

# UPDATED ON TELEHEALTH FEDERAL POLICIES

May 27, 2026

Wyoming Telehealth Network



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## CENTER FOR CONNECTED HEALTH POLICY (CCHP)

is a non-profit, non-partisan organization that seeks to advance state and national telehealth policy to promote improvements in health systems and greater health equity.

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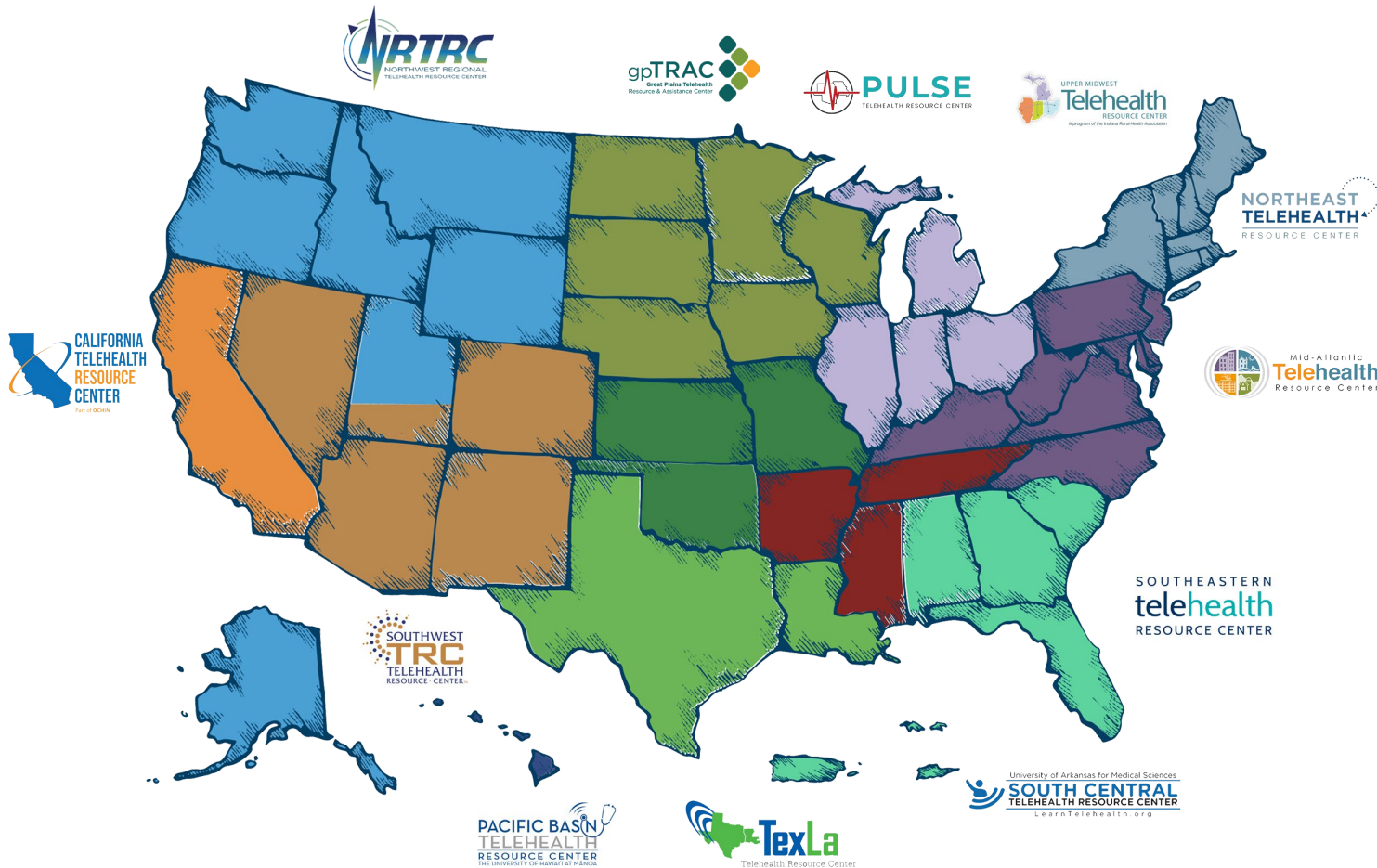


# ABOUT CCHP

- Established in 2009 as a program under the Public Health Institute
- Became federally designated national telehealth policy resource center in 2012 through a grant from HRSA
- Work with a variety of funders and partners on the state and federal levels
- Administrator National Consortium of Telehealth Resource Centers
- Convener for California Telehealth Policy Coalition



