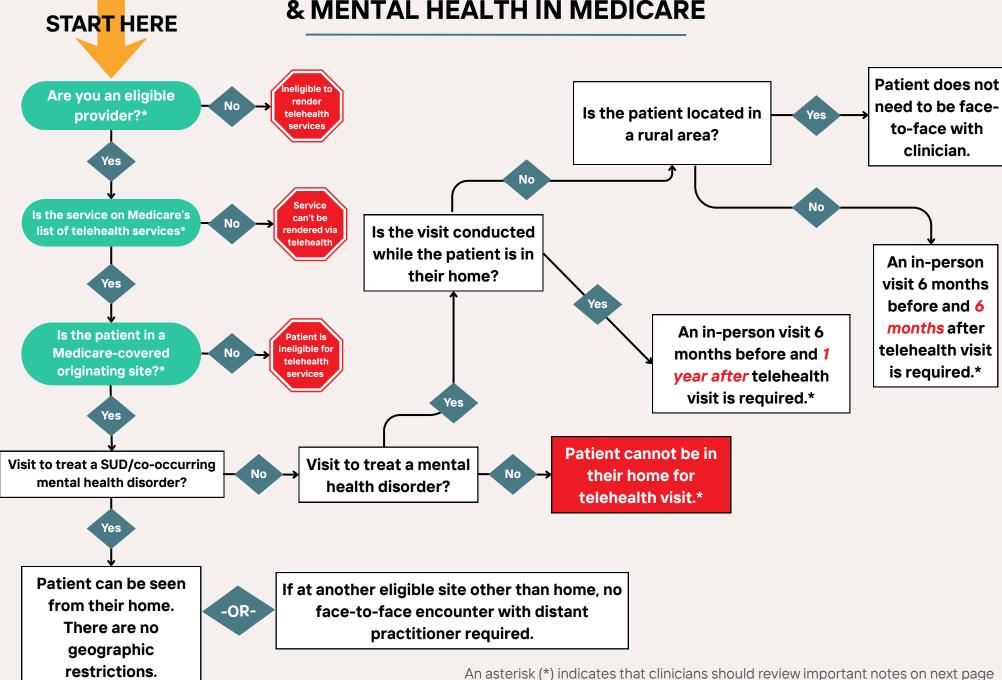
TELEHEALTH FOR SUBSTANCE USE DISORDERS (SUD) & MENTAL HEALTH IN MEDICARE



An asterisk (*) indicates that clinicians should review important notes on next page

Content updated as of 10/14/25

IMPORTANT NOTES ABOUT TELEHEALTH SERVICES FOR SUD AND MENTAL HEALTH



Behavioral health clinicians eligible to render Medicare Part B telehealth services:

- Physicians
- Physician assistants
- Nurse practitioners
- Clinical nurse specialists
- Clinical psychologists
- Clinical social workers
- Marriage/family therapist
- Mental health counselors



Eligible originating sites:

- Physician/practitioner's office
- Critical access hospitals
- Rural Health Clinics
- Federally Qualified Health Centers
- Hospital
- Rural emergency hospitals
- · Skilled nursing facilities
- Community health centers
- Patient's home, but only for SUD/mental health



Is the service on Medicare's list of covered telehealth services?

You can check the list <u>here</u>.



Is the patient located in a rural area?

You can check <u>here</u>.



Notes about in-person visit requirements related to telehealth visits for mental health:

The in-person visit does not need to be rendered by the same clinician performing the telehealth visit. It may be performed by a clinician in the same specialty or subspecialty as the clinician performing the telehealth visit.

In-person requirement 1 year after telehealth visit can be waived if clinician and patient agree that the risks of an in-person visit outweigh the benefits.



Can I use audio-only to render a telehealth service?

Yes. Audio-only flexibilities are permanent for telehealth services addressing SUD/mental health. Clinicians serving in OTPs should continue to follow Medicare guidance for billing OTP telecommunications services - found here.