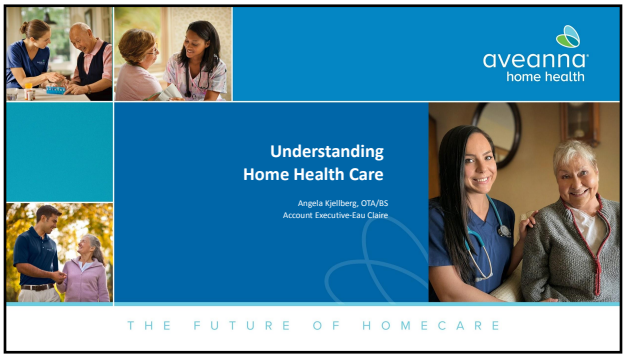


Outline

- Aveanna Healthcare
- Home Health Timeline
- Future of Home Health Care
- Medicare ABCD
- Types of Home Health Care
- Medicare Compare
- ADRC Resource – How they can help.
- Questions

Aveanna Healthcare

About Us

It all started with a simple idea:

- How can we help people live better lives by providing better home healthcare?
- That idea became a company called Aveanna, dedicated to bringing new possibilities and new hope to those we serve.
- Today Aveanna Healthcare cares for patients and families in 34 states through our rapidly growing network of more than 300 branch offices, offering a variety of care and services to more than 80,000 children and adults.
  - Private Duty Services
  - Home Health Care & Hospice
  - Medical Solutions

Home Health Care Timeline

Its beginning started in England in mid-1800s when William Rathbone, a wealthy businessman and philanthropist, with the help of Florence Nightingale, established a school to train visiting nurses in helping the “sick poor” in their homes.

The first home visiting programs in the United States appeared in the 1880s.

In 1965 Medicare legislation was passed. Then, home care services, as a benefit provided by Medicare to elderly clients, were used more frequently, especially after reductions of in-hospital lengths of stay.

Home Health Care Timeline

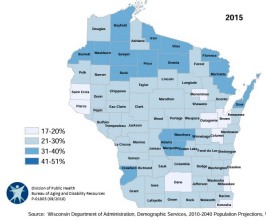
In 1971, Hospice, Inc. was founded in the United States, the first organization to introduce the principles of modern hospice care to that country, where medical care had focused on fighting illness through hospital stays.

Palliative care was first implemented after the birth of the hospice movement in the 1980s

Future of Home Health Care

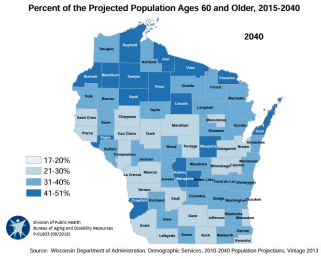
- The population of adults over the age of 60 in Wisconsin will grow 72 percent from 2015 to 2040, driving demand for these services.

Percent of the Projected Population Ages 60 and Older, 2015-2040



Source: Wisconsin Department of Administration, Demographic Services, 2010-2040 Population Projections, Vintage 2013

Future of Home Health Care



Source: Wisconsin Department of Administration, Demographic Services. 2010-2040 Population Projections, Vintage 2013

Medicare Part A & B (Traditional Medicare)

Medicare Part A

- Hospital, Inpatient Stay, Hospice, Home Health.
- Automatically available to those entitled to social security or railroad retirement age 65 or because of ESRD or disabled.
- Home Health Care is 100% covered under Medicare Part A.

Medicare Part B

- Physician Services, Ambulance, DME, Outpatient Services.
- Voluntary, requires beneficiary to pay a monthly premium.
- Anyone with Medicare Part A is eligible to obtain Medicare Part B.
- There is a copay for outpatient services under Medicare Part B.

Medicare Part C & D

Medicare Part C

- Offers an alternate way to receive your Medicare benefits.

(Medicare Advantage Plans)

Medicare Part D

- Provides prescription drug coverage through private insurance companies that have contracts with the federal government—it is never provided directly by the government (unlike Original Medicare).

What is Home Health Care?

- Home health care is a wide range of health care services that can be given in your home for your health care and supportive care needs.
  - Skilled Home Health Care (Medical)
  - Non-Skilled Home Health Care (Supportive)
  - Palliative Care
  - Hospice Care

10

What is Skilled Home Health Care?

