



Home **Helpers**®

**2022 Florida
Home Care
Guide**

Making *Life Easier*®
for families to
navigate home care
options in Florida

Jonathan Marsh
*Owner, Senior Home Safety Specialist
Certified Dementia Practitioner*

The Florida Home Care Guide is free to download:

[https://www.homehelpershomecare.com/bradenton/resources/free-guides/2022-florida-home-care-guide-online-version-/](https://www.homehelpershomecare.com/bradenton/resources/free-guides/2022-florida-home-care-guide-online-version/)



This guide is dedicated to my Grandmother Leola and Cousin Risa.

*I watched as my grandmother went from living independently
to needing my cousin to provide full-time care.*

*These two strong women and role models in my life struggled with
their changing roles and bravely overcame many challenges. It is
from them that my passion for caretaking
and commitment to providing the best care possible was inspired.*

May they both Rest in Peace.

Contents

Purpose of this Guide	1
What is Home Care	1
Home Care vs. Home Health Care	2
Home Care	3
Home Health Care.....	4
A Comparison of Home Care Provider Types	5
Type of Provider & Licensing.....	6
Employees or Contractors.....	7
Non-Medical Services Provided.....	8
Screening.....	8
Liability Insurance and Workers' Compensation.....	9
Florida Home Care Provider Types At A Glance	10-11
Training	12
Supervision.....	12
Scheduling and Backup	13
Discipline	13
Payroll.....	14
Consideration: Homemaker and Companion Services Providers.....	14
Consideration: Comparing Costs Across the Types of Providers	15
Questions to Ask When Selecting a Home Care Provider	16
Home Care Costs	17
How to Pay for Home Care	18
Medicare May Pay for Home Care When Receiving Skilled Care	18
Private Pay Options	19
Savings	19
Long-term Care Insurance	19
Other Options.....	19
County Programs.....	19
Federal & State Programs	20
VA Benefits	20
VA Aid and Attendance Pension Benefit	20
VA Health Care System Enrollees	20
Medicaid.....	20
Statewide Medicaid Managed Care (SMMC)	21
Home and Community-Based Services (HCBS) Waiver Programs	21
Take Time to Find the Right Home Care Provider	21
About the Author: Jonathan Marsh, Owner of Home Helpers of Bradenton	22
Glossary of Terms	23

Purpose of this Guide

If you are reading this guide, you probably have a current need for home care for yourself or a loved one, or you are planning for the future. Those who can benefit from home care include:

- Older individuals
- Individuals suffering from a chronic disease or illness such as cancer or Alzheimer's disease
- Individuals with disabilities
- Individuals recovering from surgery, illness, or injury
- New and expectant mothers who need extra help
- Family caregivers that need relief



When searching for home care, it's important that you find the best care for you or your loved one. In Florida, that search can be overwhelming, given all the available options.

This guide helps families navigate the landscape of home care in Florida. Let us help you better understand each option.

What Is Home Care?

When searching for home care, you may find that a lot of the terminology can be confusing. You may hear terms such as *private duty home care*, *in-home care*, *senior home care*, *senior care*, *elder care*, *elderly care*, *Alzheimer's care*, *dementia care*, *Parkinson's care*, *non-medical home care*, *respite care*, and many others. Some of these terms specifically describe home care; others are broader terms that apply to a wide variety of care and in various settings.

Home care is essentially support, or non-medical care services provided in the home. Care may also be provided at another location where the client is living (for example, in a skilled nursing facility). Home care can be easily broken down into two simple categories: "Hands-Off" and "Hands-On" services. See Figure 1 on page 2 for more information.

