CMS CY2027 PHYSICIAN FEE SCHEDULE

Health & Wellness Coaching

FREQUENTLY ASKED QUESTIONS

On July 14, 2026, the Centers for Medicare & Medicaid Services (CMS) issued the CY 2027 Medicare Physician Fee Schedule (PFS) Proposed Rule, which includes proposed national payment and conditions of payment for health and well-being coaching services. On November 4, 2026, CMS finalized the CY27 PFS, **establishing national Medicare payment for Health and Wellness Coaching services.**

These updates in national Medicare policy represent significant steps forward and reflect years of work led by NBHWC in collaboration with our profession: building standards, strengthening evidence, demonstrating health and wellness coaching in practice, and advocating for sustainable pathways that can expand access.

Details of the CY2027 Final Rule:

The final PFS CY 2027 includes several important provisions where CMS has:

- Finalized national valuation/pricing for the existing Category III CPT codes 0591T, 0592T, and 0593T;
- Finalized that health and well-being coaching* services require general supervision by an eligible Medicare billing practitioner, rather than the direct supervision originally proposed;
- Improved the valuation of the individual coaching services, 0591T and 0592T;
- Explicitly included the National Standards of the National Board for Health & Wellness Coaching (NBHWC) among the pathways that may satisfy CMS' appropriate training and certification requirements; and
- Finalized no specific frequency limitations, provided services are reasonable and necessary.

CMS is scheduled to officially publish the CY 2027 Medicare Physician Fee Schedule final rule on Monday, November 9. While CMS has announced its finalized policy decisions, publication of the complete rule will provide additional detail about the provisions, requirements, and implementation considerations.

NBHWC is carefully reviewing the forthcoming publication and will share additional updates and guidance with our community early next week to help clarify what the finalized policy means for NBC-HWCs, healthcare organizations, and the broader profession.

**NBHWC uses the term "health and well-being coaching" here to align with the terminology used in the CMS Final Rule. NBHWC uses this term interchangeably with "health and wellness coaching."*

Updated November 5, 2026

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What did CMS finalize for health and wellness coaching?

CMS finalized national Medicare payment and conditions of payment for the three existing Category III CPT codes for health and well-being coaching* (0591T, 0592T, and 0593T). The final rule establishes national valuation for these services, improves the valuation of individual coaching services, and allows services to be furnished under general supervision of an eligible Medicare billing practitioner. These decisions represent an important step toward integrating appropriately credentialed health and wellness coaches into healthcare delivery.

When will the new Medicare payment policies take effect?

The policies are part of the CY 2027 Medicare Physician Fee Schedule Final Rule and are scheduled to take effect January 1, 2027. Healthcare organizations and billing practitioners can begin preparing for implementation, including reviewing their billing, documentation, supervision, and staffing processes.

What changed between the proposed rule and the final rule?

CMS made several important changes in response to stakeholder feedback and comments:

- Finalized national valuation and payment for all three existing HWC Category III CPT codes
- Finalized general supervision as the supervision requirement, rather than the direct supervision originally proposed
- Improved the valuation of individual coaching services (0591T and 0592T)

These changes provide greater clarity around payment and supervision and create a more workable pathway for integrating health and wellness coaches into healthcare settings.

What HWC services are included in the CMS rule?

CMS is finalizing Medicare payment for the three existing Category III HWC codes:

a. 0591T: initial individual HWC assessment/intervention, ⩾60 minutes
b. 0592T: individual follow-up HWC, ⩾30 minutes
c. 0593T: group HWC, ⩾30 minutes.

What conditions or populations would be eligible?

Those eligible will include Medicare beneficiaries receiving medically appropriate HWC services. Final operational requirements, including diagnoses and medical-necessity documentation are still being understood as we review the final rule.

What does national payment mean for health and wellness coaching?

CMS has now finalized national valuation for these services under the Medicare Physician Fee Schedule. This creates a more consistent payment framework, and a pathway to formally integrate appropriately credentialed coaches into Medicare delivery under practitioner oversight. That is a major step toward healthcare integration, but it would not automatically make every NBC-HWC an independent Medicare billing practitioner.

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What does general supervision mean for NBC-HWCs?

