MEDICARE HOME HEALTH BENEFITS GUIDE

Understanding Medicare and Home Health Services

EldaCare Home Health Services Inc.

Medicare may cover certain home health services when an individual meets Medicare's eligibility requirements and the services are medically necessary.

Medicare's current guidance states that covered home health services can include certain skilled nursing care, physical therapy, occupational therapy, speech-language pathology, medical social services, and certain home health aide services.

What Is Medicare?

Medicare is a federal health insurance program that provides coverage to eligible individuals. Medicare includes different parts that cover different types of healthcare services.

Original Medicare consists of:

- **Part A – Hospital Insurance**
- **Part B – Medical Insurance**

Both Part A and Part B can be involved in coverage for certain home health services.

When Can Medicare Cover Home Health Care?

Generally, Medicare-covered home health care requires that several conditions be met.

A patient generally must:

- Be under the care of a physician or other allowed healthcare provider
- Have a provider establish and regularly review a plan of care
- Be certified as homebound when required
- Need qualifying skilled services
- Receive care from a Medicare-certified home health agency

A face-to-face assessment is required before certification for Medicare home health services.

What Home Health Services May Be Covered?

Depending on eligibility and medical necessity, Medicare may cover:

Skilled Nursing Care

Examples can include certain wound care, injections, monitoring, education, and other skilled services.

Physical Therapy

Therapy designed to improve or maintain physical function and mobility when Medicare's requirements are met.

Occupational Therapy

Services that help patients safely perform daily activities and improve functional abilities.

Speech-Language Pathology

Services addressing qualifying communication or swallowing-related needs.

Medical Social Services

Certain social and emotional support services related to the patient's treatment.

Home Health Aide Services

Medicare may cover part-time or intermittent home health aide services when the patient is also receiving qualifying skilled services. Medicare generally does not cover home health aide services when personal care is the only type of care needed.

What Medicare Generally Does Not Cover

Medicare does not generally pay for:

- 24-hour-a-day care at home
- Meal delivery
- Homemaker services unrelated to the patient's care plan
- Custodial or personal care when that is the only care needed

What Does Medicare Cost?

For covered home health services, Medicare currently states that the patient pays **$0** for covered home health services. Certain durable medical equipment may have different cost-sharing requirements, including 20% of the Medicare-approved amount after the applicable Part B deductible.

Coverage and costs can vary depending on the patient's Medicare coverage, insurance, plan, and circumstances.

Medicare Advantage

If you receive Medicare through a **Medicare Advantage Plan**, contact your plan directly to confirm your home health benefits and requirements.

Before Starting Care

Ask your healthcare provider and home health agency:

- Is home health care medically appropriate for me?
- Am I eligible for Medicare-covered home health services?
- What services are included in my care plan?
- What costs should I expect?
- Is the agency Medicare-certified?
- What services may not be covered?

EldaCare Home Health Services

Our team is committed to helping patients and families understand their care options and navigate the home health process.

Phone: (267) 996-4393
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Important: Medicare rules, coverage policies, and costs can change. Always verify current coverage with Medicare, your Medicare Advantage plan, healthcare provider, or insurance plan before beginning services.