

Medicare Minute Script — March 2021 Medicare's Coverage of Care at Home

Today we will discuss the ways that Medicare can cover services that you might receive at home.

Point 1: Know what is covered by home health care.

Home health care includes a wide range of health and social services delivered in your home to treat illness or injury. If you qualify for the home health benefit, Medicare covers skilled nursing services, such as injections and catheter changes, home health aides, such as to help with bathing and dressing, and medical social services, such as counseling. It also covers skilled therapy services, such as physical, speech, and occupational therapy. Finally, Medicare's home health benefit covers certain medical supplies, such as wound dressings and catheters, and certain durable medical equipment, such as a wheelchair or walker.

Your home health care will be covered by Medicare if you meet the following requirements: First, you must be considered homebound. Usually this means that it is extremely difficult for you to leave your home and you need help doing so. During the coronavirus public health emergency, the definition of homebound has been broadened. Second, you must need skilled nursing or therapy services. Third, you must have a face-to-face meeting with a doctor within the 90 days before or the 30 days after you begin receiving care at home. This meeting can be facilitated by technology such as video conferencing. Fourth, your doctor must sign for and approve your plan of care. Last, you receive care from a Medicare-certified home health agency.

Home health care is limited to no more than eight hours per day and usually 28 hours per week. In certain cases, you could receive up to 35 hours per week if needed. You can continue to receive home health care for as long as you qualify, but it must be approved by your doctor every 60 days. Contact your State Health Insurance Assistance Program, or SHIP, for individualized counseling and assistance about your home health coverage.

Point 2: Understand how you can use telehealth to receive care at home.

A telehealth service is a full visit with a provider using technology that allows for both audio and video communication. Depending on the situation, you might access telehealth from your home or at a medical facility. Original Medicare usually only covers telehealth in limited situations, like if you require telehealth services due to an acute stroke or behavioral health conditions, or if you live in a rural area. During the coronavirus public health emergency, however, Medicare has expanded telehealth services. Standard cost-sharing requirements still apply. If you have a Medicare Advantage Plan, you should contact your plan to learn about its costs and coverage rules.

Point 3: Know other strategies to receive more of your care at home.

Medicare covers services you receive from a medical provider who visits your home, such as a general physician or geriatrician who makes home visits. It also covers check-in phone calls and assessments using an online patient portal. Virtual check-ins can be used to assess whether you should go to your provider's office for an in-person visit. Ask your provider if they offer these covered services. Additionally, many Part D plans and Medicare Advantage Plans may offer a mail order option to deliver your medications to your home. Contact pharmacy to find out if it offers a home delivery service for prescription drugs.

Point 4: Recognize home health care fraud and know how to prevent it.

Home health care fraud can take many forms. You might be enrolled in home health services by a doctor you do not know, offered things like “free” groceries from a home health agency in exchange for your Medicare number, or switched to a different home health agency. You might also notice that Medicare was billed for home health services that were not provided or that were not deemed medically necessary by your doctor. You can avoid experiencing home health care fraud with the following tips. First, carefully read your Medicare Summary Notice (MSN) and/or Explanation of Benefits (EOB) to ensure they accurately reflect the services you received. Second, work with your doctor to enroll in home health services and determine your plan of care; do not enroll in home health services with a doctor you do not know. And finally, do not accept gifts in return for home health services. If you suspect Medicare fraud or errors, contact your Senior Medicare Patrol, or SMP, and report your concerns.

Take Action:

1. **Call 1-800-MEDICARE** or your **Medicare Advantage Plan** to find a home health agency or learn more about costs and coverage for home health care and telehealth services.
2. **Contact your prescription drug plan** to ask about possible mail order services for your medications.
3. **Contact your State Health Insurance Assistance Program (SHIP)** for individualized counseling and assistance about your home health care options or coverage.
4. **Contact your Senior Medicare Patrol (SMP)** if you have concerns about potential home health care fraud, errors, or abuse.

Local SHIP Contact Information	Local SMP Contact Information
SHIP toll-free: SHIP email: SHIP website: To find a SHIP in another state: Call 877-839-2675 or visit www.shiptacenter.org .	SMP toll-free: SMP email: SMP website: To find an SMP in another state: Call 877-808-2468 or visit www.smpresource.org .
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