The "Hands-Off" category of home care includes homemaker and companion services. These services are sometimes referred to as assistance with instrumental ADLs (Activities of Daily Living) or the complex skills that are required to live independently. Examples of these services are:

- Companionship
- Meal preparation
- Light housekeeping/basic home maintenance
- Laundry
- Grocery shopping
- Medication reminders
- Transportation

Personal care services are part of the “Hands-On” category. These services are commonly referred to as assistance with basic ADLs and include:

- Bathing
- Dressing
- Feeding/eating
- Transferring/ambulation/mobility (e.g., moving from a wheelchair to the bed)
- Toileting
- Maintaining continence
- Assistance with taking medications

<ul style="list-style-type: none"> • Companionship • Light Housekeeping • Grocery Shopping • Medication Reminders 	<ul style="list-style-type: none"> • Meal Preparation • Laundry • Transportation 	<ul style="list-style-type: none"> • Bathing • Dressing • Feeding/Eating • Assistance w/Taking Medications 	<ul style="list-style-type: none"> • Toileting • Continence • Transferring/Ambulation
“Hands-off”		“Hands-on”	
Homemaker/Companion Care Assistance with Instrumental ADLs		Personal Care Assistance with Basic ADLs	

Figure 1

Home Care vs. Home Health Care

Figure 2 shows an easy way to distinguish between home care and home health care. Though they are different in terms of the services offered, both types of care have a significant impact on the client’s long-term quality of life.

HOME CARE	HOME HEALTH CARE
<ul style="list-style-type: none"> • Homemakers • Companions • Home Health Aides • Short-term or Long-term 	<ul style="list-style-type: none"> • Registered Nurses • Physical Therapists • Occupational Therapists • Short-term
“Unskilled” Services	“Skilled Services”

Figure 2

Home Care

Home care is about maintaining a person's independence and quality of life in their home or wherever they reside at the current time. In other words, home care services can be rendered in-home or in other locations such as independent and assisted living communities, skilled nursing/rehab facilities, or hospitals. These services are performed by caregivers, commonly referred to as homemakers, companions, and home health aides. A good term for this type of care is supportive care, where services such as companionship, meal preparation, light housekeeping, bathing, assistance with taking medications, and help with transferring and toileting are possible services provided. These services are typically covered by personal savings, long-term care insurance policies, VA benefits, Medicaid, and county programs. Most health insurance plans do not cover these types of services. Medicare may pay for some part-time or intermittent hands-on personal care but only when home health care (skilled care) is being received. See “Medicare May Pay for Home Care When Receiving Skilled Care” on page 18 for more information.



As noted earlier, some examples of individuals that may require home care are as follows:

- Older individuals
- Individuals suffering from a chronic disease or illness such as cancer or Alzheimer's disease
- Individuals with disabilities
- Individuals recovering from surgery, illness or injury
- New and expectant mothers who need extra help
- Family caregivers that need relief

Home care often will vary in terms of duration. When compared to home health care, the length of time that care is provided is not as rigid or fixed. Home care may remain in place for the duration of time the client requires care, for a duration of time to allow adequate relief for a family caregiver, for the duration of time the client is healthy enough to remain at home, etc.

Home Health Care

In contrast, home health care is skilled care administered by medical professionals such as registered nurses, physical therapists, and occupational therapists. Examples of services provided by a home health care provider are:

- Physical, speech, and occupational therapy services
- Wound care and changing dressings
- Injections
- Catheter changes
- Tube feedings
- Medication administration

This type of care generally requires a doctor's order and can be paid for by Medicare and other insurance providers. A general rule: When you see verbiage in a health insurance policy that states that home health care is covered, the insurance policy is referring to this type of care (“skilled care”). There are very few exceptions to this rule.

Examples of someone who would need home health care are a person who had an injury related to a recent fall or an individual who recently had surgery. In these situations, a doctor may order both physical therapy and occupational therapy to be administered in the home.

Home health care is for finite short-term care and will focus on very specific tasks, largely because of the way Medicare and other insurances work.



A Comparison of Home Care Provider Types

When selecting a home care provider, you must think about the level of care you or your loved one needs, cost, and how much liability you are willing to take on related to the person who will provide the care. For example, would you prefer to hire a provider that will handle all HR (Human Resources) responsibilities, payroll, supervision, and scheduling of the people taking care of you or your loved one? Or would you rather handle some or all those functions on your own? In addition, would you rather allow an organization to handle all legal responsibilities? Or would you prefer to handle those on your own? This section will help to guide you in this area.

Cost comparison considerations are discussed in more detail at the end of this section.



