Understanding Homebound Status

For a patient to be eligible for Medicare coverage of home health services, the law requires that a physician certify in all cases that the patient is confined to his/her home. For the purposes of the statute, an individual shall be considered "confined to the home" (homebound") if the following two criteria are met:

1. Criteria-One:

The patient must either:

- Because of illness or injury, need the aid of supportive devices such as crutches, canes, wheelchairs, and walkers; the use of special transportation; or the assistance of another person in order to leave their place of residence

    OR

- Have a condition such that leaving his or her home is medically contraindicated.

If the patient meets one of the Criteria-One conditions, then the patient must ALSO meet two additional requirements defined in Criteria-Two below.

2. Criteria-Two:

- There must exist a normal inability to leave home;

    AND

- Leaving home must require a considerable and taxing effort.

If the patient does in fact leave the home, the patient may nevertheless be considered homebound if the absences from the home are infrequent or for periods of relatively short duration, or are attributable to the need to receive health care treatment.

Absences that, by law, do not count toward homebound status are:

- Attendance at a state licensed adult day care facility
- Church
- Absences for medical treatment

(Source: Medicare Benefit Policy Manual)
Medicare Definition of Confined to the Home (i.e., “homebound”)

The patient is considered homebound if the following two criteria are met:

1. The patient, because of illness or injury, needs the aid of supportive devices such as crutches, canes, wheelchairs, and walkers; requires the use of special transportation; or the assistance of another person in order to leave their place of residence; **OR** have a condition such that leaving his/her home is medically contraindicated,  

   **AND**

2. There must exist a normal inability to leave the home, **AND** if the patient does leave the home, it requires a considerable and taxing effort.

If the patient does in fact leave the home, the patient may nevertheless be considered homebound if the absences from the home are infrequent or for periods of relatively short duration, or are attributable to the need to receive health care treatment.