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Trump Administration Announces Changes to Medicare Advantage and Part D to Provide Better Coverage and Increase Access for Medicare Beneficiaries

Final Rule continues to strengthen the popular private Medicare health and drug plans

The Centers for Medicare & Medicaid Services today finalized requirements that will increase access to telehealth for seniors in Medicare Advantage (MA) plans, expand the types of supplemental benefits available for beneficiaries with an MA plan who have chronic diseases, provide support for more MA options for beneficiaries in rural communities, and expand access to MA for patients with End Stage Renal Disease (ESRD). Together, the changes advance President Trump's Executive Orders on Protecting and Improving Medicare for Our Nation's Seniors and Advancing American Kidney Health as well as several of the CMS strategic initiatives.

Due to the upcoming June 1, 2020, MA and Part D bid deadlines for the 2021 plan year, CMS is finalizing a subset of the proposed policies before the MA and Part D plans' bids are due. CMS plans to address the remaining proposals for plans later in 2020 for the 2022 plan year. We understand that the entire healthcare sector is focused on caring for patients and providing coverage related to coronavirus disease 2019 (COVID-19), and we believe this approach provides plans with adequate time and information to design the best coverage for Medicare beneficiaries.

"CMS's rapid changes to telehealth are a godsend to patients and providers and allows people to be treated in the safety of their home," said CMS Administrator Seema Verma. "The changes we are making will help make telehealth more widely available in Medicare Advantage and are part of larger efforts to advance telehealth."

Building on actions that the Trump Administration has taken to expand access to telehealth so beneficiaries can get care at home instead of traveling to a healthcare facility, today's rule encourages MA plans to increase their telehealth benefits and increase plan options for

beneficiaries living in rural areas. CMS is giving MA plans more flexibility to count telehealth providers in certain specialty areas (such as Dermatology, Psychiatry, Cardiology, Ophthalmology, Nephrology, Primary Care, Gynecology, Endocrinology, and Infectious Diseases) towards meeting CMS network adequacy standards. This flexibility will encourage plans to enhance their benefits to give beneficiaries access to the latest telehealth technologies and increase plan choices for beneficiaries residing in rural areas.

Today's rule gives beneficiaries with ESRD more coverage choices in the Medicare program. Previously, beneficiaries with ESRD were only allowed to enroll in MA plans in limited circumstances. The rule implements the changes made by the 21st Century Cures Act to give all beneficiaries with ESRD the option to enroll in an MA plan starting in 2021. This will give beneficiaries with ESRD access to more affordable Medicare coverage options that may include extra benefits such as health and wellness programs, transportation, or home-delivered meals that are not available in Medicare Fee-For-Service.

CMS is also finalizing proposals to enhance the MA and Part D Star Ratings system to further increase the impact that patient experience and access measures have on a plan's overall Star Rating. The Star Ratings system helps people with Medicare, their families, and their caregivers compare the quality of health and drug plans being offered. One of the best indicators of a plan's quality is how its enrollees feel about their coverage experience. This decision reflects CMS's commitment to put patients first and improves incentives for plans to focus on what patients value and feel is important. Additionally, CMS adopted a series of changes in the March 31, 2020, Interim Final Rule with Comment Period (CMS-1744-IFC) for the 2021 and 2022 Star Ratings to accommodate challenges arising from the COVID-19 public health emergency.

For a fact sheet on the Contract Year 2021 Medicare Advantage and Part D Final Rule (CMS-4190-F1), please visit: <https://www.cms.gov/newsroom/fact-sheets/contract-year-2021-medicare-advantage-and-part-d-final-rule-cms-4190-f1-fact-sheet>

The final rule can be downloaded from the Federal Register at: <https://www.federalregister.gov/documents/2020/06/02/2020-11342/medicare-program-contract-year-2021-policy-and-technical-changes-to-the-medicare-advantage-program>

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