- Skilled care refers to **skilled nursing or rehabilitation services**, provided by licensed health professionals like nurses, physical therapists, occupational therapists, and speech therapists, ordered by a doctor.
- Needed on a short-term and intermittent basis.
- Eligibility is needed.
  - Active Medicare coverage.
  - Are under a Physician's care.
  - Need a Skilled Service.
  - Must be Homebound.
- Covered by Medicare-FFS and Medicare Advantage Plans-MA (Other insurances)

11

Homebound Defined

- For Medicare purposes, an individual does not have to be bedridden to be considered confined to their home; however, the conditions should be such that the following criteria are met:
- CRITERIA ONE
  - The client must either:
    - Because of illness or injury, need to the use of special transportation, the assistance of another person in order to leave their place of residence, or the aid of supportive devices such as crutches, canes, wheelchairs, and walkers

      OR
    - Have a condition such that leaving their home is medically contraindicated.
- If the client meets one of the CRITERIA ONE conditions, then the client must ALSO meet two additional requirements defined in CRITERIA TWO.

12

Homebound Defined

- CRITERIA TWO
  - There must exist a normal inability to leave the home
    AND
  - Leaving the home must require a considerable and taxing effort and be infrequent in nature and of short duration.
    - Homebound individuals may still leave the home for short and/or infrequent excursions. Some examples of these outings are:
      - Occasionally visiting a barber/salon.
      - Attending a celebrations such as a wedding or graduation.
      - Recipient of kidney dialysis.
      - Attendance at a certified and licensed adult day care program.
      - Recipient of outpatient chemotherapy or radiation therapy.

What is Non-Skilled Home Health Care?

- Non-Skilled Home Health Care
  - 24-hour-a-day care at your home.
  - Personal care: Assistance with bathing, dressing, grooming, and toileting.
  - Homemaking: Cleaning, laundry, and meal preparation.
  - Companionship: Socialization and emotional support.
  - Transportation: Assistance with running errands, shopping, and appointments.
  - Respite care: Temporary relief for primary caregivers.
  - Non-medical home care is provided by trained caregivers, also known as home health aides, who are not licensed medical professionals. These caregivers are typically trained to help with ADLs and may have additional training in specialized areas, such as dementia care.
  - No eligibility.
  - Privately funded (Some Manage Care Organizations cover these services).

What is Palliative Care?

- Palliative Care is specialized medical care for individuals with serious illness. This type of care is focused on providing relief from the symptoms and stress of a serious illness. The goal is to improve the quality of life for both the patient and the family.
- Curative treatments continue as long as the individual desires.
- Intended to help manage pain, control symptoms, and provide emotional support.
- No eligibility is needed.
- Covered by Medicare-FFS and Medicare Advantage Plans-MA (Other insurances)

What is Hospice?

- Focused on comfort and quality of life for the patient and their loved ones.
- Patients will have a prognosis of six months or less.
- Support for the patient and their loved ones through bereavement counseling, spiritual care services, and social work.
- The Hospice team can consist of a Medical Director, a RN/LPN, a hospice aide, a social worker, and a spiritual care coordinator, as well as therapists and volunteers.
- Goals are to provide comfort and support for the entire family.
- No homebound requirement.
- Eligibility required: Services provided for up to six months, possibly longer if physician certifies limited life expectancy.
- Covered by Medicare-FFS and Medicare Advantage Plans-MA (Other insurances)
- Bereavement care for the family up to 13 months after the patient's death.

16

Medicare Compare

- https://www.medicare.gov/care-compare/
- You can use this tool to find and compare different types of Medicare providers (like physicians, hospitals, nursing homes, and others). Use maps and filters to help you identify providers that are right for you.

17

Local Resource to learn more about the home health options in your area:

Aging and Disability Resource Center https://www.dhs.wisconsin.gov/adrc/index.htm

ADRCs (aging and disability resource centers) provide Wisconsin residents with unbiased information related to aging or living with a disability. Their goal is to connect you with the right resources for your aging and disability needs.

18

Contact Information

Angela Kjellberg, Account Executive
Eau Claire and Waupaca
Email: angela.kjellberg@aveanna.com
715-400-5655

Sara Gillespie, Account Executive
Baraboo and La Crosse
Email: sara.gillespie@aveanna.com
608.632.0300