

Telehealth Waivers Expire, CMS Guidance Released

Digital Health

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Government funding has lapsed as of October 1, as well as current telehealth waivers. It is expected that if and when Congress acts on government spending, an extension would be included, but it is not clear when that will occur. CMS released guidance directing Medicare Administrative Contractors (MACs) to implement a temporary claims hold. This standard practice is typically up to 10 business days and prevents the need for reprocessing large volumes of claims should Congress act after the statutory expiration date. Providers can continue to submit claims during this time, but payment will not be made until the hold is lifted. Additionally, CMS reiterated that absent congressional action, many of the statutory limitations that were in place prior to the COVID-19 Public Health Emergency (PHE) will take effect again, and that practitioners may choose to hold claims associated with telehealth services that are not payable by Medicare in the absence of congressional action. CMS noted that clinicians in applicable Medicare Accountable Care Organizations (ACOs) can provide and receive payment for covered telehealth services to certain Medicare beneficiaries without geographic restriction and in the beneficiary's home. Stay up to date on further information related to government funding and expiring provisions via our [website](#). You can also sign up for our government relations and public policy email newsletter for further updates.