Georgia Composite Medical Board Telehealth Expansion

Under Rule 360-3-0.10-8, GCMB has authorized the following...

1) DEA registered practitioners may issue prescriptions during the [COVID-19] public health emergency, as declared by the Governor of the State of Georgia, for controlled substances to patients for whom they have not conducted an in-person medical evaluation, provided all of the following conditions are met...

- The prescription is issued for a legitimate medical purpose by a practitioner acting in the usual course of his/her professional practice and

- The telemedicine communication is conducted using an audio-visual, real time, two-way interactive communication system and

- The practitioner is acting within federal and state law and otherwise following the provisions of Board Rule 360-3-0.10-8

2) This rule shall only be effective for the duration of the [COVID-19] emergency

Click for Rule 360-3-0.10-8 (download)

Georgia Telemedicine Informed Consent Form (download)

HHS will not seek certain HIPAA noncompliance penalties

The U.S. Department of Health and Human Services (HHS) has announced that physicians may use Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype to provide telehealth services “without risk that [its Office for Civil Rights] might seek to impose a penalty for noncompliance with the HIPAA Rules related to the good faith provision of telehealth during the COVID-19 nationwide public health emergency.”

HHS is stressing that public-facing applications like Facebook Live, Twitch, TikTok, and similar video communication applications should not be used to provide telehealth services.

The following vendors have indicated that they offer HIPAA-compliant video communications products and will enter into HIPAA BAAs...
- Skype for Business
- Updox
- VSee
- Zoom for Healthcare
- Doxy.me
- Google G Suite Hangouts Meet

HHS ‘Notification of enforcement discretion for telehealth remote communications during the COVID-19 nationwide public health emergency’

**Medicare expands telehealth flexibility**

For the duration of the COVID-19 public health emergency, Medicare will make payment for Medicare telehealth services furnished to patients in broader circumstances.

These visits are considered the same as in-person visits and are paid at the same rate as regular, in-person visits.

For the duration of the COVID-19 public health emergency, Medicare will make payment for professional services furnished to beneficiaries in all areas of the country in all settings.

While they must generally travel to or be located in certain types of originating sites such as a physician’s office, skilled nursing facility or hospital for the visit, Medicare will make payment for Medicare telehealth services furnished to beneficiaries in any health care facility and in their home effective for the duration of the COVID-19 public health emergency.

The Medicare coinsurance and deductible would generally apply to these services, but the HHS Office of Inspector General (OIG) is providing flexibility for health care providers to reduce or waive cost-sharing for telehealth visits paid by federal health care programs.

To the extent the 1135 waiver requires an established relationship, HHS will not conduct audits to ensure that such a prior relationship existed for claims submitted during this public health emergency.

[Medicare ‘Telemedicine Health Care Provider Fact Sheet’](#)

[Medicare Telehealth FAQ](#)

[Medicare List of Telehealth Services](#)