



Update: CMS Telehealth Services for Risk Adjustment Expires September 30, 2025

Congress has not yet extended the COVID-19 public health emergency (PHE) flexibilities that were in place for Medicare plans through September 30, 2025 for telehealth services. Continuing Resolution (CR; [H.R. 10545](#)) to extend federal spending and avert a government shutdown through September 30, 2025 has not yet passed.

HAP aligns its telehealth/virtual services billing guidelines with the American Medical Association (AMA), the Centers for Medicare & Medicaid Services (CMS) and the Michigan Department of Health and Human Services (MDHHS). While we anticipate that authorization will ultimately be renewed, we are prepared for the possibility of a temporary gap. Note: Telehealth for members with Affordable Care Act plans will continue without interruption.

As soon as Congress extends Medicare telehealth, we will immediately notify providers to continue these services.

Reminder! This policy had allowed the following.

- Medicare patients to receive telehealth services for non-behavioral/mental health care in their home through September 30, 2025.
- No geographic restrictions for originating site for Medicare non-behavioral/mental telehealth services through September 30, 2025.
- Telehealth services could be provided by all eligible Medicare providers through September 30, 2025, and acceptable for Risk Adjustment Hierarchical Condition Categories (HCC) gap closure. Physicians and practitioners must use 2-way, interactive, audio-video technology to deliver Medicare telehealth services.

More information can be found at [Telehealth policy updates | Telehealth.HHS.gov](#).

If you have any questions regarding this update, please contact the HAP Risk Adjustment Education Team at hccgapclosure@hap.org.