

Home Care

What is home care?

Home care refers to services performed at a person's home by an outside agency. Home care enables seniors requiring part-time medical or personal care to remain in their homes.

What type of home care services are available?

Services fall into two categories: 1) skilled services and 2) home support services.

- Skilled services include part-time nursing care, physical therapy, speech therapy, and occupational therapy. For example, a nurse may come to the home periodically to give an injection, or a physical therapist may come to review exercises with a patient recovering from a hip fracture.
 - Home support services include homemaker services and home chore services. These programs offer help with activities of daily living. For example, an aide may help the patient with bathing, grooming, and dressing, or with meal preparation and light cleaning.
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How do I arrange for home care?

Home care is available through hospitals, public health departments, Area Agencies on Aging, and private agencies. If the home care follows a hospitalization, usually the hospital will help you coordinate the services you need. Your family doctor may be able to help develop a plan for home health care and recommend agencies to contact. If you anticipate reimbursement from Medicare, Medicaid, or insurance, a doctor's certification that home care is necessary will be required.

How do I choose a home care provider?

The National Association for Home Care suggests asking the following questions when choosing a home care provider:

- How long has the provider been serving the community?
- Does the provider supply literature explaining its services, eligibility requirements, fees, and funding sources?
- How does the provider select and train its employees? Does it protect its workers with written personnel policies, benefits packages, and malpractice insurance?
- Are nurses or therapists required to evaluate the patient's home care needs? If so, what does this entail? Do they consult the patient's physicians and family members?
- Does the provider include the patient and family members in developing the plan of care?
- Is the patient's course of treatment documented, detailing the specific tasks to be carried out by each professional caregiver? Does the patient and family receive a copy of this plan, and do the caregivers update it as changes occur? Does the provider take time to educate family members on the care being administered to the patient?
- Does the provider assign supervisors to oversee the quality of care patients are receiving in their homes? If so, how often do these supervisors make visits? How can the patient and his or her family members call with questions or complaints? How does the agency resolve problems?
- What are the financial procedures of the provider? Does the provider furnish written statements explaining all of the costs and payment plan options associated with home care?
- What procedures does the provider have in place to handle emergencies? Are its caregivers available 24 hours a day, 7 days a week? How does the provider ensure patient confidentiality?

How do I pay for home care?

Medicare, Medicaid, and private insurance may help pay for skilled home care if certain conditions are met. Medicare and Medicaid does not usually pay for home

support services. Religious or civic organizations may offer limited services free of charge or for reduced fees. The Commission on Aging and Disability offers a limited range of home services through its OPTIONS for Community Living program, <https://www.tn.gov/aging/our-programs/options.html>.

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