

Medicare behavioral health telehealth flexibilities and DRG enhancements after the PHE ends

The Centers for Medicare & Medicaid Services and the federal Coronavirus Aid, Relief and Economic Security, or CARES, Act allowed for some flexibilities and enhancements during the COVID-19 public health emergency to make it easier for providers to care for Medicare patients. Here's what will happen to these changes when the PHE ends on May 11, 2023.

Behavioral health telehealth

CMS waived certain requirements and allowed flexibilities for providing telehealth services for behavioral health care. Some of the flexibilities will become permanent or extend through Dec. 31, 2024. Please review the [article](#) in the May 2023 issue of *The Record* for more information on those flexibilities.

Diagnosis-related group enhancement

The temporary DRG enhancement implemented by the CARES Act represented a 20% increase in the weighting factor for inpatient DRG payments for Medicare patients diagnosed with COVID-19. When the public health emergency ends on May 11, 2023, the DRG enhancement will also end. For more information, read the [article](#) in the May 2023 issue of *The Record*.

For more information on changes occurring with the end of the public health emergency, see our [Temporary changes due to the COVID-19 pandemic](#) document.