

# Home Health Participation Guidelines for Care Management



## Who is eligible?

**Must be under the care of a doctor** that can certify assistance is needed for any of the following areas: intermittent skilled nursing care, physical therapy, speech-language pathology services, and/or occupational therapy.

- › Intermittent care is defined as fewer than 7 days per week with only the hours necessary to perform skilled care needs.

**Skilled need must be appropriate for the home setting.** Many insurances require a patient to be homebound.

The patient must:

- › "Because of illness or injury, need the aid of supportive devices such as crutches, canes, wheelchairs, and walkers; the use of special transportation; or the assistance of another person to leave their place of residence..."
- › OR have a condition such that leaving his or her home is medically contraindicated.
- › Criteria One: If the patient meets one of the Criteria-One conditions, then the patient must ALSO meet two additional requirements defined in Criteria Two below.
- › Criteria Two: There must exist a normal inability to leave home; AND "Leaving home must require a considerable and taxing effort."

## Benefits covered

- › **Nursing Services:** Direct skilled care while teaching the patient and caregiver about the patient's care.
  - Examples: intravenous medication administration, injections, tube feedings, dressing changes, and education for new and chronic diagnosis management.
- › **Rehab Services:** Services are considered reasonable and necessary in the home setting.
- › **Home health aide services:** Depends on the insurance coverage but generally is a covered benefit to maintain the patient's health or to treat an illness or injury but are not covered without the skilled care of RN, PT, OT, and/or SLP.
  - Aide visits are infrequent and intermittent. This service does not replace custodial care that is being provided by patient and their caregivers.
- › **Medical Supplies:** Items that are medically necessary for treatment of the patient's illness/injury are covered by the home health agency.

## Benefits not covered

- › 24 hour-a-day care at home
- › Prescription and over-the-counter medications
- › Meal delivery
- › Homemaker services including shopping, cleaning, and laundry.
- › Custodial or personal care like bathing, dressing, and using the bathroom when this is the only care that is needed.
- › Personal care items, like incontinent supplies, grooming products, toiletries
- › Medical equipment must be ordered by the physician and the prescription sent to a HME provider.
- › Venipuncture for the purpose of blood collection without a skilled intervention.
- › Tracheostomy and ventilator care beyond initial education.

## What to expect on Home Health?

- › Involvement in personalizing and developing the plan of care.
- › Team collaboration and coordination of care with the primary care provider.
- › Access to 24/7 support for related medical needs.