eHealth During a Pandemic

This Clinical Journal of Oncology Nursing (CJON) supplement concerning eHealth and clinical oncology care presents expert content on a vital, staple component of clinical care that has been propelled into widespread application because of the COVID-19 pandemic.

Authors began developing content for this supplement in August 2019. In February 2020, the content was finalized and the CJON production team started formatting it for publication.

Therefore, the development of this supplement’s expert content presents extensive expansion of eHealth clinical care, which was prompted by the spread of COVID-19. Fortunately, before the supplement was printed, we were able to add information about the U.S. Centers for Medicare and Medicaid Services broadening access and coverage to Medicare telehealth services (updated as of March 2020) (see Figure 1).

Rest assured, this CJON supplement about eHealth and clinical oncology care remains comprehensive, pertinent, and foundational to all oncology clinicians in practice.

Because of the effects of the virus that causes COVID-19, clinicians will, for the foreseeable future, practice in a different healthcare environment. Guidelines will continue to evolve to ensure that clinical care provided to patients with cancer remains safe and resolute.

eHealth applications will become a more prevalent operational component of the standard of care. They will continue to be reliable methods to expedite patient—provider communication, meet surveillance milestones, and provide timely symptom management.

Looking forward, clinicians will improve these eHealth platforms, refining their effectiveness and efficiencies.

Finally, speaking for CJON’s editorial and production teams, we salute all healthcare professionals providing life-saving and life-affirming care during this pandemic. We also proudly send special recognition to our oncology clinician colleagues, who, as always, provide expert clinical care to patients with cancer and their caregivers.

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FIGURE 1. MEDICARE AND TELEHEALTH: COVERAGE CHANGES BECAUSE OF THE COVID-19 PANDEMIC

Effective March 1, 2020, and for the duration of the COVID-19 national public health emergency, the U.S. Centers for Medicare and Medicaid Services (CMS) announced it would cover telehealth services for Medicare beneficiaries. This allows more patients to avoid clinical care at hospitals, physicians’ offices, and clinics, reducing their risk of exposure to the virus that causes COVID-19.

CHANGE FROM PREVIOUS MEDICARE BENEFICIARY COVERAGE

Before this expansion of CMS coverage, Medicare beneficiary coverage for telehealth services was limited and targeted patients who lived in rural areas. With CMS broadening its telehealth coverage, Medicare patients residing in all areas of the country and in all settings could be covered.

This expansion of CMS telehealth coverage also required the patient to have a prior relationship with a provider.

PROVIDERS AND TELEHEALTH COVERAGE

Expanded CMS-covered telehealth services include telehealth visits billed by the following providers who are practicing within their scope of practice: physicians, nurse practitioners, physician assistants, nurse midwives, certified nurse anesthetists, clinical social workers, clinical psychologists, registered dietitians, and nutrition professionals.

Subject to state laws, CMS telehealth coverage includes telehealth visits, virtual check-ins, and eVisits (including advance care planning) conducted via telephone, audio/visual technology, secure text message, email, and/or patient portal. To date, this expanded CMS telehealth coverage does not cover telehealth clinical care provided by licensed RNs.

Note. Because of the evolving effects of the COVID-19 pandemic on clinical care, CMS regularly updates and clarifies its policies. Therefore, for the latest about CMS-related telehealth services, go to the CMS website (www.cms.gov). Additional resources include Medicare Telehealth Services Existing Policy vs. COVID-19 Policy (bit.ly/2VHhtG9) and “Medicare Telemedicine Health Care Provider Fact Sheet” (go.cms.gov/3cScgfY).