



"Staying Put - Navigating Home Care Options".

**By Pamela Cregger
Director of Community Relationships
Synergy HomeCare**



SYNERGY[®] HomeCare



Welcome



Introduction



Today's objective — Explore available home care options,
so that you or a loved one can make well-informed decisions



Non-Medical, In-Home Care

What is Non-Medical In-Home Care Support?

Helps with everyday personal needs at home, not the medical care that a nurse would provide.

Helps people remain independent and reach their own care goals.

Eases loneliness and creates more chances to connect with others.

Can help reduce hospital visits.

Works alongside other support mechanisms already in place

Gives families peace of mind.



Types of Services might include:

- Assistance with Activities of Daily Living (bathing, dressing, grooming, toileting, mobility, and eating.)
- Meal Preparation
- Light Housekeeping
- Laundry support
- Transportation (to/from appointments or errands)
- Cognitive support
- Family Caregiver Respite
- Hospice Care support

Who Pays for non-medical, in-home care?



Private Pay

LTC
Insurance

Medicare
Advantage
Plans

Veterans
Benefits

*Other Third-
Party
providers*





**Other considerations
regarding
non-medical,
in-home care**

Can be coupled with other Medicare services such as home health or hospice.

Reduces hospital visits because care needs are being identified early and addressed prior to crisis.

Working with an agency provides greater security and assurances.

Can improve quality of life because seniors feel supported and are not alone.



Additional Help:

- In-home monitoring systems are often available to identify care needs or emergencies.
- Such as:
 - Calls for help
 - Falls, confusion, or cognitive changes
 - Early detection of infections such as UTIs or Respiratory Infections
 - Change of Conditions
 - Overall change in ADL status and/or safety
- Ai technology can help families and care teams make early decisions.



Adult Day Centers

Adult Day Centers:

Adult Day Centers (ADCs) are community-based programs that provide supervised care, social activities, and supportive services for older adults and/or adults with disabilities during daytime hours. Participants attend the center during the day and return home in the evening.

Should be considered when seniors need social interaction, structured activities, or supervision during the day.

A caregiver needs respite or support.

“Bridge” between independent living and memory care.

Adult Day Centers: Key Benefits

- Reduces Isolation.
- Eliminates Safety Concerns.
- Provides structured activities and cognitive stimulation.
- Enhanced physical and mental wellbeing.
- Improves socialization and reduces isolation.
- Provides caregiver support and respite to reduce caregiver burnout.
- Cost-effective, affordable care option for those who need full time care.



Palliative Care

Palliative Care

Palliative care is specialized medical care that focuses on improving the quality of life of people with serious chronic illness.

Its goal is to relieve symptoms, pain, stress, and emotional or spiritual concerns—*regardless* of the diagnosis or stage of the illness.

Palliative care can be provided at any stage of a serious illness and alongside treatments intended to cure or control the disease.

It is not the same as hospice care.

Hospice care reserved for end of life and patients are no longer pursuing curative treatment.

Palliative Care



Symptom Management:

Pain

Shortness of breath

Nausea

Fatigue

Anxiety and depression

Sleep problems



Team support for both patients and families by helping with:

Understanding treatment options

Making medical decisions

Coordinating care

Emotional and practical support

Who Pays for Palliative Care?

- Medicare
- Medicaid
- Private health insurance
- Veterans benefits





Home Health Services

Home Health Care Services:

- Home health care is medical care provided in a person's home by licensed healthcare professionals.
- It is prescribed by a doctor or NP when someone needs skilled nursing care but does not need to stay in a hospital or nursing facility.



Who should receive home health care?

Recovering from
surgery or
hospitalization

Have a chronic
illness such as
heart failure or
diabetes

Need rehabilitation
after a stroke or
illness

Have mobility
limitations that
make it difficult to
travel for care

Unresolved
infections or
nursing needs with
complications

Home Health Care-Types of Services:



Skilled nursing care

- Wound care
- Medication management
- Monitoring health conditions
- Injections or IV therapy

Physical therapy

- Improving strength, balance, and mobility
- Recovery after surgery, injury, or illness

Home Health Care-Types of Services:

Occupational therapy

- Helping people perform daily activities such as bathing, dressing, and cooking

Speech-language therapy

- Assistance with communication or swallowing problems

Medical social services

- Counseling and connecting patients with community resources



When to consider Home Health Care?

- ❖ Following hospital discharge
- ❖ Following a skilled nursing facility discharge
- ❖ Multiple or repeated ER visits without admission
- ❖ Advised by Independent or Assisted Living facility of nursing need outside of the scope of care the community can provide.
- ❖ Medical Provider suggests Home Health Care



Home Health Care: Key Requirements



Patient must have
need for a skilled
nursing services
(RN, PT,OT, ST)



Patient must be
under the care and
supervision of MD
who approves of
Home Health Care
Services.



