

## OASIS Alert

### Reimbursement: Check Homebound Status On Every Visit

Notice your patients' 'exhausting efforts.'

If your patient drove his car to pick up his prescription or grab groceries, he doesn't fit the homebound status, right?

Not necessarily, says **Debbie Dawson, RN, HCS-D, COS-C**, a Bailey, CO-based consultant with **HealthCare Strategies**.

A new clarification from the **Centers for Medicare & Medicaid Services** offers more insight into determining whether a patient fits the homebound definition. For example, patients don't have to be bedridden to be considered confined to their homes, CMS stated in a clarification on its Web site. Similarly, a patient can drive to pick up his prescription and "still be homebound," Dawson says.

Think of it this way: A patient who doesn't drive, but is able to get down her front steps to go shopping with her neighbor is not homebound. On the other hand, "the patient who is forced to drive to the pharmacy because she has no one to do it for her and then is exhausted from the trek is homebound," Dawson explains.

What to do: Once clinicians certify that a patient is confined to his home, agencies must carefully evaluate how often each patient leaves home and how leaving home affects the patient's condition, Dawson says. If leaving home requires a "considerable and taxing effort," then the patient qualifies as homebound -- even if he leaves home by driving his car, CMS states.

Key: Home care workers must thoroughly document how leaving home affects their patients, Dawson encourages. Failure to note the side effects of leaving home may lead CMS to believe you haven't correctly interpreted its guidelines.

Note: CMS' clarification is at [https://questions.cms.hhs.gov/cgi-bin/cmshhs.cfg/php/enduser/std\\_adp.php?p\\_faqid=9070](https://questions.cms.hhs.gov/cgi-bin/cmshhs.cfg/php/enduser/std_adp.php?p_faqid=9070).