

# ISSUE BRIEF

## Maintain Telemental Health Care Flexibilities in Medicare

### BACKGROUND

During the COVID Public Health Emergency, Medicare telehealth flexibilities provided a critical means for social workers to maintain health care services for beneficiaries in need. 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.

The *Consolidated Appropriations Act of 2023* extended several telehealth flexibilities implemented during the pandemic through December 31, 2024. One of these flexibilities enables Medicare beneficiaries to seek mental health services via telehealth without requiring an in-person visit. Without congressional action, an in-person visit requirement within six months of accessing mental health services via telehealth will take effect on January 1, 2025. 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.

Of note, Medicare beneficiaries utilize telehealth for a larger share of their behavioral health services—43% of beneficiaries for behavioral health services versus 13% of beneficiaries for office visits (E/M visits).<sup>1</sup> The current policy slated to take effect next year applies this in-person requirement to all patients with mental health conditions regardless of whether such a visit is needed or wanted.

The six month in-person requirement is counter to the intent of ensuring more Americans receive 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.<sup>2</sup> 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. 3651/H.R. 3432), led by Sen. Bill Cassidy (R-LA) and Rep. Doris Matsui (D-CA-07), 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.

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<sup>1</sup> 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>

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

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