Comparison of Home Care Provider Types

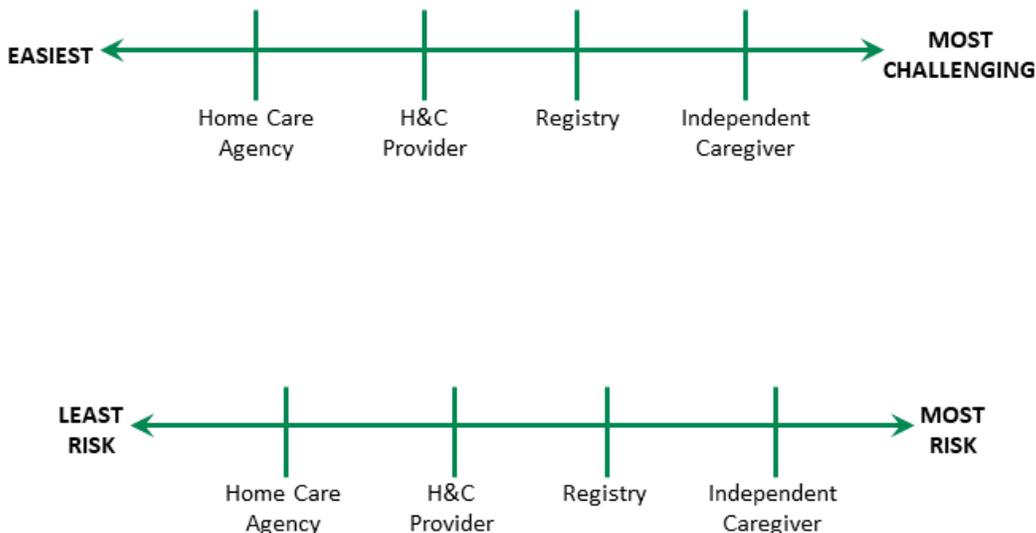


Figure 3

Type of Provider & Licensing

When you first begin your search for care, home care providers may appear to all be the same. However, state regulations specify the different levels of service they may offer. Florida's Agency for Health Care Administration (AHCA) requires that a license or registration number be documented on all marketing materials for the provider, including website, business cards, brochures, and other marketing or printed materials. This makes it easy for you, the client, to clearly identify the type of provider. Here's how those numbers differ based on the type of provider:



- **Home Care Agencies:** The license number will be nine digits in length, often prefixed with “HHA”. For example, HHA#299995555.
Important: In Florida, a home care agency is licensed as a “Home Health Agency” that offers only unskilled care in the home. Do not let this confuse you. For the sake of industry standard terminology, unskilled care in the home is simply referred to as “home care”.
- **Homemaker and Companion Services Providers:** These providers are not “licensed.” Rather they are “registered” with the State of Florida to be able to provide homemaker and companion services. The registration number will be six digits in length and is often prefixed with “HCS”. For example, HCS#234555.
- **Registries:** The license number will be eight digits in length and is often prefixed with “NR”. For example, NR#30215555.
Important: In Florida, a registry that provides home care (and possibly skilled services) is licensed as a “Nurse Registry”. For the sake of industry standard terminology, we will refer to this type of provider in Florida as simply a “registry”.
- **Independent Caregivers:** These individuals may or may not have individual licensing with the state. For example, CNA license, LPN license, RN license, etc.

To find out more about the difference between the types of providers listed above, see “Florida Home Care Provider Types At A Glance” on pages 10 and 11.

