COVID-19 Post Public Health Emergency (PHE) Flexibilities

The current PHE is set to expire on January 11, 2023. This is expected to be the last renewal of the PHE. With the expiration, several policies that were created during the PHE will also end:

**Telehealth:** 151 days after the end of the declared PHE flexibilities such as coverage of audio-only services, behavioral and mental health in-person requirements, Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) furnishing telehealth, originating site and geographic restrictions, and qualifying providers eligible to furnish telehealth will expire. Additionally, HIPAA penalties that were waived for technology used to furnish telehealth will expire at the end of the PHE. Refer to the Telehealth Policy Changes After the COVID-19 Public Health Emergency for more information.

**COVID-19 Testing:** Medicare beneficiary, group, and individual group plans cost-sharing of COVID-19 testing, testing-related services, and certain treatments will expire at the end of the PHE. Please refer to your health plan for additional information.

**FQHCs and RHCs:** Staffing requirements and temporary expansion waivers will expire at the end of the PHE.

For further information on COVID-19 PHE flexibilities, read

- This CMS Roadmap for when waivers and flexibilities will end
- What Happens When COVID-19 Emergency Declarations End? Implications for Coverage, Cost, and Access