BHCS: SERVICES PROVIDED THROUGH HOME CARE

What can you do when you or your loved one can no longer manager safely at home?

- You have recently been in an auto accident and having difficulty regaining strength.
- Your father has been diagnosed with Diabetes and recently discharged from the hospital.
- Your mother is getting very confused and unable to manage her daily care.

BHCS: SERVICES PROVIDED THROUGH HOME CARE

HOME HEALTH

LIFE CARE

TELEHEALTH

ELDERLY AND DISABLED WAIVER

HOME HEALTH

ADPH Home Health Services provided under:

- Medicare reimbursement is a lump sum for every 60 day period.
- Alabama Medicaid Pays for up to 104 visits per year.
- Third Party Payor Blue Cross Blue Shield, CIGNA, Tricare, etc.

HOME HEALTH

Requirements:

- Patient must be Homebound.
- Patient must be under the care of a physician.
- Skilled care is needed by the patient under Medicare.

HOMEBOUND STATUS

The patient must meet the homebound criteria for admission:

- Existence of a condition due to illness or injury which will require a considerable taxing effort when leaving home.
- Absences from home are infrequent and of short duration, and/or to receive health care treatment.
- Occasional absences for non-medical purposes are acceptable such as attending church or going to the beauty salon or barber.

HOME HEALTH REQUIREMENTS

- The patient must be under the care of a physician.
- The patient must have visited their physician within 90 days prior to admission or 30 days after admission.
- The purpose of the appointment must be related to the reason for home health services.

HOME HEALTH REQUIREMENTS

- The physician must document the need for home health services and the reason that the patient is homebound.
- The physician must provide orders to the Home Health Agency specific type of services provided, the discipline providing the service, frequency and duration, and supplies.

HOME HEALTH REQUIREMENTS

- A skilled need is required for the patient to be seen under Medicare or most insurance policies. This may include:
 - Administering medications such as injections.
 - Wound care.
 - Education on a new diagnosis or disease progression.
 - Physical, Occupational, or Speech Therapy.

SCOPE OF SERVICES

- Intermittent Care: Home Health is a part time service. It can only provide care that is less than eight hours for any specific service.
- Services available include:
 - Skilled Nursing
 - Home Health Aide
 - Physical Therapy

SCOPE OF SERVICES

- Occupational Therapy
- Speech-Language Pathology
- Medical Social Services

SKILLED NURSING

- Wound Care
- Intravenous Therapy
- Diabetic Care
- Cardiovascular Care
- · Post Hospital Assessment and Teaching
- Urinary Catheter Management

HOME HEALTH AIDE SERVICES

- Bathing
- Dressing
- Skin Care
- Nail Care
- Range of Motion Exercises
- · Minimal Clean Up

PHYSICAL THERAPY

- Provides skilled intervention to improve the patient's level of functioning.
- Establish a safe and effective maintenance program.
- Therapy may address endurance, ambulation, fall prevention, transfers.

OCCUPATIONAL THERAPY

- The goal of Occupational Therapy is to help patients acquire the skills necessary to accomplish activities of daily living such as bathing, dressing, feeding, and medication management.
- Interventions generally focus on equipment needs, upper extremity function, and fine muscle coordination.

SPEECH LANGUAGE PATHOLOGY

Speech Therapy Services are provided to patients who have speech and language problems, delays in language development, or problems swallowing

Therapy activities may relate to talking on the phone, eating, or managing oral secretions.

MEDICAL SOCIAL SERVICES

Assist patients and families with social and emotional problems impeding the health or medical treatment of the patient through:

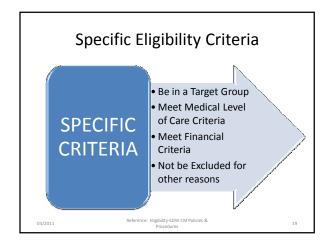
- · Community Resources
- Financial Assistance
- Counseling/Crisis Intervention
- Long Range Planning
- Advocacy

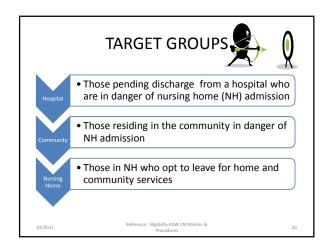
DIABETIC PATIENT

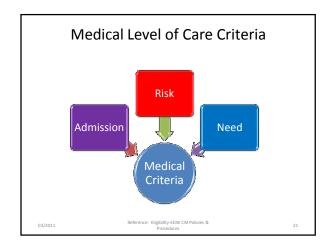
- Nurse to monitor blood sugars and provide diabetic teaching.
- Home Health Aide to provide personal care.
- Medical Social Services to assist with acquiring diabetic supplies.

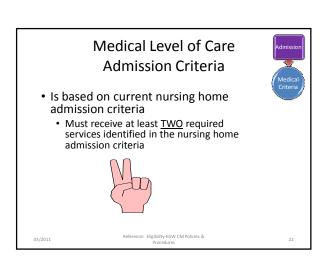
STROKE PATIENT

- Skilled nurse to assess post hospitalization and teach regarding new medications.
- Physical Therapy to regain strength and adjust to any limitations.
- Occupational Therapy to assist with relearning activities of daily living.
- Medical Social Services to address adequacy of home environment and assist with long range planning.









