**HOME CARE SERVICES**

**Levels of Home Care:**

**Homemakers** or **companions** can provide assistance with meal preparation, light housekeeping, laundry, errands, and other “hands-off” tasks. If the client only needs supervision or a “sitter”, this may be the appropriate level. Some home care agencies offer these services in addition to more complex services – look for the ‘**@**’ next to the agency name below.

**Home health aides** or **certified nursing assistants (CNAs)**, in addition to the services provided by homemakers, assist with “hands-on” personal care needs such as bathing, walking, dressing, and toileting. CNAs cannot give injections or dispense medications, though they can remind the patient to take their medication.

**Skilled nursing** and other skilled services such as **physical therapy, occupational therapy, speech therapy, and medical social services** may be offered by some home health agencies.

**Paying for Home Health Care:**

**Medicare** provides a limited **Home Health Benefit** which may be available to patients following certain illnesses and injuries. It does not require prior hospitalization. Medicare usually pays for home health visits under the following circumstances:

1) The patient must need intermittent skilled nursing or therapies as well as personal care,

2) The patient must be homebound,

3) The care must be ordered by and is under the direction of a physician, and

4) The agency must be certified to provide Medicare visits.

If all these conditions are met, a home health aide approved for Medicare Home Health can assist with personal care on a limited basis (often only 1-2 hours/visit). Medicare covers the cost of this service, however this benefit is usually time-limited and is discontinued if/when the patient no longer needs skilled nursing or therapies.

**Medicaid** also pays for in-home aides for people who need help with personal care, under a program called **Consolidated Personal Care Services** (Medicaid PCS). To receive this benefit, the patient must have Medicaid, an assessment must be requested by the client’s physician, and the agency must be Medicaid-certified and provide PCS services (marked with a **~** below). PCS covers only a small number of hours of care per week (max. 80 hours/month), and primarily provides help with personal care needs such as bathing, dressing, toileting, mobility, and eating. In order to qualify, clients must have needs for hands-on assistance in at least three of these activities of daily living (ADLs). **PCS cannot serve clients who only need homemaker services such as housekeeping and meal preparation, or whose needs do not require hands-on assistance.**

*For example*, if the client just needs prompting or coaching to get dressed, but can put his clothes on without hands-on assistance, dressing would not count as a qualifying ADL. PCS is meant to supplement, not replace, help from family members or other caregivers. In order to arrange PCS services, the client must ask their physician to put in a request for an evaluation, which can be done online. A nurse from an independent assessment agency will then come to the patient’s home to assess what services are needed. If services are approved, the patient can choose an agency to provide the service.**\*Medicare Services ~ Medicaid PCS $Private Duty @ Companion Services +Accredited Complete update June 2013**

Medicaid also offers the **CAP (Community Alternatives Program)** to help older and disabled adults remain in community settings rather than being placed in nursing homes. This program is for people who have low income and assets, and who are at risk of nursing home placement because of their care needs. For patients who qualify, CAP can provide extensive home-based services, but not 24-hour care.

Individuals at a nursing home level of care may also want to look at the **PACE program (Program of All-Inclusive Care for the Elderly)**, which provides comprehensive health care, including home care when needed, through community-based services.

Some agencies also provide services of nurses or home health aides which can be paid for privately by the patient or private insurance. These services are called **private duty services**. Private-pay rates for in-home aides through agencies are in the range of $15-25 per hour, usually with a 2-4 hour minimum per visit. Agencies that offer private pay services are marked with a ‘**$**’ in the list below.

**Hospice** services provide pain relief, symptom management and supportive care for persons with limited life expectancy as determined by a physician. Medicare and other insurance will pay for hospice services. Nonprofit hospice agencies may commit to provide services even if the patient can’t pay.

When contacting an agency for in-home services, obtain as much information as possible before contracting for services. All agencies with employees providing companion, sitter, respite care, or hands-on care must be licensed by the Texas Division of Health Services Regulation, and must meet requirements in the areas of staff qualifications, patient care, record-keeping and administration. Some agencies are also “accredited”, meaning that they have met voluntary additional standards of special accrediting bodies. If services are to be covered by Medicare or Medicaid, be sure that the agency is certified and is accepting new clients under those programs.

**We do not recommend specific agencies.** You are responsible for evaluating the quality of care provided and making appropriate choices. The following list is for informational purposes only and does not imply an endorsement on the part of *Russell-Realtor.*