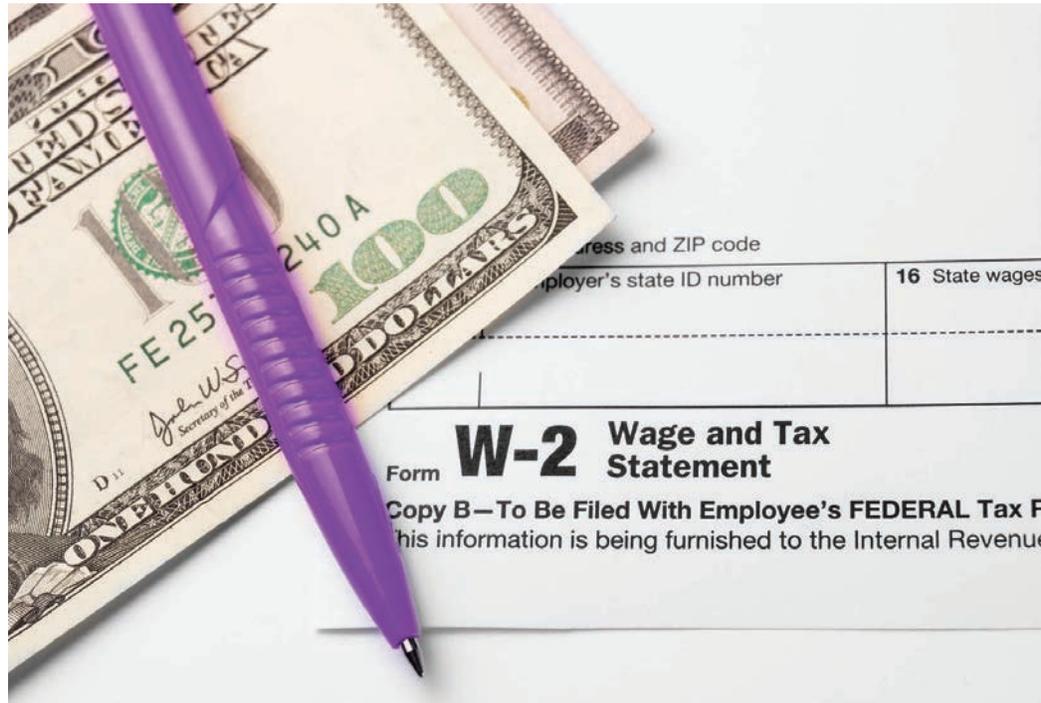
Employees or Contractors

Whether a provider hires employees or contractors, there are legal ramifications for both the provider and the employee or contractor.

The Internal Revenue Service (IRS) and the Department of Labor (DOL) differentiate between employees and contractors using a number of factors. These factors limit the nature of the relationship a provider may have with contractors as well as the degree of control the provider has over them.

For home care clients, the factors identified by the IRS and DOL set the stage for significant differences when working with providers that hire employees versus those that hire contractors.

The burden that the client is willing to assume in areas such as supervision and scheduling, payroll and tax liability, insurance, and training will impact the decision on the type of provider selected.



Employees

A home care agency generally hires all W-2 employees. A homemaker and companion services provider generally does as well. When hiring employees, these providers generally have robust screening processes, handle all supervision and scheduling, handle payroll and tax withholdings, have insurance, and provide training. More information is provided later in this section.

Contractors

For a registry, ALL direct care personnel are contractors, as required by law. Registries typically have a limited screening process, very limited oversight of their caregivers, do not pay any payroll taxes, do not have insurance, and do not provide training. Often, the registry exists to make the referral to you and the relationship ends after the referral is made. However, this is not always the case. *Check with the registry to understand how the referral works and what the parameters are of the subsequent relationship.*

Independent caregivers are contractors. Therefore, all responsibilities such as recruitment, screening, supervision, scheduling, processing payroll, paying taxes for caregivers, and acquiring insurance coverage to pay for medical bills and disability (if the caregiver is injured in the home) **are the responsibility of the client.** This can all be a significant burden, as the home care client now must handle all aspects of running a business.

Non-Medical Services Provided



A home care agency can provide homemaker and companion care as well as personal care.

A homemaker and companion services provider is limited to only homemaker and companion care. No personal care—otherwise known as “hands-on care”—is permitted.

A registry, through their contractors, can provide homemaker and companion care as well as personal care. The registry will refer you to a contractor who has the correct qualifications depending on the level of care that is required.

An independent caregiver’s qualifications may vary. The client must verify the qualifications or the capability of the caregiver. Independent caregivers often provide care without any formal qualifications or training and with limited to no experience. According to AHCA, “hands-on care” (also known as “personal care”) can only be performed by individuals with the required certification or professional license, such as home health aides and certified nursing assistants. An individual is not entitled to perform these services without the required qualifications.

