

Who are the patients that benefit from home health care?

Veterans Administration

Veterans



Patient Characteristics: U.S. Veterans enrolled in the VA program living with a complex, chronic, or disabling disease, and a short-term need for skilled services or assistance with activities of daily living.

Patients in the VA's Home Based Primary Care program receive care for the long-term treatment of complex, chronic and disabling disease. Because care is longitudinal, it includes preventative care as well as ongoing monitoring and routine assessment.

Care Covered:

In-Home and Community Based Care can include skilled home health care and home health aide services, community adult day care and Home Based Primary Care.

The Home Based Primary Care program includes physical, occupational and speech therapy; treatment planning and health status monitoring; chronic disease management and personal care.

Medicare

Elders 65 and Older
Patients with End-Stage Renal Disease (ESRD)
Patients with Disabilities



Patient Characteristics: In general, patients eligible for Medicare benefits must be 65 or older, disabled, or suffering from End-Stage Renal Disease.

To be eligible for the home health benefit, the patient must be under a doctor's care, with a plan of care that the doctor regularly reviews.

The patient must need one of the following:

- Intermittent skilled nursing care;
- Physical therapy;
- Speech-language pathology services; or
- Continued occupational therapy.

The patient must also be homebound, which means that they cannot leave their home without help (such as a wheelchair), leaving takes "considerable and taxing effort," or leaving home isn't recommended because of the patient's condition.

Care Covered: Skilled nursing care, physical therapy, occupational therapy, speech-language pathology, medical social services (when related to illness), functional support and personal care from a home health aide, and access to medical supplies, such as wound dressings, when ordered as part of care.

Medicaid

Low Income Patients:
• children
• pregnant women
• elderly people
• people with disabilities and certain parents



Patient Characteristics: Under existing laws and the Affordable Care Act, national minimum eligibility for Medicaid requires patients to be either "categorically needy" or "medically needy." Categorically needy adults below age 65 will qualify for benefits when their income is at or below 133 percent of the Federal Poverty Level (effective in 2014) and the patient is one of the following: 65 or older; blind or disabled; has or is expecting a child while the other parent is absent, incapacitated, or indigent.

Patients with income above this threshold can qualify for Medicaid if they are "medically needy." In this case, patients may receive Medicaid benefits when the patient's share of the cost of their medical bills effectively reduces their income level to the threshold required for Medicaid coverage.

Care Covered: Home health services, rehabilitation and therapy services, personal care services, and transportation to access medical care.

SOURCES: Department of Veterans Affairs, Federal Benefits for Veterans, Dependents and Survivors ("Benefits Book"), "Chapter 1: VA Health Care Benefits." (2011 edition). Available at: http://www.va.gov/opa/publications/benefits_book.asp.

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