

Homebound Status Assessment



PATIENT NAME: _____

DOCTOR'S NAME: _____

DATE: _____

To be eligible to receive home health care services your doctor must certify that you are homebound, which means you have a normal inability to leave home. However, being homebound does not require you to be bed-bound, and there are some absences from home that Medicare says are permissible without disqualifying your homebound status.

Please complete this assessment to help your doctor determine if you qualify for home health care.

1. Do you require the assistance of another person to leave the home?	<input type="radio"/> Yes	<input type="radio"/> No
2. Do you require the assistance of another person in order to get into an automobile?	<input type="radio"/> Yes	<input type="radio"/> No
3. Do you use a walking device such as a walker, cane or wheelchair?	<input type="radio"/> Yes	<input type="radio"/> No
4. Do you experience shortness of breath when you walk?	<input type="radio"/> Yes	<input type="radio"/> No
5. Are you required to use oxygen?	<input type="radio"/> Yes	<input type="radio"/> No
6. How often do you leave your home?	<input type="radio"/> Infrequently	<input type="radio"/> Frequently
7. Are your trips from home typically for long or short periods of time?	<input type="radio"/> Short <input type="radio"/> I do not leave home	<input type="radio"/> Long
8. Do you have a medical condition that prevents you from leaving your home?	<input type="radio"/> Yes	<input type="radio"/> No
9. Do you leave home for reasons other than: <i>a. Medical treatment</i> <i>b. To attend religious services</i> <i>c. To go to the barber to beauty salon</i> <i>d. To attend a unique family function or special occasion</i>	<input type="radio"/> Yes (How often?) <input type="radio"/> Daily <input type="radio"/> Weekly <input type="radio"/> Monthly	<input type="radio"/> No
10. When you leave home, how would you rate the effort you are required to expend in order to leave?	<input type="radio"/> Considerable and taxing effort	<input type="radio"/> Minimal Effort <input type="radio"/> Moderate Effort