



Key 2026 Medicare Telemedicine Policies



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The week after the government restored operations, the Centers for Medicare & Medicaid Services released updated guidance on Medicare telemedicine rules. Although claims will be paid retroactively to October 1, the government appears to be firm in its conclusion of telemedicine reimbursement after January 30, 2026. Several flexibilities extended during the pandemic era will remain in place through January 30; however, many policies will revert to pre-pandemic statutory requirements after that point.

Here's the landscape as of January 31:

- Patients must be located in a facility in a rural area to receive Medicare-payable telemedicine services. Behavioral health services are exempt.
- Health care professionals such as physical and occupational therapists, speech-language pathologists, and audiologists will no longer be eligible to bill telemedicine under Medicare.

- Virtual-only telemedicine clinicians whose only physical practice location is their home address need to enroll their home address as a practice location; however, a request may be made to suppress the address from public access.
- Hospital-based diabetes self-management training and medical nutrition must be delivered in person to be billable.
- New mental health telemedicine patients must have an in-person visit within six months prior to the initial telemedicine encounter, followed by annual in-person visits. (There is an exception for patients who were already receiving home-based mental health telemedicine; they only need annual in-person follow-up.)
- Audio-only telemedicine remains permissible for behavioral health, when patients cannot or do not consent to video.
- Teaching physicians may continue using virtual presence for telemedicine
- Telemedicine frequency limits for inpatient, nursing facility, and critical care visits are permanently removed.
- Virtual direct supervision via real-time audio/video is allowed for services without 10- or 90-day global periods including pulmonary and cardiac rehab services.
- Place-of-service codes 02 or 10 should be used for Telehealth Provided Other than in Patient's Home or Telehealth Provided in Patient's Home,

This guidance provides important clarity as medical practices prepare for the transition back to statutory telemedicine requirements.

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