# NATIONAL CONSORTIUM OF TRCS



# AGENDA FOR TODAY

- ✓ Extension of Medicare Telehealth Waivers
- ✓ Prescribing
- ✓ Privacy
- ✓ Licensure



# Extension of Medicare Telehealth Waivers

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# HR 7148

## HR 7148 – Extended Medicare telehealth waivers to December 31, 2027.

- ✓ Location (geographic & site) requirements are waived
- ✓ Expanded list of eligible providers who can use telehealth & be reimbursed
- ✓ FQHCs and RHCs are eligible telehealth providers
- ✓ Delay the prior in-person visit for mental health when certain permanent telehealth requirements not met
- ✓ Delay the prior in-person visit for mental health visits provided by FQHCs/RHCs via telecommunications technology
- ✓ Allowing audio-only to be used
- ✓ Extending use of telehealth for face-to-face encounter for recertification of eligibility for hospice care



# HR 7148 (What Else Did It Do?)

- ✓ CMS will be required to have billing modifiers by 2027 to identify telehealth services delivered through third party virtual platforms with whom the clinician has contracts or has a payment arrangement, and when the telehealth is billed “incident to” another professional service.
- ✓ Through CY 2027 hospitals will be allowed to furnish and bill Medicare for cardiopulmonary rehabilitation services delivered to hospital outpatients in their homes via live video
- ✓ Within a year of this bill’s passage, HHS must issue guidance on best practices for delivering telehealth services to patients with limited English proficiency.
- ✓ Requires CMS to educate Medicare clinicians by January 1, 2028 on screening for medication-induced movement disorders in at-risk patients, including best practices for telehealth screening and how such services should be reflected in billing.



# HR 7148 (What Else Did It Do?)

- ✓ Extend the Acute Hospital Care At Home Initiative to **September 30, 2030**
- ✓ Requires Medicare Advantage plans to include certain information in provider directories, including telehealth capabilities
- ✓ \$1 million allocated to the purchase and implementation of telehealth services and other efforts to improve health care coordination for rural veterans between rural provides and the VA

