

# Home Health Lunch and Learn: Homebound Documentation

2/15/2024

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# Today's Presenter

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Provider Outreach and Education  
Consultant

- Madeleine Collins, RN



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## Objectives

Define what the confined to the home criteria is for Medicare home health eligibility

Learn what medical reviewers are looking for in documentation

Review examples of documentation to support homebound status



## Agenda

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Confined To The Home

Homebound Documentation

Resources

Q&A

The background is a dark blue gradient. On the right side, there are large, overlapping, semi-transparent blue geometric shapes, including a large 'S' or 'R' curve and a triangle. In the bottom-left corner, there is a pattern of small, light blue dots arranged in a grid-like fashion.

Confined To The Home

# Homebound Status

- **Criteria One** (One standard must be met):
  - Because of illness or injury, need the aid of supportive devices such as crutches, canes, wheelchairs and walkers; the use of special transportation; or the assistance of another person to leave their place of residence **\*\*or\*\***
  - Have a condition such that leaving the home is medically contraindicated
- **Criteria Two** (Both standards must be met):
  - There must exist a normal inability to leave home **\*\*and\*\***
  - Leaving home must require a considerable and taxing effort



# Homebound Status

## ■ Criteria One

- Verify the type of support and/or supportive device or assistance required to assist the patient in leaving home
  - ✓ Example: patient uses walker or another individual to assist with ambulation

**-or-**

- Verify the reason why leaving home is medically contraindicated
  - ✓ Example: the patient is immunocompromised



# Homebound Status

## ■ Criteria Two

- Explain the patient's normal inability to leave home within the medical record documentation
  - ✓ Example: identify the patient's "normal ability" prior to the current illness or injury and compare and contrast prior level of function to their current level of function

**-and-**

- Describe the patient's taxing effort
  - ✓ Example: utilize the patient's medical record to identify patient specific challenges

# Homebound Status



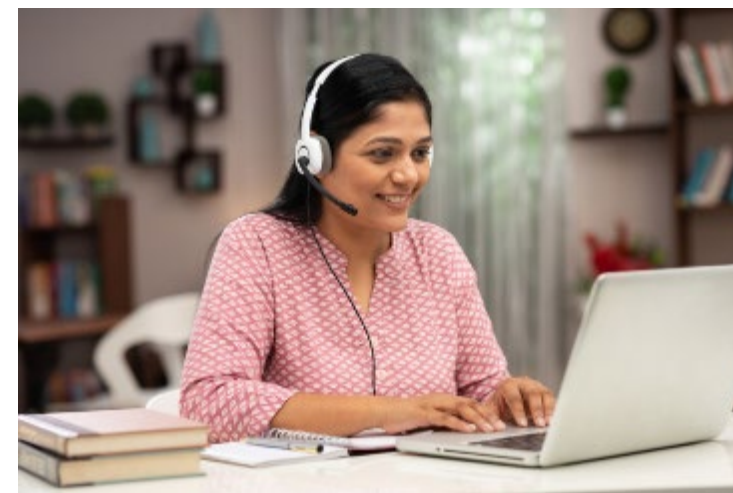
## Infrequently

For other unique or infrequent events:  
Funeral, graduation, hair care



## For Periods of Relatively Short Duration

For religious services



## To Receive Health Care Services

For medical appointments/treatments  
To attend adult daycare centers for medical care

# Homebound Documentation



# Homebound Documentation

- Provide documentation regarding the patient's current health status
  - Examples:
    - ✓ Prior level of function
    - ✓ Current diagnosis
    - ✓ Duration of condition
    - ✓ Clinical course (worsening or improving)
    - ✓ Prognosis
    - ✓ Nature and extent of functional limitations
    - ✓ Therapeutic interventions and results

# Homebound Documentation

- Pain medications (causing drowsiness)
- Rest periods (frequent rest periods with ambulation)
- Oxygen (desaturation with ambulation, shortness of breath)
- Incontinence (acute/chronic, new Foley catheter, briefs, irritation)
- Confusion (acute/chronic, familiarity with current living accommodations)
- Safety concerns (related to recent falls, familiarity with current living accommodations, confusion)
- Alternative accommodations (is the patient currently in their own home or are they now residing elsewhere; moved in with family member, new surroundings)

# Homebound Documentation

- Documentation must:
  - **Include** information about the injury/illness and the type of support and/or supportive device/assistance required for illness/injury to assist the patient in leaving home
  - **Explain** in detail how the patient's current condition makes leaving home medically contraindicated
  - **Clarify** exactly the distinct difference in the patient's normal ability versus their normal inability
  - **Describe** exactly what effects are causing the considerable and taxing effort for this patient when leaving home

# Homebound Documentation

- Declaring standardized phrases reflecting the patient's condition is insufficient, by itself, to demonstrate the criteria has been met.
  - **Examples:**
    - ✓ "It's a taxing effort for the patient to leave home."
    - ✓ "The patient leaves home for periods of short duration."
    - ✓ "The patient leaves home infrequently."
    - ✓ "The patient leaves home for religious services."
    - ✓ "The patient has a normal inability to leave their home."

