



Medicare Telehealth Policy Update (February 2, 2026)

Medicare Telehealth Waivers Extended Through December 31, 2027

Congress has formally extended key Medicare telehealth flexibilities through December 31, 2027, restoring coverage after a brief lapse and providing nearly two years of reimbursement stability for hospital-based telemedicine programs.

This extension preserves the operational and financial continuity previously covered telehealth services, including neurology, and behavioral health services.

Specifically, the following flexibilities remain in effect:

- No geographic restrictions for telehealth
- Home as an originating site
- Expanded list of eligible telehealth providers
- Continued allowance of audio-only services (when appropriate)
- Waiver of prior in-person visit requirement for Medicare mental health
- FQHC and RHC eligibility to furnish telehealth
- No frequency limits for inpatient, nursing facility, and critical care consults
- Hospice recertification via telehealth
- Acute Hospital Care at Home extended through 2030

Impact on Stroke & Neurology Programs

This congressional action removes near-term reimbursement uncertainty and protects continuity of inpatient and outpatient neurology services, regardless of urban or rural locations, along with hospital-at-home initiatives through 2027, to include:

- Medicare reimbursement for telestroke consults
- Stability for inpatient neurology and critical care coverage
- Protection of rural and urban access models
- Support for hospital-at-home initiatives

Impact on Behavioral Health Programs

- Mental health in-person visit requirement waived through 2027
- Continuity of telepsychiatry services in inpatient and outpatient settings
- Additionally, the DEA has extended the telehealth prescribing waiver for controlled substances through December 31, 2026, preserving access to psychiatric medication management without requiring an initial in-person visit.

Our Commitment



TeleSpecialists remains focused on:

- Maintaining compliant, uninterrupted specialty coverage
- Supporting the quality and accreditation goals of our partner hospitals and health systems
- Protecting reimbursement pathways
- Providing the latest updates on policy changes that impact partner program

If you would like a brief review of how these updates apply to your hospital, our team is available for you.

We appreciate your continued partnership in advancing access to neurological and behavioral health care.

**Some of the information in this article has been adapted from the Center for Connected Healthcare Policy and the Centers for Medicare and Medicaid*

About This Information Center

TeleSpecialists maintains this resource to provide factual updates on Medicare telehealth reimbursement policy. Information is sourced from Congressional legislative text, CMS regulatory guidance, and healthcare industry association communications.