General supervision means the supervising practitioner does not need to be physically present in the office suite or immediately available during the service. Instead, the supervising practitioner provides overall direction and control of the service in accordance with Medicare requirements.

This is an important change from the proposed rule, which would have required direct supervision. General supervision may provide healthcare organizations with greater flexibility in how they incorporate health and wellness coaches into their care delivery models.

Can independent or private-practice NBC-HWCs participate in this Medicare payment pathway?

Potentially. Independent practitioners may be able to participate through arrangements with eligible healthcare practices, health systems, or other organizations that meet Medicare's requirements for furnishing and billing auxiliary services.

The arrangement must satisfy applicable requirements for supervision, billing, documentation, and the entity furnishing the service. Independent practitioners cannot bill Medicare directly for these services solely based on their NBC-HWC credential.

Is the NBC-HWC credential sufficient to meet CMS qualification requirements?

The final rule establishes qualification requirements for individuals furnishing health and well-being coaching services, including education, training, and appropriate national credentialing standards. The NBHWC national certification pathway aligns with the standards CMS recognizes for these services. The credential establishes an important qualification for furnishing HWC services under this Medicare pathway. However, it does not independently establish Medicare billing privileges or guarantee reimbursement.

Does the final rule mean NBC-HWCs can now bill Medicare independently?

No. The final rule does not establish NBC-HWCs as independent Medicare billing practitioners. Health and well-being* coaching services are furnished as auxiliary services under the supervision of an eligible Medicare billing practitioner. An independent coach may potentially work through arrangements with healthcare practices, health systems, or community-based organizations, but the final arrangement would still need to satisfy Medicare supervision, billing, and auxiliary-personnel requirements.

How will this impact coaches employed by healthcare organizations?

This is likely the most straightforward implementation model because the coach can be incorporated into an existing clinical team, billing structure, care plan, documentation system, and practitioner supervision arrangement.

How will this impact independent contractors?

Employment classification alone does not determine eligibility. Both employees and independent contractors may potentially furnish these services, provided the arrangement meets applicable Medicare requirements for auxiliary personnel, supervision, billing, and documentation. Healthcare organizations and billing practitioners will need to evaluate their individual arrangements to ensure compliance.

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Does Medicare reimbursement expand the HWC Scope of Practice?

No. Payment does not change professional scope. Coaches still must work within HWC scope, recognize clinical red flags, and refer concerns outside that scope to appropriate healthcare professionals.

Will a physician/provider referral or order be required?

The Medicare national payment pathway places HWC within a practitioner-supervised Medicare framework. The precise referral/order mechanics are still being clarified as we distill the final CMS implementation guidance. Health and well-being coaching* services require general supervision by an eligible Medicare billing practitioner, rather than the direct supervision originally proposed.

Does the final rule guarantee that every Medicare beneficiary can receive covered health and wellness coaching?

No. The final rule establishes national payment for defined HWC services, but Medicare coverage and payment remain subject to applicable requirements, including medical necessity, beneficiary eligibility, billing practitioner requirements, and documentation.

Does this automatically apply to Medicare Advantage or Medicaid?

No. This reimbursement pathway concerns Original Medicare physician-fee-schedule policy. Medicare Advantage and state Medicaid programs operate under different payment structures. National Medicare recognition could become an important precedent for Medicare Advantage, Medicaid, employers, and commercial payers, but it does not automatically compel them to adopt identical payment or benefit policies.

Could an NBC-HWC living outside the U.S. coach a U.S. Medicare beneficiary and receive Medicare payment?

No, not under the ordinary Medicare pathway. Medicare generally does not pay for routine services furnished by a practitioner located outside the United States. The limited statutory exceptions for care outside the U.S. do not apply to routine HWC telehealth.

I have a National Provider Identifier (NPI). Does this mean I can bill Medicare for health and well-being coaching?

Having an NPI does not automatically provide Medicare billing privileges or authorize an individual to bill Medicare independently. An NPI is an identification number used in healthcare transactions; it is not a credential, license, or Medicare enrollment approval. Under the finalized payment pathway, NBC-HWCs furnish health and well-being* coaching services as auxiliary personnel under the general supervision of an eligible Medicare billing practitioner. The supervising billing practitioner or eligible billing entity submits the claim in accordance with Medicare requirements.

