

The background of the slide is a solid dark orange color, decorated with various silhouettes of autumn leaves in a lighter shade of orange. The leaves are scattered across the page, with some larger leaves and some smaller ones, creating a seasonal and warm atmosphere.

Tennessee for a Lifetime

Home-Based Community Medical Programs and
Resources

What is the Medicare Home Health Benefit?

- Medicare pays for you to get certain health care services in your home if you meet certain eligibility criteria and if the services are considered reasonable and necessary for the treatment of your illness or injury.

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*If you get your Medicare benefits through a Medicare Health Plan (not Original Medicare) check your plan's membership materials and contact the plan for details about how your plan provides your Medicare covered home health benefits.

- Home health care is a wide range of health care services that can be given in your home for an illness or injury. Home health care is usually less expensive, more convenient, and just as effective as care you get in a hospital or skilled nursing facility (SNF).
- The goal of home health care is to treat an illness or injury. Home health care helps you get better, regain your independence, and become as self-sufficient as possible. It is also a goal of home health to provide you with education so that you can better manage your disease or illness in your own home.

Who's eligible

1. You must be under the care of a doctor, and you must be getting services under a plan of care established and reviewed regularly by a doctor.
2. You must need, and a doctor must certify that you need, one or more of the following.
 - Intermittent skilled nursing care
 - Physical Therapy
 - Speech-language pathology services
 - Occupational Therapy

3. The home health agency caring for you must be approved by Medicare (Medicare certified)
4. You must be homebound, and a doctor must certify that you are homebound. To be homebound means:
 - Leaving your home isn't recommended because of your condition.
 - Your condition keeps you from leaving your home without help (such as using a wheelchair, walker, help from another person or needing special transportation).
 - Leaving home takes considerable and taxing effort.

What services are provided?

- Skilled nursing
- CNA's for bathing/ADL's
- Medical Supplies/Infusion
- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Medical Social Work

What isn't covered?

- 24-hour-a-day care at home
- Meals delivered to your home
- Homemaker services like shopping, cleaning and laundry.
- Personal care given by home health aides like bathing, dressing, and using the bathroom when this is the only care you need.
- Some DME

Where can I get these services?

- Private duty sitters
- Non-medical home care agencies.
- Options program
- Choices program
- Veterans services

Who pays for these services?

- Services are paid privately
- Long term care insurance policy
- Veterans administration
- Medicaid (Choices)

What is Choices

- CHOICES is TennCare's program for long-term care services and supports for elderly or physically disabled individuals that need help with things like bathing, getting around their home, preparing meals or doing household chores. This program is not designed to take the place of care you get from family and friends. It is intended to work together with the help you already receive.

Who qualifies for CHOICES?

- Must qualify physically
- Must qualify financially- Income no more than \$2130 per month AND total value of things you own can't be > \$2000. (Home doesn't count) You can't have given away or sold anything for less than what its worth in the last 5 years.