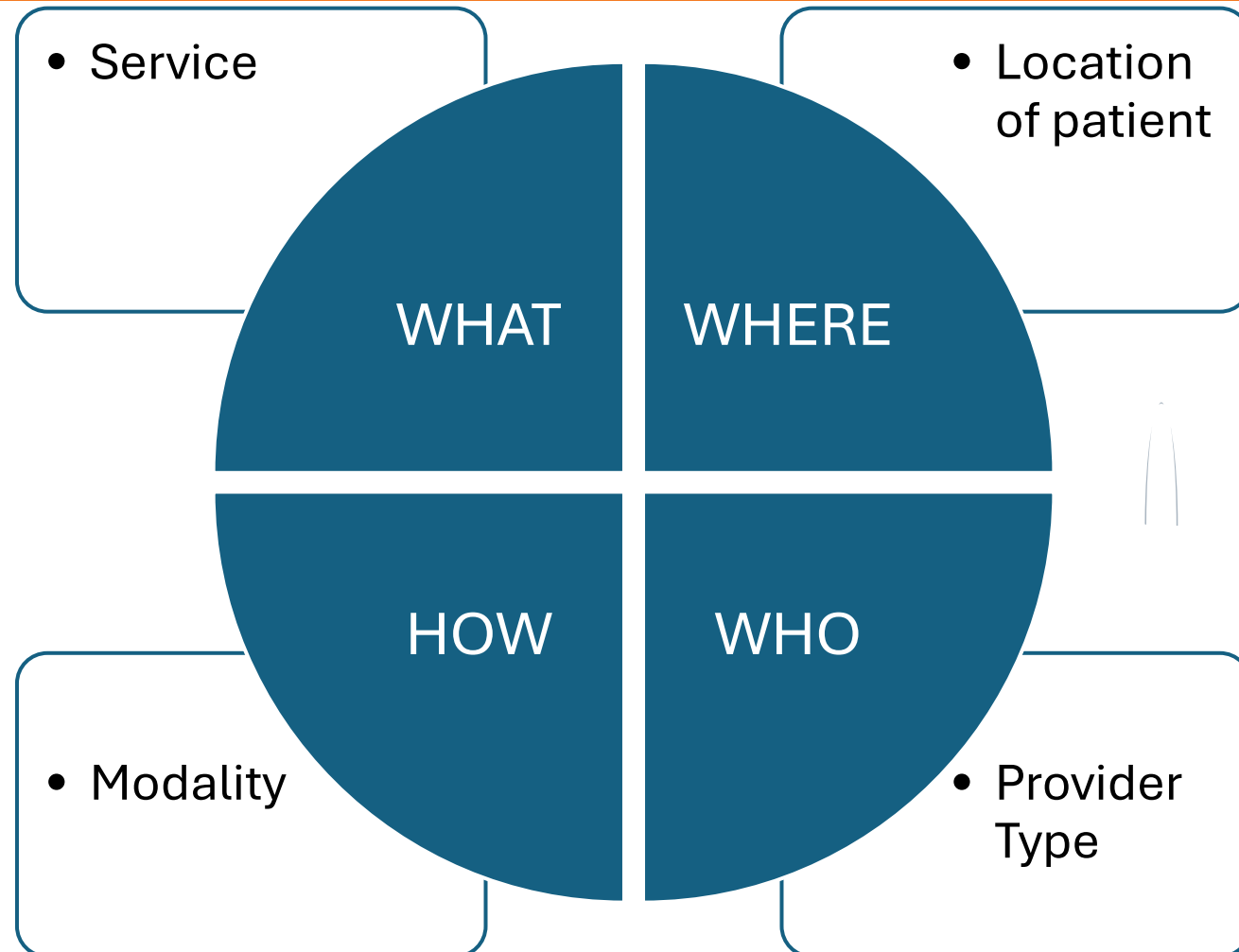


# MEDICARE TELEHEALTH POLICY

MEDICARE TELEHEALTH WAIVER	REMAINS UNTIL DECEMBER 31, 2027
Waiver of geographic requirement	✓
All eligible providers in Medicare & FQHCs/RHCs to be eligible providers	✓
Site limitation waived (allowing places such as the home)	✓
Allow some services to be provided via audio-only*	✓
Delay of prior in-person visit before telemental health services provided w/o meeting geographic req & in the home	✓



