



## Understanding Homebound Status

In order for a patient to be eligible to receive Medicare covered home health services under both Part A or Part B, the law requires that your physician certify in all cases that the patient is homebound. An individual **does not have to be bedridden** to be considered homebound. However, the condition of the patient should be such that it is a **taxing effort** to leave home, and consequently, leaving home would require considerable effort or assistance.

The physician sees the patient to confirm that the patient requires home health services and is considered homebound. Take Care Home Health provides an easy to complete Physician Referral Form that meets Medicare guidelines. If the patient has a skilled need and qualifies for services, then orders written by the physician are processed by the home health agency.

Once admitted for services, if the patient does in fact need to leave the home, the patient may still be considered homebound if the absences from the home are infrequent or for periods of relatively short duration.

Patients may leave the home for a religious service of short duration. It is expected that in most situations, absence from the home that occur will be for the purpose of receiving health care treatment. **However**, occasional absences from the home for nonmedical purposes such as an occasional trip to the barber, a walk around the block or a drive, attending a family reunion, funeral, graduation, or other infrequent or unique event would still qualify them as homebound.

Any absence of an individual from their home for the need to receive health care treatment, including regular absences for the purpose of participating in therapeutic, psychosocial, or medical treatment in an adult day-care program that is licensed or certified by a State, or accredited to furnish adult day-care services in a State, allows the patient to still be considered homebound and confined to the home.

Generally speaking, a patient will be considered to be homebound if they have a condition due to an illness or injury that restricts their ability to leave their place of residence except with the aid of: supportive devices such as crutches, canes, wheelchairs, and walkers; the use of special transportation; or the assistance of another person; or if leaving the home is medically contraindicated.

### Examples of homebound patients that may qualify for skilled home health services:

- A patient who has just returned from a hospital or rehab stay
- A patient who is blind or suffers from dementia
- A patient in the late stages of ALS or neurodegenerative disabilities
- A patient who's physician has determined they are homebound and have a skilled need
- A patient paralyzed from a stroke who is confined to a wheelchair or requires the aid of crutches in order to walk
- A patient with a psychiatric illness that is manifested in part by a refusal to leave home or is of such a nature that it would not be considered safe for the patient to leave home unattended, even if they have no physical limitations.
- A patient with a new medication who requires skilled teaching

An elderly person who does not often travel from home because of feebleness and insecurity brought on by advanced age would not be considered confined to the home for purposes of receiving home health services unless they meet one of the above conditions. **Remember, it must be a TAXING EFFORT to leave the home.**

Reference: Medicare Guidelines 30.1.1- Patient Confined to the Home

**It is important that medical professionals and staff members remember that many seniors DO QUALIFY for Home Health Services. Help our seniors get the care and services they need.**

**Take Care Home Health provides all skilled care disciplines including; Registered Nurse, Licensed Practical Nurse, Physical Therapy, Occupational Therapy, Speech Therapy, and Home Health Aides. All patients are seen within 24 hours. Please contact our intake department at 541-414-1010.**