Patient is
“Homebound”



Patient agrees to
adhere to
homebound
requirements

Home health care vs. personal care

Home health care is different from non-medical personal care services:

- Medical services provided by licensed professionals.
- Requires a doctor's order.
- May be covered by Medicare, Medicaid, or insurance when eligibility requirements are met.
- Can be combined with Palliative Care.
 - *For example: Someone with advanced heart failure might receive both home health care and palliative care to help manage symptoms and improve comfort.*



Who Pays for Home Health Care?

- **Medicare – 100% Paid for Under Medicare Part A**
 - Medicare typically covers 100% Home Health Care under Medicare Part A
 - No DME equipment provided
- **Medicaid**
 - Coverage varies by state
- **Private health insurance**
 - Copays, deductibles, and network restrictions may apply.
- **Veterans' benefits**
 - The U.S. Department of Veterans Affairs provides home health care services to eligible veterans.
 - Agency must be contracted with Veterans Services.



Who decides which home health care company will provide services to patient?

The Patient has the right to Choose!

- **Patient's Right to Choose** refers to a patient's legal and ethical right to make informed decisions about their healthcare and ***Freedom*** to select among available healthcare providers, services, and treatment options.
- **Patients Right Choose their healthcare provider** (*such as a doctor, hospital, home health agency, hospice, or other qualified provider*) when options are available.
- **Informed consent:** *Healthcare professionals must provide enough information for patients to make voluntary decisions about their care.*

Patients have the right to understand their diagnosis, treatment options, and prognosis.



Hospice Care

Hospice Care:

- **Hospice care** is specialized care for people who have a serious illness and are approaching the end of life.

The focus is on comfort, quality of life, and symptom relief, rather than curing the illness.



What hospice care provides



Symptom
Management of pain,
shortness of breath,
nausea, and other
symptoms

Emotional and
psychological support
for the patient

Spiritual support, if
desired

Help with daily care
needs

Support, education,
and counseling for
family members and
caregivers

Bereavement support
for loved ones after
the patient's death

Who can receive Hospice Care?



Hospice is typically considered when a person's illness is no longer responding to curative treatment and a healthcare provider believes they may have **about six months or less to live** if the illness follows its expected course.



Focused on improving quality of life for the remaining 6 months.



Where is hospice care provided?

The patient's home

Nursing homes or assisted living facilities

Dedicated hospice centers

Hospitals

Who Pays for Hospice Care?

Medicare – 100% Paid for Under Medicare Part A

- ✓ DME equipment
- ✓ Medications related to hospice diagnosis
- ✓ Comfort medications
- ✓ Ancillary supplies

Medicaid

Private health insurance

Veterans' benefits



Common Hospice diagnosis:

COPD

CHF

Cancer

Pulmonary Disease

Renal Disease

Stroke or Coma

**Dementia
Alzheimer's**



Common Misconceptions:

- “Hospice means giving up.”
- "Hospice is only for the last few days of life.”
- "Hospice care only happens in a hospice facility.”
- "Hospice means stopping all medications.”
- "Hospice speeds up death.”
- "Hospice is only for cancer patients.”
- "Once you enter hospice, you can't change your mind.”
- "Hospice provides 24-hour bedside care."

Why do these misconceptions matter?

Because hospice is often started very late. Patients and families may miss out on months of symptom relief, support, and planning assistance.

Understanding what hospice *actually offers* can help people make informed decisions about end-of-life care.

Why is it important to understand home care options?

The more you know, the more informed you are...

- Knowing what home care options are available allows patients and families to select care that promotes safety, comfort, independence, and quality of life while ensuring that support is available when it is needed most.

Power of Choice in Health Care:

- Refers to a patient's ability and right to participate actively in decisions about their healthcare.
- Patient choice is a key part of patient-centered care and can lead to better satisfaction, understanding, and health outcomes.

Overall benefits of understanding home care options

- ✓ **Supports independence**
- ✓ **Improves quality of life**
- ✓ **Matches care to individual needs**
- ✓ **Helps with planning and budgeting**
- ✓ **Reduces caregiver stress**
- ✓ **Promotes safety**
- ✓ **May prevent unnecessary hospitalizations**
- ✓ **Supports informed healthcare decisions**

If you are making the choice to stay put ...

Patients and families should:

- Ask questions about risks, benefits, and alternatives.
- Understand the likely outcomes of different options.
- Share goals, concerns, and preferences with healthcare providers.
- Participate in decisions as much as they wish and are able.





Thank You