

# Home Health Services

Your neurologist may prescribe skilled nursing services or physical, occupational, or speech-language therapy. Such intermittent and short-term services—if deemed medically necessary—should be covered by Medicare, Medicaid, and private insurance. Personal caregiving services of a non-medical nature, such as assistance with bathing, dressing, and eating, are not usually covered by insurance.

## Who pays?

If you have insurance, you should be covered for medically necessary home health services. Medicare should cover the bulk of these home health services, as long as you:

- Have a formal ALS diagnosis
- Qualify for Medicare
- Are certified as homebound by a doctor
- Are under the care of a doctor who established your care plan, reviews it regularly, and prescribes specific short-term or intermittent services that are deemed safe, effective, and specific treatments for your condition
- Use Medicare-certified home health agencies

Medicaid should cover costs for qualifying low-income patients, though the amount of in-home care and type of available services will vary by state. Private insurance may also pay for some of the costs. Plans tend to follow Medicare guidelines for covering medically-necessary home health services. Individual policies will vary.

## Which services are covered under Medicare?

Medicare will cover the following services if they are prescribed by your doctor:

- Intermittent and short-term skilled nursing services
- Physical therapy (mobility, functionality, pain reduction, fall prevention)
- Occupational therapy (promoting independence through activities of daily living)
- Speech-language therapy (evaluating and treating voice, speech, language, and swallowing difficulties)
- Home assessments, including safety evaluations
- Social services like counseling
- Some personal care services like bathing, toileting, and dressing—but only if these services facilitate skilled nursing care that is already in the home

## What is not covered?

Medicare will not pay for:

- Long-term or 24/7 personal care at home
- Non-medical caregiving services such as dressing and bathing (unless skilled nursing care is already in the home)
- Services that are not prescribed by your doctor
- Services performed by providers who are not certified by Medicare

## How can I get home health support?

Your ALS clinic neurologist or medical team will send the orders to a home health agency that is certified by Medicare and ideally has experience working with ALS patients. If you do not attend an ALS clinic, your primary care physician can refer you to their preferred home health agency.

## What if I'm not satisfied with the services?

You should be happy with the quality of services you receive. If not, you have the right to advocate for yourself. Share your concerns with the medical professional who ordered the services. They can contact the agency to clarify the orders and be more specific about what should be done during visits.

### Get Local Support



**ALS United North Carolina**  
**4 N. Blount Street - Suite 200**  
**Raleigh, NC 27601**  
[www.alsnc.org](http://www.alsnc.org)  
**(919) 755-9001**

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