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Medicare Telehealth Waivers Extended for Several More Years

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President Trump has signed the Consolidated Appropriations Act, 2026 (CAA, 2026), extending Medicare telehealth flexibilities through December 31, 2027, and Acute Hospital Care at Home authorities through September 30, 2030.

The Medicare telehealth 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 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 services via telehealth to furnish in-person visits within six months of the first telehealth visit and annually thereafter; and
- extending use of telehealth to conduct face-to-face encounters prior to recertification of eligibility for hospice care.

Finally, the CAA, 2026 adds a new paragraph to Section 1834(m) of the Social Security Act that requires the Department of Health & Human Services/Centers for Medicare & Medicaid Services to establish new codes or modifiers for claims for telehealth services furnished by physicians or practitioners that contract with or have payment arrangements with the telehealth virtual platform used to provide the services, and for telehealth services furnished incident to a physician's or practitioner's service.

Takeaways. The extensions provided by the CAA, 2026 are critically important to telehealth providers. 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. By extending the Medicare telehealth flexibilities through December 31, 2027, and the Acute Hospital Care at Home initiative through September 30, 2030, Congress provides more certainty for health care providers with respect to Medicare payment for these services. The requirement to establish modifiers to identify certain telehealth services will make it easier for regulators to identify and audit these services, so providers should monitor how this legislative provision is implemented. Providers and practitioners should continue to follow congressional action to determine whether additional extensions or permanent reforms will be enacted.

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