This communication should be viewed by:
Facility/Practice Staff
Health Home Agencies

Changes to Authorization Requirements for Medicare Home Health Services

MVP Health Care® (MVP) is dedicated to working with our Provider Partners to enhance access to care for our Members, while also reducing administrative burden.

Starting April 1, 2026, prior authorization will no longer be necessary for these Medicare Home Health services:

- Registered Nurse (RN) services
- Licensed Practical Nurse (LPN) services
- Home Health Aide services
- Speech therapy
- Physical therapy
- Occupational therapy

Additional Information

- Participating Providers are not required to submit prior authorization requests for these services when provided to MVP Medicare Members
- All services must still satisfy Medicare coverage criteria, medical necessity standards, and applicable documentation requirements
    - Services remain subject to retrospective review, medical necessity validation, and claims assessment according to Medicare guidelines
- Providers should continue to ensure services are properly ordered and documented per relevant Medicare regulations and standards of care

For questions about this update, please contact your MVP Provider Relations representative.