

MEDICARE: Paying for home health care in Wisconsin

If you or a loved one are considering home health care in Wisconsin and have questions about how to cover the costs, understanding Medicare's coverage is crucial. Here's a comprehensive guide to help you navigate Medicare's provisions for home health care expenses.

Medicare and home health care overview

Medicare is a federal health insurance program that provides coverage for eligible individuals who are 65 years or older, or who meet specific criteria due to disabilities. It offers different parts that cover various medical services. When it comes to home health care, Medicare Part A and Part B are the primary components to consider.

Medicare Part A: Hospital insurance & home health

Medicare Part A covers inpatient hospital stays, skilled nursing facility care, hospice care, and some home health care services. For home health care coverage under Part A, the following conditions must be met:

1. **Doctor's order:** A qualified healthcare professional must determine that you need skilled nursing care or therapy services at home.
2. **Intermittent care:** The care you receive must be intermittent, which means it's part-time and provided on a medically necessary basis.
3. **Homebound status:** You must be considered homebound, meaning leaving your home requires a considerable and taxing effort.
4. **Medicare-certified agency:** The home health care services must be provided by a Medicare-certified home health agency, such as Transitions At Home.

Medicare Part B: Medical insurance

Medicare Part B covers outpatient services including doctor's visits, preventive services, and certain home health care services. Covered home health care services under Part B include:

- Skilled nursing care: Wound care, injections, monitoring and more are covered under Part B.

- Physical therapy, occupational therapy, and speech-language pathology: These therapies are covered when deemed medically necessary by a qualified healthcare provider.
- Durable medical equipment (DME): Equipment that's essential for your care, like oxygen equipment or mobility aids, is covered under Part B.

Costs and coverage

Under Medicare, you generally won't be responsible for paying for eligible home health care services. Here's what you can expect in terms of costs:

- Home health services (Part A and Part B): \$0 cost to you.
- Durable medical equipment (Part B): 20% of the Medicare-approved amount + your Part B deductible.
- Hospice care (Part A): \$0 for hospice care + \$5 copayment for prescription drugs + 5% of the Medicare-approved amount for inpatient respite care (if applicable).

Getting started

If you're considering home health care, reach out to Transitions At Home to determine your eligibility and discuss the services you require. Our team can guide you through the Medicare coverage details, help you understand potential costs, and assist you in exploring other financial assistance options.

Remember, understanding your Medicare coverage and exploring all available resources will help you make informed decisions about your home health care needs in Wisconsin.

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