## Your Home Care Services Overview

By Rita May Ranck, RN, Expert Contributor

With so many choices in health care at home, it isn't surprising that many families are confused about what is available, how to get started receiving services, what those services include and who will pay the bill. Since I have been working in the home care field, I have had many of these questions asked of me.

Those of you needing home care now have three basic options which are: home health, hospice and non-medical in home assisted living.

I will tackle **home health** first. You can get home health care if you are in your home and have what the insurance/medical fields call a skilled need. This means that the care you need requires a person with special training to help address your need. Some examples of a skilled need are physical therapy, occupational therapy, speech therapy, wound care, catheter care, or IV therapy. Care from home health can include nursing services, aide services, therapy services and social work services. While this is not an all-inclusive list, it does give you an idea of the scope of home health. A physician's order is required to receive home health and is usually prescribed for a specific reason and for a specific length of time. Most private insurances and both Medicare and Medicaid





cover these expenses. The goal of home health is to attend to your need and to rehabilitate you to the point where you can function independently, or at least to the best of your ability.

**Hospice** is very similar to home health. However, the main goal of hospice is to provide palliative care to terminally ill patients who have decided to forgo treatment for their illness. When you are enrolled in a hospice program you usually are assigned to a nurse and a social worker. Most hospices also provide chaplain and volunteer services to their patients and family members. All hospice services are covered by Medicare and Medicaid. Private insurance companies may have a hospice clause and may have a monetary limit as to how much they will cover for these services. Each policy is different so you would need to review the policies that you have to know if this service would be covered by your own personal policy.

**Non-medical care** is just that. Someone will come into your home and provide assistance with your activities of daily living. Some examples of the services which may be provided are help with bathing, help with mouth care, meal preparation, light housekeeping, medication reminders, and transportation to doctor's appointments. You do not need a physicians order to receive this type of service.

Medicaid provides funding for this type of service through their Community Long Term Care program. Participants pick a case manager that will meet with them to start the process and help them to pick a non-medical in-home assisted living company to provide their care. Some Long Term Care Insurance policies will also cover this type of service. You must have a home care clause and there is usually a dollar-per-day limit on this type of service. Once again, it is best to review your policy to see what services your policy would cover.

There are a number of companies providing this type of service here in the Lowcountry. You can find them in the yellow pages under various headings such as Companion Care, Home Health, Senior Services, Nursing Services, etc. Each company is privately owned and operated. Prices do vary. The average cost is around twenty dollars an hour. Some companies have minimum requirements. Non-medical care can be used alone or in combination with home health or hospice as long as there isn't duplication of services.

Having worked in home care for the past eighteen years, I have had the privilege of being a hospice nurse and am currently the owner of a non-medical in-home assisted living company. I hope this article has helped to answer some questions that you may have had about home care.