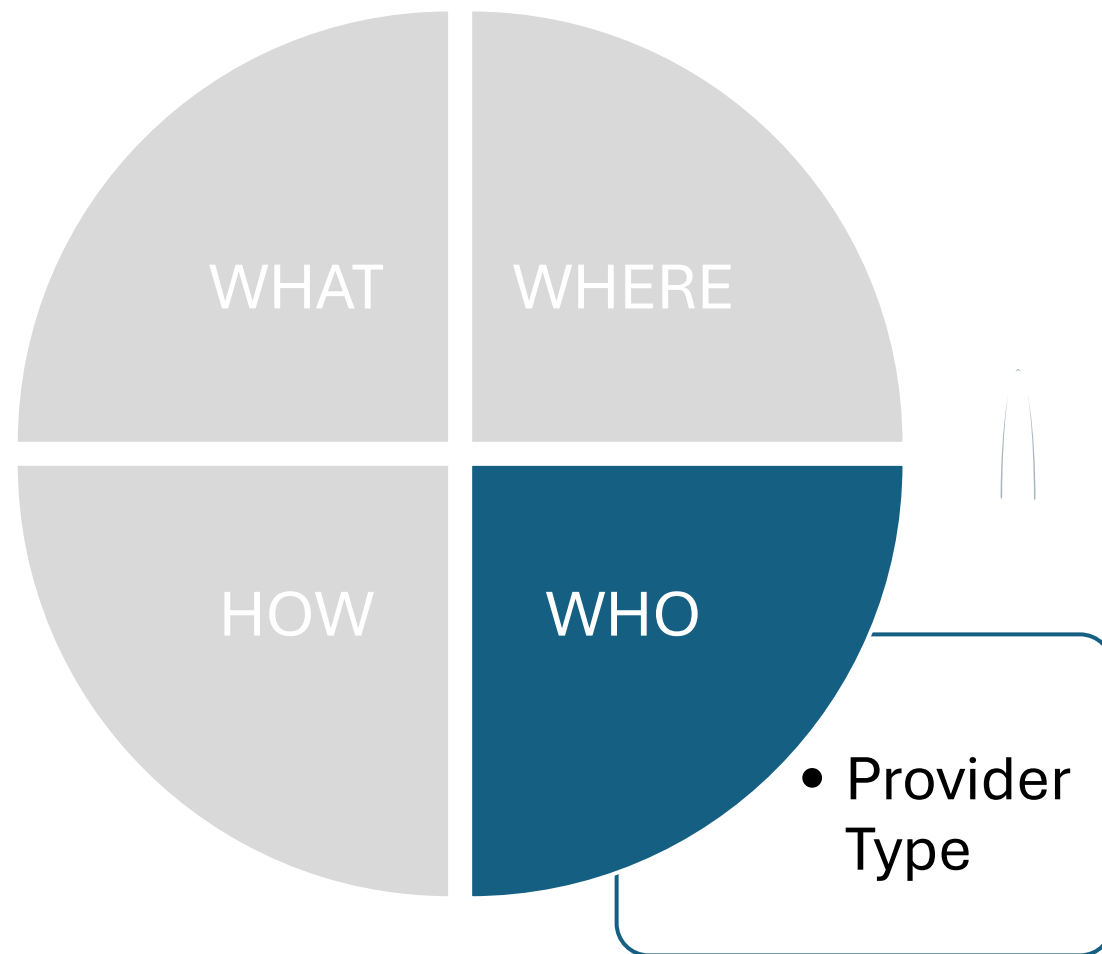
# TELEHEALTH POLICY



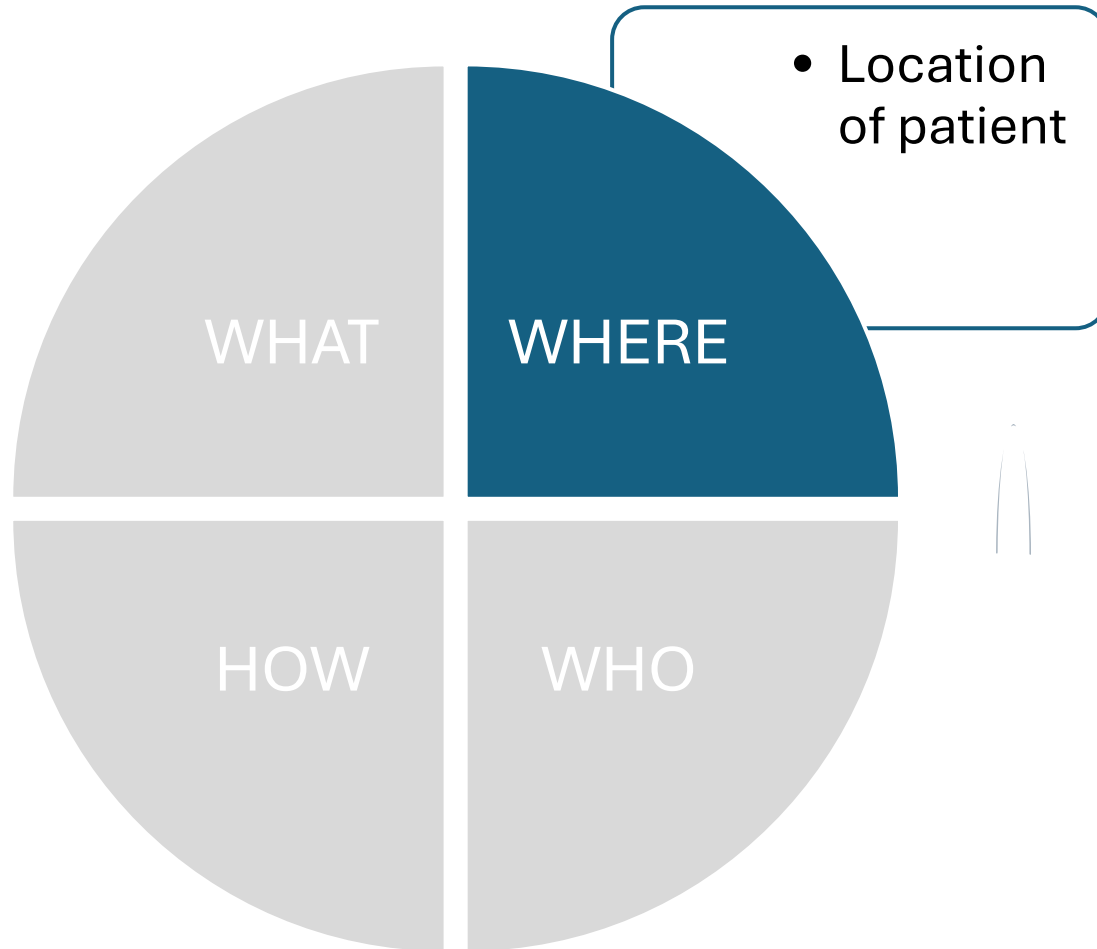
# TELEHEALTH POLICY – Eligible Providers

Until the end of 2027, all eligible Medicare providers may provide eligible services via telehealth and have it covered by Medicare. This includes physical and occupational therapists and speech language pathologists. It will also include FQHCs & RHCs.

