

ITEM 7. HOME HEALTH SERVICES

Home Health services are provided in accordance with 42 CFR 440.70.

- A. Intermittent or part-time nursing services as ordered in a plan of care. Home Health Services are provided to a beneficiary at their place of residence and in any setting in which normal life activities take place, other than a hospital, nursing facility; intermediate care facility for individuals with intellectual disabilities; or any setting in which payment is or could be made under Medicaid for inpatient services that include room and board. Home Health services cannot be limited to services furnished to beneficiaries who are homebound. Home Health services must be provided on orders written by a physician, nurse practitioner, clinical nurse specialist or physician assistant, working in accordance with State law, as part of a written plan of care that the ordering practitioner reviews every 60 days. Home Health services are covered when a practitioner documents that a face-to-face encounter occurred with the beneficiary according to the requirements found at 42 CFR 440.70.

Home telemonitoring is a service delivery system that requires scheduled remote monitoring of data related to an individual's health, and transmission of the data from the individual's home to a licensed home health agency. The data transmission must comply with standards set by the Health Insurance Portability and Accountability Act (HIPAA).

Data parameters are established as part of a plan of care. Scheduled periodic reporting of the individual's data to the ordering provider is required, even when there have been no readings outside the parameters established in the plan of care. Telemonitoring must be available 24 hours per day, 7 days a week. Review of data received via telemonitoring is performed by health care professionals operating within their scope of practice and includes registered nurse (RN), nurse practitioner (NP), clinical nurse specialist (CNS), physician assistant (PA), and licensed practical nurse (LPN) under the supervision of a RN.

- B. Home health aide services must be documented in a plan of care and supervised by the appropriate therapist or RN. Personal support tasks may be performed by an aide when they are incidental to the medical care being provided, such as putting the soiled bedclothes of an incontinent patient into the wash or washing the dishes of a patient who requires feeding.
- C. Medical supplies, equipment and appliances are limited to those required to perform the services ordered as medically necessary to address the beneficiary's diagnosis or health condition. Services beyond published limits are subject to medical necessity review by Vermont Medicaid. Select incontinence supplies must be supplied by the statewide contracted vendor. With prior approval, the contracted incontinence supplies may be obtained from other durable medical equipment providers.
- D. Therapy services whether occupational therapy, physical therapy or speech pathology services are covered for up to four months. Provision of therapy services beyond the initial four-month period is subject to review for medical necessity by Vermont Medicaid.