

Current Rules for Medicare FFS Telehealth (as of October 1, 2025)

Service Type	Before October 1 (Flexibilities Active)	During Shutdown (Starting October 1)
Medical Telehealth Visits	Patients could be anywhere, including their home. Providers could be remote.	Urban health centers: Telehealth will not be reimbursed . Rural health centers: Telehealth may be reimbursed if the patient is physically located at a qualifying rural originating site during the visit. This includes health centers located in a rural Health Professional Shortage Area (HPSA) or in a non-Metropolitan Statistical Area (MSA) county . Providers can still be remote.
Behavioral Health Telehealth Visits	No in-person visit requirement for new or continuing patients.	Behavioral health services are exempt from the geographic and originating site restrictions, so telehealth (including home-based) is still permitted. In-person visit requirement: Patients who begin tele-behavioral health services on or after Oct 1 must have had an in-person visit with the same provider or a member of the same clinical team within the past 6 months. Patients already receiving tele-behavioral health services have 12 months to complete the required in-person visit.
Audio-Only (Medical)	Allowed if video was not an option; patients could be at home.	Audio-only medical telehealth is no longer reimbursable.
Audio-Only (Behavioral Health)	Permitted under specific conditions.	Still permitted when audio-visual technology is not available or not feasible for the patient , under the behavioral health telehealth flexibilities.