Permanent policy has a limited list of eligible providers and does not include FQHCs and RHCs.



# TELEHEALTH POLICY – Location & Prior In-Person Visit



Removes the geographic and site requirements; allows home to be an eligible site for telehealth services for all services.

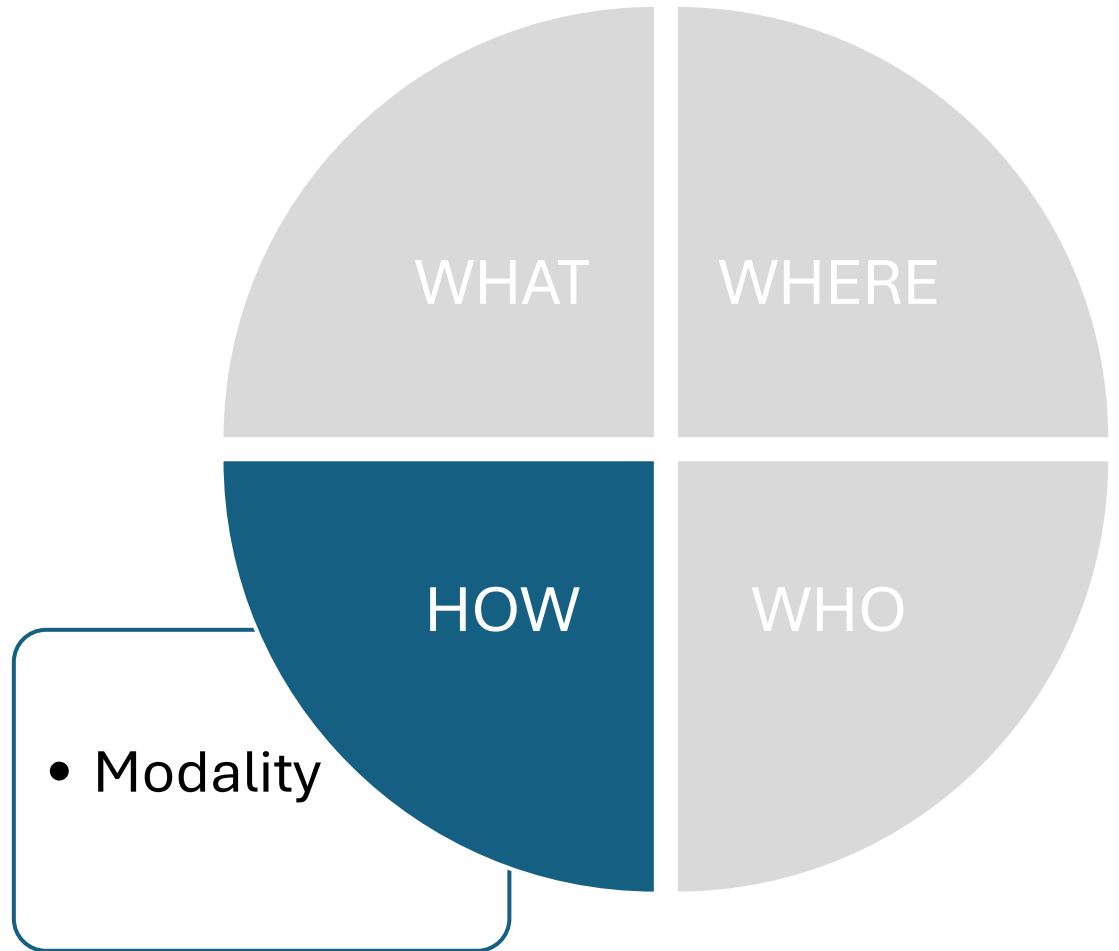
Permanent policy would only allow for a limited set of services to take place in the home including mental/behavioral health services if certain requirements met, including a prior in-person visit. This requirement is also waived until the end of 2027.



