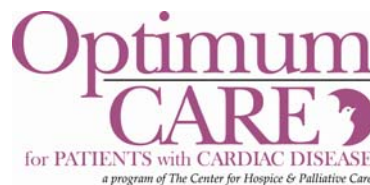


COMPARISON OF TRADITIONAL HOME HEALTH CARE SERVICES AND “OPTIMUM CARE”



SERVICE	TRADITIONAL HOME HEALTH CARE	OPTIMUM CARE FOR HEART OR LUNG PATIENTS
PHYSICIAN CONSULTATION IN THE HOME	Not available.	Available with approval of primary MD. Covered in full.
NURSING	Limited by skilled need & Medicare or MCO payor restrictions.	Patient need based: No limit by Medicare or MCO definition or by “skilled need” definition.
SOCIAL WORK	Limited by insurance. No reimbursement for Medicaid patients.	Provided for all patients. For patient and/or family need.
HOME HEALTH AIDE	Provided according to need; limited with some third party payors.	Provided according to need.
THERAPIES	Provided according to need.	Provided according to need. Does not require a rehabilitative or skilled criterion.
PASTORAL CARE	Not available.	Chaplain home visits, inpatient visits.
VOLUNTEER	Not available.	Home support & caregiver respite. Inpatient support.
BEREAVEMENT	Not available.	Counseling, support groups correspondence program for 13 months after patient death. Early, pre-death bereavement services.
MEDICATIONS	Not covered under CHHA.	Covered in full as part of care plan when related to terminal diagnosis.
IV MEDS, SUPPLIES	Nursing visits. Medicare & other insurance related to IV covered; IV drugs not covered by Medicare but covered by most other insurance’s; IV supplies generally covered.	Covered in full as part of care plan.
OXYGEN	80% Medicare; 20% patient copay and pulse ox reading of PO2 88%.	Covered in full as part of care plan. No pulse ox qualification.
SUPPLIES	Covered by Medicare and certain other insurances if meets guidelines of non-routine, medically necessary. May be subject to co-pays.	Covered in full as part of care plan.
MEDICAL EQUIPMENT	80% Medicare/ 20% patient copay.	Covered in full as part of care plan.
INPATIENT CARE	Not provided under CHHA, care plan ends.	Cover in full as per care plan, continuity of care.
RESPITE CARE	Not covered under CHHA.	Covered in full as per care plan, continuity of care.
CONTINUOUS CARE	Not covered under CHHA.	Covered in full as per care plan, continuity of care.

The American Heart Association and the American College of Cardiology recommend hospice care for the 260,000 people who die in the US annually of heart failure, but relatively few ever enter hospice. “Hospice Care for Heart Failure Patients” is the report of a national survey to “gain a better understanding of how hospices were caring for persons dying of heart failure.” (*Journal of Pain and Symptom Management*, 2005;29(5):525-528)

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