

# Insurance Matters - Medicare

## Patient Handout

### UNDERSTANDING MY MEDICARE BENEFITS FOR THERAPY

You can get therapy services in your home or in an outpatient setting. The best setting for you depends on your needs.

**Home Health Therapy** is for patients who are homebound and in need of therapy. The types of therapy you can get are physical therapy, occupational therapy, and speech therapy.

**Outpatient Therapy** is physical, occupational, and/or speech therapies done in an office-based setting. Sometimes this office is located within a hospital or in a doctor's office. It is the same type of therapy that is provided at home, but outpatient therapy is for people who are safe to leave their homes.

**Durable Medical Equipment (DME)** is long-lasting equipment that people use in their home and community for medical reasons. DME is provided by equipment suppliers after your doctor writes a prescription for you. You may need something like a cane, walker, or wheelchair to be safe getting around and caring for yourself.

### MY MEDICARE BENEFITS FOR HOME HEALTH THERAPY

**Medicare Part A** covers all of the costs of home health therapy if your doctor orders therapy and determines you are homebound. The therapist will decide the number of visits you need based on your problems and goals.

If you are no longer homebound but still need therapy services, you can get these services in an outpatient setting. This care is covered by Medicare Part B.

### MY MEDICARE BENEFITS FOR OUTPATIENT THERAPY

Outpatient therapy is covered by Medicare Part B. Your doctor must order/prescribe outpatient therapy for Medicare to pay for outpatient therapy.

Medicare will pay 80% of the cost of therapy services up to a certain amount (see below). You will be responsible for the other 20% of the cost either through supplemental insurance (if you have this) or by paying out-of-pocket.

For 2019, Medicare will pay the following for therapy services:

- \$2,040 for PT and speech-language pathology (SLP) services combined
- \$2,040 for occupational therapy services
- If you have reached the limit, and you still need therapy services, your therapist can submit a request to have Medicare pay for more services.



If you are in a **Medicare Advantage** plan (for example, an HMO, PPO provided by a private insurer), your coverage for outpatient therapy services may be different. You should talk to your insurance provider to find out about your benefits.

### **Other Considerations for Outpatient Therapy**

- When you are deciding where to go for outpatient therapy, think about convenience (distance from home, ease of getting into the office).
- If you have Medicare Advantage, your plan may help pay for things like an exercise class or gym membership.

Durable medical equipment (DME) is covered by Medicare Part B. Your doctor must prescribe the equipment for Medicare to pay for it.

## **MY MEDICARE BENEFITS FOR DURABLE MEDICAL EQUIPMENT**

Medicare will only cover the cost of durable medical equipment purchased from a supplier enrolled in Medicare.

Medicare will only pay for DME every so often (usually every 5 years), so be sure to keep what you get in good repair and don't give it away or lose it.

Durable Medical Equipment Covered by Medicare Includes (but is not limited to):

- Canes, walkers, crutches
- Manual wheelchairs and powered mobility devices
- Oxygen equipment and accessories
- Patient lifts
- Commode (toilet) chairs
- Hospital beds

### **Other Considerations for Durable Medical Equipment**

- Shower seats are not covered by Medicare.
- Community service organizations and/or churches may have equipment that you can get for free or at a reduced cost.
- You may want to rent the equipment instead of buying it, depending on your needs

