Medicare Minute Script – August 2018
Medicare Coverage of Home Health Care

Today we will learn about Medicare’s coverage of home health care.

**Point 1: Understand what home health care is and which home health care services Medicare covers.**

Home health care includes a wide range of health and social services delivered in your home by a home health agency to treat an illness or injury. Services covered by Medicare’s home health benefit include:

- **Skilled nursing services:** Services performed under the supervision of a licensed or certified nurse.
- **Skilled therapy services:** Physical, speech, and occupational therapy that is reasonable and necessary to treat your illness or injury, and is performed by/under the supervision of a licensed therapist.
- **Home health aide:** A home health aide provides personal care services, including help with bathing, toileting, and dressing. Medicare will not pay for an aide if you only need personal care and do not need skilled care in the first place.
- **Medical social services:** Services ordered by your doctor to help you with social and emotional concerns you have related to your illness.
- **Medical supplies:** Certain medical supplies, such as wound dressings and catheters, when provided by a Medicare-certified home health agency (HHA).
- **Durable Medical Equipment (DME):** Medicare pays 80% of its approved amount for certain pieces of medical equipment, such as a wheelchair or walker.

**Point 2: Know when Medicare will cover home health care.**

Home health care can be covered by either Medicare Part A or Part B. Medicare covers your home health care if you meet certain criteria. First, you must be homebound. You must also need skilled nursing services and/or skilled therapy. You must have a face-to-face meeting with a doctor within the 90 days before you start home health care, or the 30 days after the first day you receive care. This can be an office visit, hospital visit, or in certain circumstances, a telemedicine visit. Your doctor must sign a home health certification confirming that you are homebound, that you need skilled care, that your doctor has approved a plan of care for you, and that the face-to-face requirement was met. Your doctor should review and certify your home health plan every 60 days. A face-to-face meeting is not required for recertification. Finally, for Medicare to cover your home health care, you must receive it from a Medicare-certified home health agency (HHA).

**Point 3: Understand what it means to be homebound.**

To be eligible for Medicare coverage of home health services, you must be homebound. Medicare considers you homebound if you need the help of another person or medical equipment such as crutches, a walker, or a wheelchair to leave your home, or your doctor believes that your health or illness could get worse if you leave your home. Also, it must be difficult for you to leave your home, and doing so requires a lot of effort. Your doctor should decide if you are homebound based on their evaluation of your condition. Even if you are homebound, you can still leave your home for medical treatment, religious services, and/or to attend a licensed or accredited adult day care center without putting your homebound status at risk. Leaving home for short periods of time or special non-medical events, such as a family reunion, funeral, or graduation, should also not affect your homebound status. You may also take occasional trips to the barber or beauty parlor.
Take Action:
1. If you need home health care, speak with your doctor or a hospital discharge planner about your needs.
2. Call your State Health Insurance Assistance Program (SHIP) to learn about what care is available. You can find your SHIP by calling 877-839-2675 or visiting www.shiptacenter.org.
3. Call 1-800-MEDICARE for a list of Medicare-approved home health agencies (HHAs) in your area. Medicare also has a Home Health Compare tool, which includes quality of care information and star ratings about the HHAs in your area. To use this tool, visit www.medicare.gov/homehealthcompare.
4. Contact your Senior Medicare Patrol (SMP) if you suspect Medicare fraud, errors, or abuse.

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<th>Local SHIP Contact Information</th>
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<td>SHIP toll-free:</td>
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<td>To find a SHIP in another state:</td>
<td>Call 877-808-2468 or visit <a href="http://www.smpresource.org">www.smpresource.org</a>.</td>
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<td>Call 877-839-2675 or visit <a href="http://www.shiptacenter.org">www.shiptacenter.org</a>.</td>
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The production of this document was supported by Grant Numbers 90SATC0001 and 90MPRC0001 from the Administration for Community Living (ACL). Its contents are solely the responsibility of the SHIP National Technical Assistance Center (SHIP TA Center) and Senior Medicare Patrol National Resource Center and do not necessarily represent the official views of ACL.