

PUBLICATION

Medicare Telehealth Waivers Extended Through January 2026

Authors: Allison M. Cohen, Alexander S. Lewis, Samuel E. Cottle

November 19, 2025

The end of the government shutdown marks the end of a tumultuous month for telehealth providers. When Congress failed to pass a Continuing Resolution (CR) by September 30, 2025, a number of legislative payment provisions that have allowed broader Medicare coverage of telehealth services and at-home hospital services since the COVID-19 public health emergency (PHE) expired (effective October 1, 2025). This put providers and practitioners who have come to rely on this expanded coverage to provide telehealth service to patients in their homes and urban clinical settings in a very difficult position with respect to the provision of these services.

On November 12, 2025, President Trump signed a [Continuing Resolution](#) that, among other things, requires (i) retroactive coverage for telehealth services furnished since October 1, 2025 that would be covered by Medicare under the COVID-19-era telehealth flexibilities, and (ii) extends the flexibilities to January 30, 2026.

The flexibilities that were extended include:

- Lifting geographic restrictions and maintaining the expanded list of originating sites including patients' homes.
- Expanding the list of distant site practitioners to include all practitioners who are eligible to bill Medicare for covered services (e.g., physical therapists, occupational therapists, speech language pathologists, audiologists, marriage and family therapists, and mental health counselors).
- Allowing federally qualified health centers and rural health clinics to serve as distant site providers of telehealth services.
- Allowing payment for audio-only telehealth services.
- Extending the waiver of the requirement for practitioners who provide behavioral and mental health via telehealth to provide in-person visits within six months of the first telehealth visit and annually thereafter.
- Extending Acute Care Hospital at Home Waiver Authorities.
- Allowing the use of telehealth to conduct the face-to-face encounter required for recertification of eligibility for hospice care.

Takeaways

The extensions provided by the Act are critically important to telehealth providers because without them Medicare coverage of telehealth services will once again be restricted by provisions in Section 1834(m) of the Social Security Act that historically limited Medicare coverage of telehealth services to services furnished to patients in rural clinical sites by a specified list of providers with limited exceptions. The extension of these waivers through January 30, 2026, provides relief for health care providers with respect to Medicare payment for telehealth services. Telehealth providers and practitioners will be awaiting further action from the new Congress before the next impending termination of these important statutory waivers, which have allowed Medicare coverage of telehealth services that patients and providers have come to rely upon.

For more information, please contact [Allison M. Cohen](#), [Alex S. Lewis](#), [Samuel Cottle](#), or any member of Baker Donelson's [Telehealth](#) Group.