# TELEHEALTH POLICY – Audio-Only

Audio-only may be used to provide services when the patient is in their home. Unlike in the past when the Medicare eligible telehealth services list noted which services may be delivered via audio-only, it no longer specifies that. Additionally, the 98000 series are NOT reimbursed by Medicare (except 98016 which replaced G2012 (brief 5-10 virtual check-in))

[Medicare Eligible Telehealth Services List](#)



# FQHC/RHC

Mental/Behavioral Health Services that are delivered via **telecommunications technology** are regarded as a mental/behavioral visit for FQHCS/RHCs and should be billed that way and are reimbursed PPS/AIR rates. This is permanent policy



## Regular Service

Medical services delivered via a **telecommunications system** are regarded as telehealth services and should be billed with G2025 and are reimbursed at a rate calculated by CMS. These services are under the federal waiver and ability to provide them with technology will expire Jan 1, 2028.

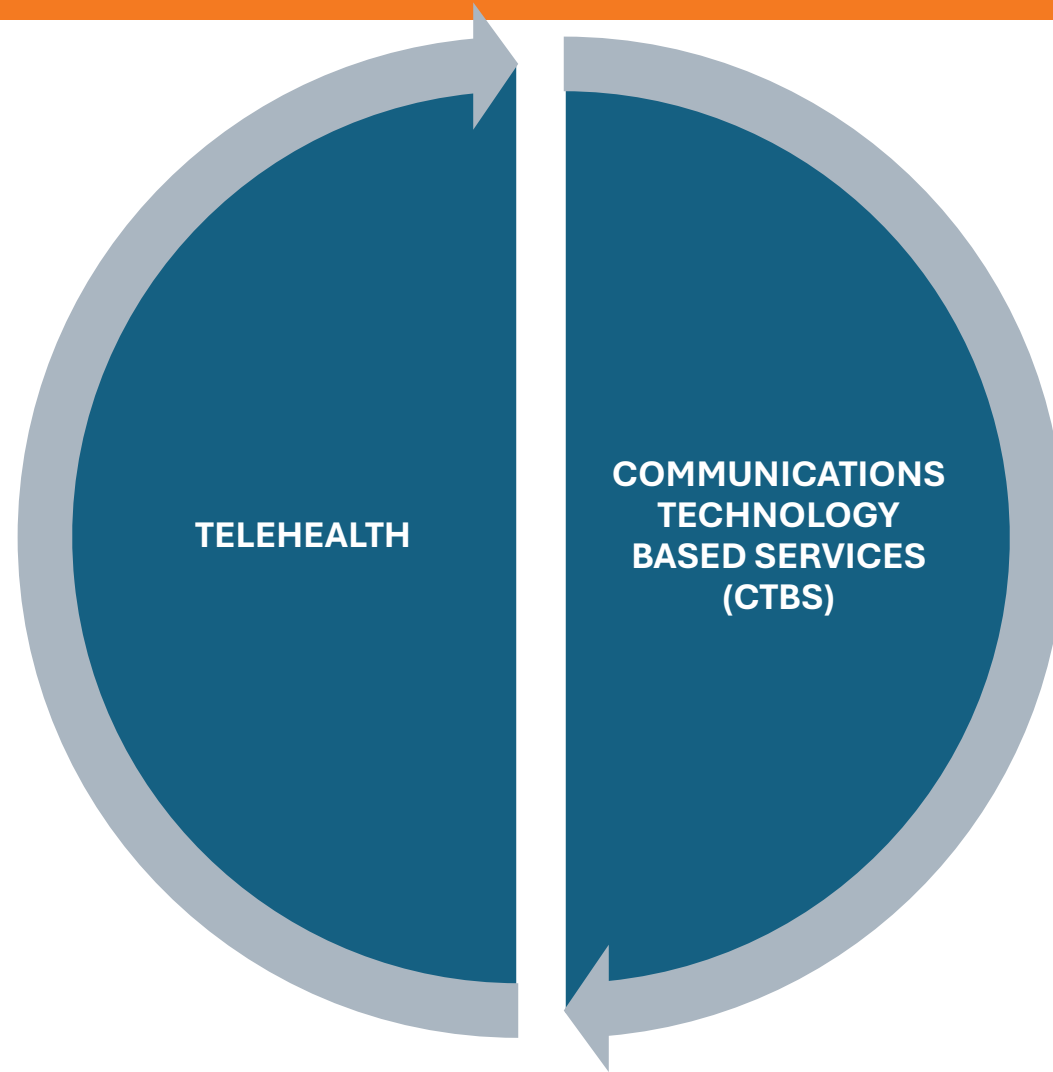


## Telehealth Service



# TELEHEALTH VS. CTBS

IMPACTED BY THE  
MEDICARE TELEHEALTH  
WAVIERS



**NOT** IMPACTED BY THE  
MEDICARE TELEHEALTH  
WAVIERS

# CTBS

- ✓ Services Require Patient Consent
- ✓ May require they be patient-initiated (e.g., virtual check-ins)
- ✓ May only be for established patients
- ✓ Each code may have specific documentation requirements (e.g., documentation of medical necessity & recommendations)

eConsult

