

KNOW YOUR RIGHTS

If Medicare doesn't pay for a service or supply, the home health agency will give you an "Advance Beneficiary Notice of Noncoverage" to sign. This notice says Medicare probably (or certainly) won't pay for the item or service. Read this notice carefully—if you sign it, you're agreeing to pay the entire cost if Medicare doesn't cover the item or service. Your home health agency will also give you a notice called the "Notice of Medicare Non-Coverage" before your Medicare-covered services end. If you think your Medicare-covered home health services are ending too soon, you may have the right to an expedited (or fast) appeal. Your "Notice of Medicare Non-Coverage" gives instructions on how to ask for a fast appeal. Ask your doctor for any information that may help your case. If you ask for this fast appeal, an independent reviewer will decide if your services should continue. You have the right to participate in decisions about your treatment, the right to a fair process to appeal decisions about coverage and payment of services, and the right to privacy.

For more information, visit [Medicare.gov/publications](https://www.medicare.gov/publications) to view the booklets "Medicare Rights & Protections" and "Medicare Appeals." You can also visit [Medicare.gov](https://www.Medicare.gov), or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

WHERE TO GET MORE INFORMATION

Visit [Medicare.gov](https://www.Medicare.gov) or call 1-800-MEDICARE (1-800-633-4227) to find Medicare publications, helpful phone numbers, and websites. TTY users can call 1-877-486-2048.

- **To compare how well home health agencies in your area care for patients (their quality),** visit [Medicare.gov/care-compare](https://www.Medicare.gov/care-compare).
- **To learn more about eligibility, coverage, and cost information,** read the free booklet "Medicare and Home Health Care."
- **To get a report on a particular home health agency,** call your State Survey Agency.
- **For help with home health care bills,** call your Regional Home Health Intermediary (RHHI).
- **For free health insurance counseling and personalized help,** call your State Health Insurance Assistance Program (SHIP). To get the phone number for your state, visit [shiphelp.org](https://www.shiphelp.org), or call 1-800-MEDICARE (1-800-633-4227).

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit [Medicare.gov/about-us/accessibility-nondiscrimination-notice](https://www.Medicare.gov/about-us/accessibility-nondiscrimination-notice), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

Medicare's Home Health Benefit



GETTING STARTED



Get Better in the Comfort of Your Own Home

YOUR DOCTOR SAYS YOU NEED HOME HEALTH CARE

LET'S GET STARTED.

Home health care gives skilled nursing care, physical and occupational therapy, speech-language therapy services, and medical social services in the comfort of your home. Your doctor orders home health care. If you're leaving a facility, like a hospital or skilled nursing facility, the discharge planner may help transition your care from the facility to home health care. Health care professionals from a Medicare-certified home health agency work with you and your doctor to evaluate your health care needs and write your plan of care, which tells you what home care services you need. The home health agency staff will teach you and your caregiver (family or friends who are helping you) to continue any care you may need in the future, like wound care, therapy, and disease management. Home health care's goal is to treat an illness or injury. Although you have a say in which agency you use, your choices may be limited by the services the agency gives, your insurance coverage, or if the agency is available.

WHAT'S COVERED

For Medicare to cover home health services, they must be reasonable and necessary for the treatment of an illness or injury.

A Medicare-certified home health agency may give:

- Skilled nursing care on a part-time or intermittent basis by a registered nurse or a licensed practical nurse
- Physical therapy, speech-language pathology services, and occupational therapy
- Home health aide services (like help with personal care such as bathing, using the toilet, or dressing) on a part-time or intermittent basis
- Medical social services (like counseling or help finding resources in your community) if you're also getting skilled care like nursing care or other therapy from the home health agency
- Certain medical supplies, like wound dressings, ordered as part of your care
- Durable medical equipment (like a walker)

WHO CAN GET COVERED HOME HEALTH CARE

You can get covered home health care if you meet all of these conditions:

- Confined to the home
- Under the care of a doctor
- Getting services under a plan of care established and periodically reviewed by a doctor
- In need of skilled nursing care on an intermittent basis or physical therapy or speech-language therapy, or in need of continuous occupational therapy

WHO CAN GET COVERED HOME HEALTH CARE (CONTINUED)

A doctor, or certain health care professionals who work with a doctor, must see you face-to-face before a doctor can certify that you need home health services. A doctor must order your care, and a Medicare-certified home health agency must give it.

WHAT TO PAY

You pay \$0 for Medicare-approved home health services. For durable medical equipment (like a walker, wheelchair, or oxygen equipment), you pay 20% of the Medicare-approved amount, after you pay the Part B deductible.

PROTECT YOURSELF AND MEDICARE FROM FRAUD

In general, most home health agencies are honest and use correct billing information. Unfortunately, fraud sometimes occurs. Examples of fraud include home health visits that your doctor orders that you didn't get, or bills for services and equipment you never got. Help us prevent fraud, waste, and abuse in the Medicare Program by reporting Medicare fraud to 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-800-486-2048.

"Medicare's Home Health Benefit: Getting Started" isn't a legal document. More details are available in the "Medicare & Home Health Care" booklet. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings.

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