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Do I need my own NPI to provide health and wellness coaching services under the new Medicare pathway?

An NPI alone does not establish eligibility to furnish or bill Medicare services. NBC-HWCs should work with the supervising healthcare organization or billing practitioner to determine what identification and enrollment information is required for their particular arrangement. Having an individual NPI does not replace the supervision and billing requirements established by CMS.

How does a HWC fit into the care plan?

Ideally, the coach helps translate healthcare goals into patient-selected, sustainable behavior change while communicating relevant progress, barriers, or referral needs back to the care team.

Can a healthcare organization hire an NBC-HWC specifically to provide health and wellness coaching services through Medicare?

Healthcare organizations may employ NBC-HWCs to furnish health and wellness coaching services under the supervision of an eligible Medicare billing practitioner. The organization and supervising practitioner must meet applicable Medicare requirements for auxiliary personnel, supervision, billing, and documentation.

Can NBC-HWCs provide group coaching under the new Medicare payment pathway?

Yes. CMS finalized payment for CPT code 0593T, which describes health and well-being* coaching provided to groups of two or more individuals for at least 30 minutes. The code is billed separately for each eligible beneficiary participating in the group session, subject to applicable Medicare requirements.

Can health and wellness coaching services be delivered through telehealth for Medicare eligible clients/patients?

Health and wellness coaching services have been included on the Medicare Telehealth Services List for some time. HWC and billing practitioners should confirm the applicable telehealth requirements, including eligible technology, location, and service delivery requirements, when furnishing services remotely. The final rule does not create a separate telehealth benefit for health and wellness coaching.

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What is the purpose of this advocacy initiative?

NBHWC's advocacy work is designed to engage the health and wellness coaching community in shaping the future of HWC.

Our specific aims include:

- Advocating for clear guidance with favorable coding, reimbursement levels, and coverage for HWC services.
- Promoting meaningful access for all Americans to evidence-based HWC services for individuals with chronic, lifestyle-related, or social risk-driven health concerns.
- Supporting the recognition and integration of National Board Certified Health & Wellness Coaches (NBC-HWCs) into public health and clinical systems.

How does NBHWC approach advocacy?

NBHWC does not endorse political candidates or engage in partisan activities. We pursue the goals of advancing the profession and improving the health of the patients we serve by serving as a resource to policymakers, sharing evidence-based recommendations and literature, describing the role and importance of credentialing, and recommending policies that will promote the interests of all individuals who are at risk for chronic disease.

Our engagement is issue-based and advocacy-focused, aligned with NBHWC's commitment to:

- **Advance** - Advance the health and wellness coaching profession by establishing and maintaining standards of equitable, evidence-informed education, training, certification, and maintenance of certification that result in quality professional practice.
- **Facilitate** - Facilitate the integration of health and wellness coaches into the healthcare team to foster a whole-person approach to care.
- **Support** - Support research initiatives to elevate the field of health and wellness coaching.
- **Promote** - Promote access for individuals across diverse communities to work with (NBC-HWC) as well as for professionals to complete quality coach training, certification and continuing education

How does this benefit the public and our community?

When there is clarity with respect to favorable coding, reimbursement, and coverage of HWC services, then patients benefit from greater access to services that improve clinical outcomes, and the health system benefits from greater efficiency in mitigating and preventing chronic disease:

- More people can access evidence-based behavior change support through HWC
- Healthcare teams gain valuable allies to support whole-person health goals
- The public gains access to services that are shown to improve chronic disease management, mental well-being, and health equity outcomes
  - NBHWC Compendium: https://www.liebertpub.com/doi/10.1089/jicm.2024.0672

How are these efforts aligned with NBHWC's mission?

We advocate within the framework of the NBHWC Code of Ethics and Scope of Practice, ensuring that coaches remain within their behavior-change role, that client autonomy and safety are prioritized, and that our efforts uphold high-quality, credentialed standards of practice. For additional information, please see the following links on the NBHWC website:

- Code of Ethics
- Scope of Practice

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