Medicare and Telehealth: What You Need to Know

Some telehealth benefits may change starting October 1, 2025

As of October 1, 2025, some of the special telehealth options added during COVID-19 may not be covered by Medicare unless Congress acts to extend this coverage. This means fewer telehealth visits will be covered.

Note: Medicare will continue to cover telehealth services for mental health and behavioral health care without restrictions.

For <u>non-mental</u> health and <u>non-behavioral</u> and <u>telehealth</u> services, Medicare coverage has reverted to pre-pandemic rules. This means coverage for telehealth services will be limited to rural locations and specific types of health care providers.

What you should do

Check with your insurance provider about coverage for video visits. Your provider may ask you to sign a notice (called an Advance Beneficiary Notice) letting you know that Medicare may not pay for a telehealth visit, and you may be responsible for the cost.

We will continue to provide updates as more information becomes available. In the meantime, for more details, you can visit Medicare's telehealth page: cms.gov/medicare/coverage/telehealth.

Medicare and Telehealth: Frequently Asked Questions

Q: Will my Medicare telehealth visits continue to be covered?

Starting October 1, 2025, some telehealth services may no longer be covered unless Congress acts to extend this coverage. *Note: Mental health and behavioral health visits will still be covered.*

Q: Can I still have telehealth visits from home?

Unless you live in a rural area or are using the service for mental health or behavioral health care, Medicare may not pay for telehealth from home.

Q: What if Medicare doesn't cover my telehealth visit?

Your provider may ask you to sign a form (Advance Beneficiary Notice) so you know you may have to pay for the visit yourself.

Q: What should I do now?

Just check with your provider before scheduling a telehealth visit after October 1, 2025 to confirm whether it's covered.