

# MEDICARE FACE TO FACE ENCOUNTER TIPSHEET

#### **DESCRIBING HOMEBOUND – SOME MORE HINTS**

#### Please record two or more reasons:

- Post-op weakness
- Severe dyspnea w/exertion
- Severe dizziness
- Muscle weakness
- Uncontrolled pain
- Disorientation/confusion
- Severe depression
- Severe anxiety (Agoraphobia, panic attack)
- Psychiatric symptoms interfere with ability to safely leave home
- Poor cognition
- Compromised mental status

- Unable to ambulate
- Bedbound
- Confined to wheelchair and does not leave home
- Unsteady gait/balance
- Requires assist of 1-2 people
- Requires assistive device(s)
- Difficult and taxing effort to leave home
- Unable to negotiate stairs
- Poor coordination
- Dependent with ADL's
- Severely restricted ROM
- Unsafe to leave home due to frequent falls
- Poor visual acuity/blindness

## **HINTS**

### Homebound does not mean never goes out. It means:

- Can only leave home with difficulty
- Leaves home only occasionally
- Does not leave home for fun (bingo, casino, senior center, etc.)
- Does not drive, or drives only for absolute necessity (such as getting to dialysis)
- Patients can go to church, medical appointments, adult day care, family visits and events and still be deemed "homebound" by Medicare

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# DIAGNOSIS & REASONS FOR HOME CARE: MAKE THE LINK

PATIENT DX/PROBLEM	HOME CARE SERVICE
Wounds, lacerations, non-healing ulcers	Wound care
Surgery (state type) with drains, other devices, diagnosis or surgery that requires home medical procedure	<ul> <li>Drain care or device care</li> <li>Perform procedure (specify)</li> <li>Teach patient or family to perform procedure</li> </ul>
New diagnosis or change in condition	<ul><li>Patient self care instruction</li><li>Disease process instruction</li></ul>
Pain	Pain management plan
Diet change	<ul><li>Diet teaching</li><li>Nutritional status assessment</li></ul>
Medication noncompliance	<ul> <li>Assess medication management</li> <li>Develop medication management system</li> <li>Medication teaching</li> </ul>
Recent falls	<ul> <li>Home Safety assessment</li> <li>Gait/balance assessment</li> <li>Exercise to regain mobility</li> </ul>
Pernicious anemia	Administer B12 injection
New treatment plan or medication	<ul><li>Assessment of response to Rx or treatment</li><li>Patient teaching</li></ul>
Declining cognition and function	<ul> <li>Assess mental status, ADLs, and IADLs</li> <li>Family teaching</li> <li>Home safety assessment</li> <li>Home modifications</li> </ul>
Chronic disease with exacerbation (specify dx)	Monitor vital signs, physical assessment, PO2, weight
Joint replacement surgery	<ul> <li>Home safety assessment</li> <li>Exercise and adaptive equipment training</li> <li>Joint protection education</li> <li>Home modifications</li> </ul>
Impaired gait, muscle weakness, poor coordination, balance problems	Assess function and develop therapeutic exercise to regain function
Impaired speech, swallowing	Speech therapy to regain function

#### **HINTS**

Only nursing, physical therapy, occupational and speech therapy are considered "skilled" care under Medicare.

A skill must be present for Medicare to pay for home care.

Social work, home health aide, but patients must have a "skilled need" (list above) to receive them.