Medical Level of Care "Risk" Criteria • Must be at-risk for nursing home admission - Requires physician certification and other supporting documentation - Includes such considerations as deficiency in functional, health, cognitive/emotional, and informal Support - Considers dependency on primary caregivers



Financial Eligibility Criteria

Must be elderly or disabled and eligible for Medicaid through one of the following programs:

- SSI Recipients
- SSI-Related Groups
 - Continuous "Pickle" Medicaid
 - Widow/Widowers Under Age 60
 - Widow/Widowers Age 60-64
 - Certain Disabled Adult Children
- State Supplementation
- · State or Federal Adoption Subsidy
- · 300% Eligibility

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eference: Eligibility-EDW CM Policies 8

Eligibility Exclusions

 Waiver services may not be delivered to an individual in the following circumstances:



Reference: Eligibility-EDW CM Policies 8

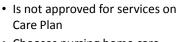
Eligibility Exclusions

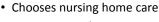
- · In licensed Assisted Living Facility
- In Nursing Home
- Can provide recruitment
- Receiving services from another HCBS Waiver
 - Or ADSS for E/D Waiver services
- With a primary diagnosis of Mental Retardation/Illness

03/2011

Reference: Eligibility-EDW CM Policies &

Eligibility Exclusions (continued)





- · Moves to another state
- Refuses to sign the waiver application
- Whose health and safety is at risk in the community

03/201

Reference: Eligibility-EDW CM Policies & Procedures

Eligibility Exclusions (continued)

- Who does not cooperate with providers
- · Who has Medicaid eligibility blocked
- Who is in the hospital
 - Can provide recruitment and assist with discharge planning



03/2011

Reference: Eligibility-EDW CM Policies 8 Procedures

Eligibility Exclusions (continued)

- Who is in a hospital PEC bed/swing hed
- · Who is in an ICF/MR Facility



03/2011

Reference: Eligibility-EDW CM Policies & Procedures

Eligibility Exclusions (continued)

- Who receives Medicaid Hospice
- · Who resides in boarding home
 - Can provide CM and Adult Day Health, only
 - Can provide waiver services to foster care recipients



03/2011

Reference: Eligibility-EDW CM Policies &

Eligibility Exclusions (continued)

- Who is unable to provide a healthy and safe environment in which waiver services can be delivered
- Who is unable to sustain an environment in which providers are treated with dignity and respect

03/2011

Reference: Eligibility-EDW CM Policie

Those pending hospital discharge Those residing in the community... Those in NH facilities... Those in NH facilities... Target Groups Financial Criteria Subsidy State Supplementation State/Federal Adoption Subsidy 300/2011 Seference: Eliphility-EDW CM Policies & Procedures 133

ELDERLY AND DISABLED WAIVER

Services provided under the E/D Waiver Program include:

- Case Management
- Personal Care
- Homemaker
- Companion

ELDERLY AND DISABLED WAIVER

Services continued:

- · Skilled and Unskilled Respite
- Adult Day Health
- Home Delivered Meals
 - Frozen
 - Breakfast
 - Shelf-stable

LIFE CARE SERVICES

- Provides home care services under federal and state funded programs for the disabled, low income, and elderly.
- Services may be purchased individually through the Options Program.

LIFE CARE SERVICES

To qualify for life care services, you must meet one of the qualifying eligibility requirements:

- Medicaid Elderly and Disabled Waiver
- Medicaid HIV/AIDS Waiver
- Alabama Head Injury Foundation
- Alabama Cares
- Options 1

LIFE CARE SERVICES

Services include:

- Homemaker
- Companion
- Nursing
- Personal Care
- Skilled and Unskilled respite

PATIENT FIRST IN-HOME MONITORING PROGRAM

- Provides in home monitoring through a land line or cell phone.
- Helps to prevent ER Visits and hospitalizations.
- Reduces on call nurse visits.

PATIENT FIRST IN-HOME MONITORING PROGRAM

Requirements:

- Patient First Medicaid
- Physicians Order
- Cell phone or a landline phone (A speaker phone is provided, if needed.)
- Patient or caregiver willing and able to use the equipment.

PATIENT FIRST IN-HOME MONITORING PROGRAM

Diagnostic Requirement:

- Diabetes
- · Congestive Heart Failure
- Hypertension

PATIENT FIRST IN-HOME MONITORING PROGRAM

Referral Sources:

- Medicaid Database
- Medical Providers
- Home Health
- Patient First Care Coordinators
- E/D Waiver Case Managers
- Life Care

PATIENT FIRST IN-HOME MONITORING PROGRAM

- Patient or caregiver uses glucometer, blood pressure cuff, and scales as directed by physician.
- A phone call is made to an automated phone message system.
- Patient enters the data regarding weight, blood pressure, and blood sugar levels.

PATIENT FIRST IN-HOME MONITORING PROGRAM

- Data automatically appears on computer screen for Home Health staff and medical provider.
- Life Care Nurse monitors information and contacts the patient if the data is not within normal limits.

PATIENT FIRST IN-HOME MONITORING PROGRAM

- The patient may recheck their blood pressure, weight, or blood sugar levels and report the results to the Life Care Nurse.
- If the levels are not within normal limits, the physician is notified as ordered, and a decision is made whether the nurse makes a home visit or patient goes to the physician's office or ER.