eVisit

RPM

RTM

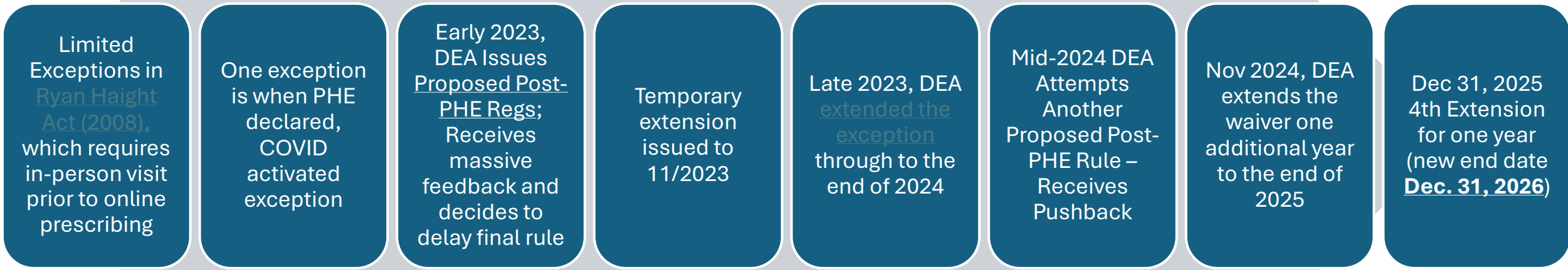
Virtual  
Check-ins

# Prescribing, Privacy, Licensure

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# CONTROLLED SUBSTANCE PRESCRIBING VIA TELEHEALTH



[DEA Fourth Extension on Telehealth Prescribing Waiver \(Dec 31, 2026\)](#)

NOTE: States may have additional/stricter requirements



# PRIVACY

- ✓ Still have to follow HIPAA even though telehealth was used
- ✓ States may have stricter privacy protections
- ✓ Informed consent: WY has different policies depending on type of professional. Consent must be obtained, but may have different requirements/rules.
  - Teledentistry – Obtain written consent prior to rendering services
  - Chiropractic Examiners – Consent should contain:
    - Identification of the patient, the provider and the provider’s credentials;
    - Types of transmissions permitted using telehealth technologies (e.g. appointment scheduling, patient education, etc.);
    - The patient agrees that the licensee determines whether or not the condition being diagnosed and/or treated is appropriate for a telehealth encounter; and
    - Details on security measures taken with the use of telehealth technologies, such as encrypting data, password protected screen savers and data files, or utilizing other reliable authentication techniques, as well as potential risks to privacy notwithstanding such measures, and adherence to all applicable Health Insurance Portability and Accountability Act standards.