# Homebound Documentation

## ■ Poor Example of Homebound Status

- “Decreased endurance/mobility, unsteady gait, pain”

## ■ Better Example of Homebound Status

- “Patient with multiple comorbidities including chronic heart failure and end stage kidney disease status post renal transplant with recent worsening dizziness and impaired functional mobility secondary to debilitated state post viral infection. Patient currently using rollator walker and is very unsteady getting up from the chair with extreme SOB with minimal exertion.”



# Homebound Documentation

## ■ Poor Example of Homebound Status

- “Unstable blood sugars”

## ■ Better Example of Homebound Status

- “FBS 350 without symptoms. Insulin dose of 18 units of 70/30 taken. BS at lunchtime was 45 and patient c/o confusion, dizziness, headache, sweating, and trembling all over and unsteady gait. States this is pattern for last two weeks. Verbalizes concern and fear of fainting or falling.”

# Homebound Documentation

## ■ Poor Example of Homebound Status

- “Confusion, poor cognition, requires assistance to leave home”

## ■ Better Example of Homebound Status

- “Patient is homebound due to end-stage dementia and cannot be left unattended due to wandering behaviors and extremely poor cognition. Patient has wandered away from home and been lost in the past resulting in injury. The patient is now too disoriented to safely leave home alone and requires frequent prompting and redirection of another person to keep the patient from harm. The patient also exhibits poor balance and falls easily if not supported by another person during all attempts at ambulation.”

# References

# References

- [CMS Internet Only Manual \(IOM\) Pub. 100-02, Medicare Benefit Policy Manual Chapter 7 – Home Health Services Sections 20-50.1](#)
- [CMS Internet Only Manual \(IOM\) Pub. 100-04, Medicare Claims Processing Manual Chapter 10 - Home Health Agency Billing](#)
- [CMS Internet Only Manual \(IOM\) Pub. 100-08, Medicare Program Integrity Manual Chapter 6 - Medicare Contractor Medical Review Guidelines for Specific Services](#)
- [42 Code of Federal Regulations \(CFR\) Section 484 - Home Health Services](#)
- [NGSMedicare.com](#)
  - Job Aids
  - Webinars
  - Medicare University Computer Based Training (CBT)

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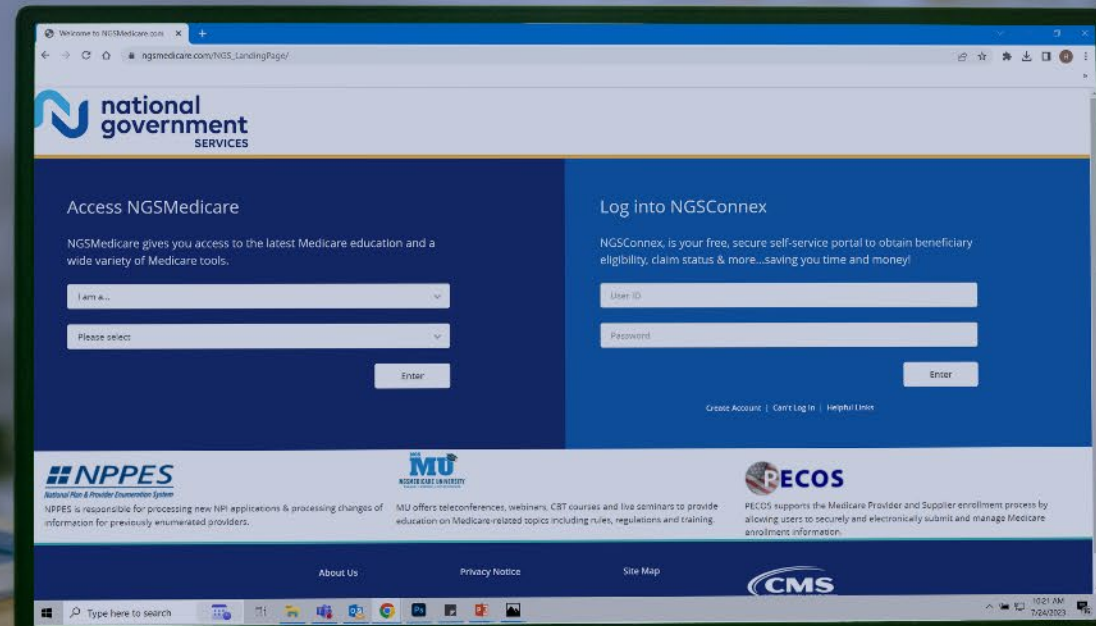
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