiratory illness has inflicted on American doctors, hospitals and other health care organizations.

Of particular interest to doctors and their practices, the Coronavirus Aid, Relief and Economic Security (CARES) Act includes:

- \$100 billion in direct financial support to hospitals, physician practices, and other health care providers under the Public Health and Social Services Emergency Fund. This support is for the costs of treating COVID-19 patients as well as to ease the financial impact on those who lose revenue due reductions in other services as a result of the pandemic. The exact eligibility criteria and application process are not yet defined, pending implementation.
- A new loan product within the Small Business Administration for loans of up to \$10 million to help cover payroll and overhead costs, with expanded loan-forgiveness criteria. Physician practices with not more than 500 employees may qualify.
- Suspension of the 2% Medicare sequester in May, to run through December 2020.
- Limitations on liability for volunteer health care professionals during COVID-19 emergency response.
- A temporary waiver of the face-to-face visit requirement with home dialysis patients.
- Authority for the Health and Human Services (HHS) secretary to waive telehealth coverage requirements for new patients during a national emergency. Previous legislation provided flexibility only for established patients seen within the past three years.
- Enhanced use of telehealth under Medicare for federally qualified health centers.

The CARES Act also includes a provision carrying the “health extenders” package through to Nov. 30, 2020. That package was initially set to expire May 22.

**Why it's important:** The \$100 billion in direct financial support, and many of the other helpful provisions included in the legislation, were among those sought by the AMA and many other physician organizations along with the American Hospital Association and the American Nurses Association.

In a letter to congressional leaders, the AMA and other physician organizations explained that the CARES Act should “support and sustain physicians and their practices during this unprecedented national emergency.”

AMA President Patrice A. Harris, MD, MA, commented on the CARES Act while it was under negotiations.

“At this critical moment, physician practices need significant financial support to sustain themselves and continue to meet the health care needs of all Americans during this time,” Dr. Harris said.

Surge-capacity measures taken to cancel or postpone elective procedures have taken a financial toll on doctors and hospitals, some of which are being overwhelmed by an influx of patients needing inpatient supportive care for COVID-19.

Meanwhile, social-distancing measures mean that many nonurgent outpatient visits have been postponed. While many doctors' offices have quickly moved to implement telemedicine to provide care while keeping patients safely at home, that uptick is not nearly enough to make up for dramatic losses of revenue that threaten physician practices' survival.

**Learn more:** As more detail about the massive CARES Act and its provisions emerge, the AMA will give doctors the information they need to take advantage of the relief it provides. Read our summary highlighting provisions impacting practices, physicians and medical students.

The AMA's new financial checklist gives doctors and administrators high-level guidance and 14 practical tips for keeping medical practices in business during this public health crisis. And the AMA's quick guide to telemedicine in practice resource helps mobilize remote care with implementation tips, as well as a reference to Current Procedural Terminology® (CPT) codes for reporting telemedicine and remote care services.

Another new AMA resource helps doctors develop policies and procedures to triage nonurgent patient requests appropriately. The eight recommendations are intended to help physicians preserve staff, personal protective equipment, patient care supplies, ensure staff and patient safety, and prudently use hospital capacity during the COVID-19 pandemic.

Stay up to speed on the AMA's COVID-19 advocacy efforts and track the fast-moving pandemic with the AMA's COVID-19 resource center, which offers a library of the most up-to-date resources from JAMA Network



™, the Centers for Disease Control and Prevention, and the World Health Organization.