



INFORMATIONAL MEMO

Title: Adult Long-Term Home Health (LTHH) Prior Authorization Request (PAR) Revisions	Topic: Benefits
Audience: Home Health Agencies, Case Management Agencies, Utilization Review Contractor	Sub-Topic: Prior Authorization
Supersedes Number: N/A	Division: Benefits and Services Management Division
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Key Words: Long-Term Home Health (LTHH), Prior Authorization Request (PAR), Home Health Agency (HHA), Case Management Agencies (CMAs)	
Legal Authority: 10 CCR 2505-10 8.520.8	
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Approved By: Rhyann Lubitz	

HCPF Memo Series can be accessed online: <https://www.colorado.gov/hcpf/memo-series>

Purpose and Audience:

The purpose of this Informational Memo is to provide additional education on the responsibilities of both Case Management Agencies (CMAs) and Home Health Agencies (HHAs) when initiating the process to revise an adult Long-Term Home Health (LTHH) Prior Authorization Request (PAR).

Background:

A new process for submitting adult LTHH PARs was implemented on October 14, 2024. Per Operational Memo HCPF OM 24-049, HHAs are required to submit all adult LTHH PARs directly to Acentra Health, Colorado's Utilization Review Contractor (URC), for processing and transmittal through the Atrezzo Provider Portal. Streamlining this

process has improved efficiency by eliminating the need for manual data entry by the Department of Health Care Policy and Financing (HCPF).

Information:

Stakeholders have requested clarification regarding the process for initiating PAR revisions, end-dating an open PAR, and submitting change of provider requests.

For adult LTHH PARs starting with the number 6 (six), CMAs can reach out to the Home Health Inbox at homehealth@state.co.us for assistance. When contacting the Home Health Inbox please provide the following information in a secure message: Member name, Member ID, PAR number, and inquiry.

For adult LTHH PARs starting with the number 9 (nine), all revisions must be completed by the HHA and submitted through the Atrezzo Provider Portal.

CMAs cannot contact Acentra Health directly for PAR revisions, as the vendor cannot verify the credentials or assignment status of individual case managers working on behalf of the Member. If the HHA does not submit the revision as requested by the CMA within 10 business days, the CMA shall escalate the request via the [Home Health Inbox](#).

HHA's must have documentation of Care Coordination with the Member's other providers; this applies to all disciplines involved in the Member's care, including case management and home care providers ([10 CCR 2505-10-8.520](#)). It is the responsibility of the HHA to ensure that revisions are submitted in a timely manner in order to prevent any disruption in the Member's access to care or services.

The [ColoradoPAR](#) webpage provides updated announcements, a training calendar, and a list of available contacts who can answer outstanding questions. HHAs can find training for submitting and revising PARs on the [ColoradoPAR Training](#) webpage.

Attachment(s):

None

HCPF Contact:

Questions or assistance registering for the Provider Portal may be directed to: atrezzoproviderissue@acentra.com

LTHH benefit questions and escalations may be directed to:

homehealth@state.co.us