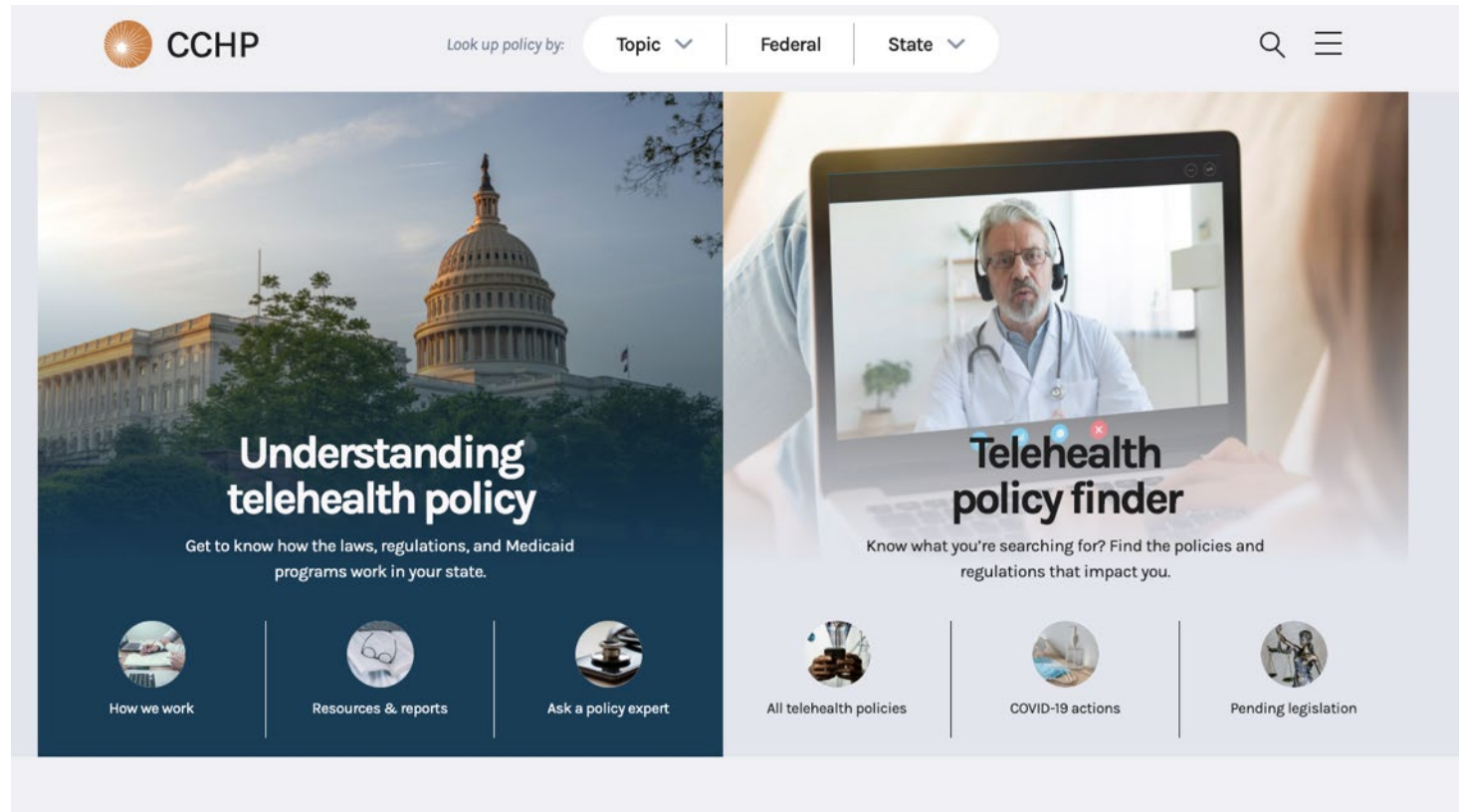
# LICENSURE

- ✓ May provide consultations without WY License, but not more than 12 days in a 52 week period. Must be brought in by a licensed WY provider
- ✓ During emergencies or pandemics
- ✓ Exception – Non-WY licensed provider may provide services if relationship was established out-of-state via an in-person encounter in state provider licensed. Care must be extension of the case that was the in-person encounter. May do this for up to six months after that in-person encounter, after that would need to see the patient again in the state provider licensed.

SOURCE: [WY Rules and Regulations, Board of Medicine, Agency 52, Ch. 1, Sec. 4 & 7,](#)



## ➤ CCHP Website – [cchpca.org](http://cchpca.org)



## ➤ Subscribe to the CCHP newsletter at [cchpca.org/contact/subscribe](http://cchpca.org/contact/subscribe)





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**Thank You!**

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# APPENDIX

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# CCHP

## ➤ Telehealth Policy Finder Tool

- Includes all state and federal telehealth specific laws, regulations, policies, and active legislation – rolling updates every 3 months
- Can Search by State, Federal, or by Category/Topic
  - Medicare; Medicaid Live Video, Store & Forward, RPM; Private Payer Laws; Professional Regulation, Licensing, Prescribing & More

## ➤ Policy Trend Maps

- Highlights telehealth trends across the states in Medicaid reimbursement by modality, private payer laws and payment

# OTHER RESOURCES

- [CMS MLN 901705 \(DECEMBER 2025\)](#)
- [CMS Telehealth FAQ \(2/26/2026\)](#)