HOME HEALTHCARE

Supplementary Guidelines

Effective Date: August 27, 2024

Instructions for use

The following coverage policy applies to health benefit plans administered by Cigna. Coverage policies are intended to provide guidance in interpreting certain standard Cigna benefit plans and are used by medical directors and other health care professionals in making medical necessity and other coverage determinations. Please note the terms of a customer's particular benefit plan document may differ significantly from the standard benefit plans upon which these coverage policies are based. For example, a customer's benefit plan document may contain a specific exclusion related to a topic addressed in a coverage policy.

In the event of a conflict, a customer's benefit plan document always supersedes the information in the coverage policy. In the absence of federal or state coverage mandates, benefits are ultimately determined by the terms of the applicable benefit plan document. Coverage determinations in each specific instance require consideration of:

1. The terms of the applicable benefit plan document in effect on the date of service
2. Any applicable laws and regulations
3. Any relevant collateral source materials including coverage policies
4. The specific facts of the particular situation

Coverage policies relate exclusively to the administration of health benefit plans. Coverage policies are not recommendations for treatment and should never be used as treatment guidelines.

This evidence-based medical coverage policy has been developed by EviCore, Inc. Some information in this coverage policy may not apply to all benefit plans administered by Cigna.

These guidelines include procedures EviCore does not review for Cigna. Please refer to the **Cigna CPT code list** for the current list of high-tech imaging procedures that EviCore reviews for Cigna.

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Definitions and abbreviations

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Non-skilled Maintenance Care	Services not requiring assistance of a licensed nurse or therapist
Skilled Maintenance Care	Services required to maintain the individual's current condition or to prevent or slow deterioration of the individual's condition
Palliative Care	Care typically performed to manage or alleviate symptoms and does not provide corrective benefit to the condition

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Home Health Aide Visits

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- When non-skilled (not requiring assistance of licensed nurse or therapist) assistance is needed for personal care or other health-related services to maintain the individual's health or facilitate treatment, a Home Health Aide (HHA) referral is indicated if **all** of the following apply:
  - Non-skilled services will support a skilled treatment plan
  - There is documentation of significant functional limitations and **both**:
    - The individual is unable to perform the service independently
    - There is no caregiver available to provide supportive care or the individual will not allow the available caregiver to perform the needed care
  - There is an expectation that the individual's condition will improve significantly in a reasonable period of time

Initial services

Once criteria for home health aide referral has been satisfied, visit timing and frequency for initial services is guided based on the level of functional impairment.

- For **initial services** the following visits can be approved over a 2-week period:
  - 6 visits (12 hours) for an individual with minimal functional impairment documented by one or more of the following conditions:
    - Individual requires assistance with ADLs or IADLs
    - Individual ambulates with assistance of a person or device
    - Individual requires cognitive or communication assistance from a person or device
    - Incontinence of bowel or bladder one or more times per week
    - Individual requires some assistance with transfers
  - 10 visits (20 hours) for an individual with moderate functional impairment documented by two or more of the following conditions:
    - Individual requires assistance with ADLs or IADLs
    - Individual ambulates with assistance of a person or device
    - Individual requires cognitive or communication assistance from a person or device
    - Incontinence of bowel or bladder one or more times per week
    - Individual requires some assistance with transfers
  - 14 visits (28 hours) for an individual with maximal functional impairment documented by three or more of the following conditions:

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        - Individual requires total assistance with ADLs or IADLs
        - Bowel or bladder incontinence
        - Individual is non-ambulatory
        - Individual is non-communicating or unable to follow safety measures
        - Individual requires 1 or 2 people to assist with transfers
    - 28 visits (56 hours) for an individual without available caregiver support when there is maximal functional impairment documented by three or more of the following conditions:
        - Individual requires total assistance with ADLs or IADLs
        - Bowel or bladder incontinence
        - Individual is non-ambulatory
        - Individual is non-communicating or unable to follow safety measures
        - Individual requires 1 or 2 people to assist with transfers

Continued services

- Once criteria for home health aide referral has been satisfied, visit timing and frequency for continuing services is guided based on the level of functional impairment.
    - For **continued services** the following visits can be approved over a two-week period:
        - 5 visits (10 hours) for an individual with minimal functional impairment documented by one or more of the following conditions:
            - Individual requires assistance with ADLs or IADLs
            - Individual ambulates with assistance of a person or device
            - Individual requires cognitive or communication assistance from a person or device
            - Incontinence of bowel or bladder one or more times per week
            - Individual requires some assistance with transfers
        - 10 visits (20 hours) for an individual with moderate functional impairment documented by two or more of the following conditions:
            - Individual requires assistance with ADLs or IADLs
            - Individual ambulates with assistance of a person or device
            - Individual requires cognitive or communication assistance from a person or device
            - Incontinence of bowel or bladder one or more times per week
            - Individual requires some assistance with transfers
        - 14 visits (28 hours) for an individual with maximal functional impairment documented by three or more of the following conditions:

  - Individual requires total assistance with ADLs or IADLs
  - Bowel or bladder incontinence
  - Individual is non-ambulatory
  - Individual is non-communicating or unable to follow safety measures
  - Individual requires 1 or 2 people to assist with transfers
- 28 visits (56 hours) for an individual without available caregiver support when there is maximal functional impairment documented by three or more of the following conditions:
  - Individual requires total assistance with ADLs or IADLs
  - Bowel or bladder incontinence
  - Individual is non-ambulatory
  - Individual is non-communicating or unable to follow safety measures
  - Individual requires 1 or 2 people to assist with transfers

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Social Worker Visits

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For the purpose of this guideline, social service visits are considered to be medically necessary when there are social or emotional barriers to the effective medical treatment or rate of recovery of an individual and there is a plan of care defining intervention that requires services of a social worker in order to be performed safely and effectively.

Social Worker Visits

- An individual qualifies for two visits with a licensed social worker during a two-week period when both of the following apply
  - To qualify for home health care, the patient must be:
    - Confined to the home
    - Under the care of a physician
    - Receiving services with an established plan of care that is periodically reviewed by a physician
    - In need of skilled care on an intermittent basis by a nurse, physical therapist, or speech-language pathologist
    - In need of continued treatment by occupational therapy
  - There is a care plan establishing the required services for:
    - Evaluation of barriers to the individual's medical treatment or recovery due to:
      - home environment
      - financial resources
      - community resource needs
    - Assistance with obtaining community services
    - Assistance with long-term planning, durable power of attorney, or legal guardian
- Two visits with a licensed social worker during a two-week period can be approved for patient, family, or caregiver evaluation and intervention when
  - Previously established caregiver is no longer available
  - There is suspected or identified abuse or neglect
  - There is increased interpersonal conflict or other evidence of ineffective coping

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