



Establishing a Separate Reimbursement Rate for Home Care Start of Services Assessments

Problem

Low funding levels for home care services are jeopardizing the sustainability of Minnesota's infrastructure of services for individuals who need and want health and long-term care services delivered in their homes. The current funding system does not support the long-term viability of home care services that are proven to be cost effective, high quality, and preferred by the individuals served.

Specifically, one of the barriers to increased access to home care services is the expense of the "start of services assessment." The current reimbursement rate for this assessment does not cover the total cost of providing this initial assessment. When a physician orders home health care for a client, an RN or appropriate therapist must go to the individual's home to do a start of services assessment. This includes a full assessment (physical evaluation, health history, education on the Patient Bill of rights and other required documentation, review of healthcare directive or other advance planning documentation, and more), development of the plan of care, and completion of admission paperwork. This process takes several hours. Under the current payment structure, these start of services assessment visits are reimbursed at the same rate as a typical shorter home care visit. This leaves home care providers having to struggle to figure out how to absorb the cost differential between the cost of providing a quality start of care assessment visit and the lower reimbursement rate for this service.

Solution

Allowing for the currently-provided start of services assessment to have its own reimbursement rate, separate from the rate for a typical home care visit, will increase the sustainability for home care services. This separate rate, which would be more reflective of the actual cost of providing this assessment, will increase the sustainability of our home care payment rate system. This more viable home care payment rate system will, in turn, support more Minnesotans to access home care services and live as independently as possible, for as long as possible, while avoiding more costly institutional settings.

Support SF 358/HF 1913 (Senators Relph, Hayden, Hoffman, Representatives Noor, Schomacker), which will establish a separate reimbursement rate for start of services assessments.

Mission: MHCA represents and supports Minnesota home care providers committed to high quality home care services.

Vision: MHCA will shape the home care landscape to improve and sustain quality care services.

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