JULY 2025

ISSUE BRIEF

Maintain Telemental Health Care Flexibilities in Medicare

BACKGROUND

During the COVID Public Health Emergency (PHE), Medicare telehealth flexibilities provided a critical means for social workers to maintain health care services for beneficiaries. In addition to continuity of care, these flexibilities also ensured that social workers were able to meet the significant increased demand for mental health services resulting from the COVID-19 pandemic. Beyond the pandemic, telehealth continues to serve as a vital means of mental health service delivery.

Several telehealth flexibilities implemented during the PHE have been extended on a temporary basis. One of these flexibilities enables Medicare beneficiaries to seek mental health services via telehealth without requiring an in-person visit. Without further congressional action, beneficiaries will face an arbitrary requirement that they receive in-person care within six months of accessing mental health services via telehealth beginning October 1, 2025. This in-person visit would need to occur regardless of whether it is needed or wanted. Given mental health conditions remain the top telehealth diagnosis since the onset of the pandemic—rising from 34% to 67%—this policy is unduly burdensome for beneficiaries and risks many losing access to these vital services should it take effect.

Of note, Medicare beneficiaries utilize telehealth for a larger share of their behavioral health services compared to other health services.[1]

The six month in-person requirement is a striking example of arbitrary red tape that only serves to limit access to life changing care; and, in fact, could further exacerbate our nation's growing mental health crisis. Even in states with the most access, two in five individuals go without treatment.[2] In order to maintain and continue the progress we have made in working to ensure that beneficiaries in need have access to mental health services, it is essential that Congress act to prevent this burdensome and unnecessary in-person requirement from taking effect.

LEGISLATIVE SOLUTION

The bipartisan, bicameral Telemental Health Care Access Act (S. 2011/H.R. 3884), led by Sens. Bill Cassidy (R-LA) and Tina Smith (D-MN) and Reps. Doris Matsui (D-CA-07) and Troy Balderson (R-OH-12), would remove barriers to care for Medicare beneficiaries by permanently removing the six month in-person requirement. This bill would align telemental health care with current policy for individuals seeking medical services or substance use disorder services, which have no in-person requirements. NASW strongly supports this commonsense legislation and urges its enactment.

---

[1] U.S. Department of Health and Human Services Office of Inspector General. (2022). *Data brief: Telehealth was critical for providing services to medicare beneficiaries during the first year of the covid-19 pandemic*. Retrieved from https://oig.hhs.gov/oei/reports/OEI-02-20-00520.pdf

[2] Mental Health America. (2021). The State of Mental Health in America 2021 Report. Retrieved from https://mhanational.org/issues/state-mental-health-america.

For more information contact:
Dina Kastner, MSS, MLSP
dkastner.nasw@socialworkers.org
202.336.8218