

Changes to prior authorization requirements for post-acute care and home health care services for Medicare Advantage members

For dates of service on or after Jan. 5, 2026, post-acute care and home health care services will require prior authorization through independent companies. This will affect:

- Requests for stays at skilled nursing facilities, inpatient rehabilitation facilities and long-term acute care hospitals
- Requests for home health care services

Watch for provider alerts and articles in *The Record* and *BCN Provider News* with additional information, including:

- The effective date for these changes
- Details about the independent companies involved in these changes
- Specific information about prior authorization requirements
- Training opportunities
- Updates to provider communications

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