

HOME HEALTH WORKSHEET

AETNA HEALTH PLANS PHONE: 888-622-7329

WWW.EVICORE.COM



Member Information:	
Name:	DOB:
Health Plan:	Member ID:
Address:	
Phone:	Alt Contact:

Ordering Provider Information:		Home Health Provider Information:	
Name:	NPI:	Name:	NPI:
Address:		Address:	
Phone:	Fax:	Phone:	Fax:
		Contact Person:	Phone/Ext.

Initial Home Health Checklist:	
Patient is homebound with documentation supporting homebound status	Clinical documentation Needed H&P, Progress Note, Therapy notes, most recent MD office notes, F2F documentation, OASIS, Evaluations, Most recent discipline notes
Is there a caregiver at home?	HH Orders: Signed orders from provider, 485, Supplemental orders
Patient should have seen the ordering MD within last 90 days for reason of HH admission. Patient has a following MD.	Disciplines Reviewed: We use substitute logic and review for specific codes that will cover other G codes for that discipline: <i>Nurse (G0299), PT (G0151), OT (G0152), ST (G0153), SW (G0155), HH Aide (G0156)</i>
Bundles for Real Time Approval: Bundles include services for nursing, therapies, Social Worker and HH Aides. Bundles are based on Primary HH Diagnosis and for Initial Requests only. Initial bundle is to get started when primary diagnosis is unspecified Choose One from dropdown Initial	Request for services if not choosing bundle: Approvals are for 30-day increments. Please include service and # of visits. Example: G0299 x6 1/1-1/30/2026