

A Comparison of Medicare Home Health and Hospice Benefits



SERVICE	HOME HEALTH BENEFIT	HOSPICE BENEFIT
Skilled Nursing	✔ Covered for skilled care on an intermittent basis (i.e. 1 or 2 visits every 14 days)	✔ Covered for skilled and supportive care typically 4 visits every 14 days
Physician Visits / Services	✘ Not covered under home health, covered under Part B Physician schedule with copay	✔ Covered, Consulting hospice physician (100%)
Medical Social Work	✔ Covered for patient	✔ Covered for patient and caregivers
Chaplain Services	✘ Not covered	✔ Covered
Home Health Aides / Homemaker Services	✔ Covered if part-time or intermittent, must provide "hands on personal care"	✔ Covered, no hourly restriction
Volunteer Support for Patient & Caregivers	✘ Not covered	✔ Covered
Medications Related to Primary Illness	✘ Not covered	✔ Covered
Durable Medical	✔ Partially covered (80%)	✔ Covered (100%)
Respite Care	✘ Not covered	✔ Covered
24-Hour On-Call Nurse	✘ Not covered	✔ Covered
Bereavement Care	✘ Not covered	✔ Covered, during periods of medical crisis
Medical Supplies	✔ Covered	✔ Covered
Dietitian	✘ Not covered	✔ Covered
Physical Therapy Occupational Therapy Speech Pathology	✔ Covered (limitations apply)	✔ Covered
Services to Nursing Facility Residents	✘ Not covered	✔ Covered
Skilled Continuous Care	✘ Not covered	✔ Covered, during periods of medical crisis

Medicare will pay for hospice care if all the following requirements are met: 1. Prognosis that life expectancy is 6 months or less. (42 CFR §418.3) 2. Terminal illness is certified by physician; 3. Patient elects hospice benefit; 4. Care is specified in the hospice plan of care; and 5. Hospice program is Medicare-certified. (42 CFR §418.21, 418.22, 418.24)