



Six things patients can do without jeopardizing homebound status

CMS' Medicare Benefit Policy Manual provides several clarification of what patients can do without losing their homebound status. Those clarifications include:

Patients can go on medical outings.

- Patients can leave the home to receive care, for example, at a physician's office or an adult day care center, CMS states.

Patients can go out on infrequent, short, non-medical outings.

- Homebound status still applies if the event is unique, such as a funeral or graduation, or infrequent and short, such as an occasional trip to the barber. CMS states.

Patients can attend religious services.

- That is true even if they attend several religious services a week, since the manual does not provide a cap for that type of absence. Maxim* says.

Patients who need supportive devices are generally homebound.

- That includes canes, walkers, wheelchairs, crutches, the use of special transportation or the assistance of another person, CMS states.

Patients are homebound if leaving home could worsen their conditions.

- For example, patients with congestive heart failure or senile patients who get confused when leaving their accustomed environment, Maxim* says.

Patients are in late stages of neurodegenerative disabilities are generally homebound.

- In the case of such disabilities, CMS advises agencies to consider the development of the patient's condition over a long period of time. Maxim* cited the case of a patient with late-stage amyotrophic lateral sclerosis who was able to drive a specially designed car and would occasionally go to baseball games with his children. Considering the long-term development of the patient's disease and his inability to perform ADL's unassisted, he still qualified for homebound status.

Sources: *Arlene Maxim of A.D. Maxim & Associates in Troy, Michigan
Centers for Medicare & Medicaid Services and Tina Irgang- Decision Health

www.metrohomehealthcare.com

Toll Free Phone: 800-462-5632