Final Member Information for Webpage?



Long-Term Home Health (LTHH) Prior Authorization Request (PAR) Restart: Information For Members

Medical necessity reviews for some benefits were paused in 2020 because of the COVID-19 Pandemic and other programmatic issues, but are required to start again. Starting in July and August 2025, the Department of Health Care Policy and Financing (HCPF) will begin doing these medical necessity reviews again for the following services:

For Children:

| Long-Term Home Health Services | |
|---|--|
| Registered Nurse (RN) | |
| Licensed Practical Nurse (LPN) | Medical Necessity Reviews start August 1, 2025 |
| Certified Nursing Aid (CNA) | |
| Physical Therapy (PT) | |
| Occupational Therapy (OT) | Medical Necessity Reviews start July 1, 2025 |
| Speech Therapy/ Speech Language Pathology (ST/SLP) | |

For Adults:

| Long-Term Home Health Services | |
|--------------------------------|---|
| Registered Nurse (RN) | |
| Licensed Practical Nurse (LPN) | Medical Necessity Reviews start August 1, |
| Certified Nursing Aid (CNA) | 2025 |

What This Means:

When your home health agency asks for services, a medical expert from a company called **Acentra** will review your medical history and records to decide if the services are medically necessary. This review helps make sure that the care you receive is the care you truly need, and at the level you require.



While reviews were paused, home health agencies made those decisions without this step. This may have meant that some people got more care—or a higher level of care—than what was medically necessary.

We know changes like this can be stressful. To help, you'll get a full assessment with a nurse from a company called **Telligen**. This will happen between **August 1, 2025 and May 4, 2026**, and then once a year after that, or more frequently if there is a change in your medical needs. You can ask your current home health agency when your assessment will happen.

During the assessment:

- The nurse will talk to you about your health and daily care needs.
- The nurse will help figure out what services best fit your needs.
- The nurse will also explain your options so you can choose the right services for you.

What If Services Change?

You have the right to appeal the decision made about your skilled care services. If your services are denied or changed, you will get a notice from **Acentra** that explains how to file an appeal.

Need Help?

If you have questions, your home health provider can help.