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Primary Care Providers
Behavioral Health Providers
Clinical staff
Specialist
Claims and Billing Department
Facility/Practice staff

Telehealth Flexibilities and Possible Expiration

MVP Health Care® (MVP) appreciates the work that you do to support our Members. We understand many of you have questions on whether telehealth flexibilities will be extended and what this means for reimbursement of services provided via telehealth and/or telemedicine.

Brief background

During the COVID-19 pandemic, the Centers for Medicare & Medicaid Services (CMS) expanded coverage for telehealth services provided to Medicare beneficiaries. Several geographic restrictions, audio-only service limitations, and practitioner requirements were temporarily waived to increase access to care. Congress has continued to extend these waivers through legislation, with the most recent extension expiring on September 30, 2025.

MVP applied these waivers for Medicare, Medicaid Managed Care, HARP, Essential Plan, Child Health Plus, and Commercial products.

What we know right now

The expiration of these waivers was contingent upon subsequent Congressional action. Since the federal government has not yet enacted a Continuing Resolution to extend funding, pre-COVID regulations will once again govern Medicare beneficiaries.

This is a developing situation, and MVP is closely monitoring the changes and what this means for our valued Members and trusted Providers.

We will communicate operational changes to you as soon as able, and no changes to your reimbursement will be made until further notice.