Screening

When hiring employees, both the home care agency and homemaker and companion services providers perform background screening, check references, and verify previous employment. Additional screening measures may also take place and are reviewed, such as drug screening, motor vehicle history reports, and auto insurance verification.

With registries, screening is limited and will vary. In Florida, registries are required to ensure a valid background screening and to verify qualifications of the contractor (for example, home health aide training or a CNA license). Check with the registry to understand their screening process.

For independent caregivers, all screening is done by the client. The cost, both in time and money, is the responsibility of the client.

Important: At a minimum, and as required by law, home care agencies, homemaker and companion services providers, and registries are all required to verify background screening results processed by the Background Screening Unit at the Florida AHCA. The background screening is a state and national fingerprint-based criminal history check used by the Background Screening Unit to decide on eligibility or ineligibility to provide services to children, the elderly, and disabled individuals. Background screening results are available to providers licensed or registered through AHCA in what is called the “Care Provider Background Screening Clearinghouse” or more commonly known as the “AHCA Clearinghouse”.

Liability Insurance and Worker's Compensation

Given the nature of caregiving in the home, home care providers are at risk of injury. *According to the Occupational Safety and Health Administration (OSHA), home care providers “have little control over their work environment which may contain a number of safety and health hazards. These hazards include bloodborne pathogens and biological hazards, latex sensitivity, ergonomic hazards from patient lifting, violence, hostile animals and unhygienic and dangerous conditions. In addition, if their daily work schedule requires them to provide care for multiple patients, they face hazards on the road as they drive from home to home.” “The most common injuries to home healthcare workers are sprains, strains, and other musculoskeletal injuries related to lifting and moving patients.”*



You must consider what would happen if a caregiver is injured while working in your home and who would be responsible for any type of medical bills. In most cases, your homeowner's insurance policy will not cover employees working in the home, especially non-legal employees (i.e., those with no taxes being withheld). This puts you at risk if you have taken the position of an employer with services provided through a registry or an independent caregiver.

Home care agencies have insurance for property damage and loss, and cover the employee in case of workplace injury. More specifically, they maintain general liability insurance, employment practice liability insurance, non-owned automobile coverage, crime bond, and workers' compensation insurance.

Homemaker and companion services providers are not required by the state to carry liability insurance. However, they likely have workers' compensation coverage. Check with the homemaker and companion services provider to understand what insurance coverages they have in place. ***Important: Employers in Florida engaged in non-construction work with four or more employees are required to have workers' compensation coverage.***

With registries, generally no insurance is in place to cover their workers. In rare cases, the contractors with the registry will purchase their own insurance.

Independent caregivers generally do not have their own insurance coverage.

FLORIDA HOME CARE PROVIDER TYPES AT A GLANCE

	Home Care Agency	Homemaker & Companion Services Provider
Type of Care Provider	<ul style="list-style-type: none"> License number will be 9-digits. License number is usually prefixed with “HHA” (e.g. HHA#299995555). 	<ul style="list-style-type: none"> A provider is not licensed. They are “registered” with the state. A registration number will be 6-digits. A registration number is usually prefixed with “HCS” (e.g. HCS#234555).
Employees or Contractors?	Employees	
Non-medical Service Provided	<ul style="list-style-type: none"> Homemaker and companion care Personal care 	<ul style="list-style-type: none"> Homemaker and companion care ONLY No person care (“hands-on”) care is permitted.
Screening	When hiring employees, these providers ensure background screening, check references, and verify prior employment. Additional screening measures often are executed and reviewed, such as drug screening, motor vehicle history reports, and auto insurance. Also, with agencies, verification of state-required training/licensing upon hire and throughout employment is performed (e.g. home health aide training, CNA license, CPR training, and HIV training).	
Liability Insurance & Workers’ Compensation	Have both liability insurance and Workers’ Compensation insurance.	Varies. Not required by law to have liability insurance. Check with the provider.
Training	<ul style="list-style-type: none"> Ensures ongoing training required by the state such as Alzheimer’s training. Many have additional training standards that employees must meet throughout employment. 	No minimum standards required by the state. Therefore, training may be limited. Check with the individual service provider.
Supervision	<ul style="list-style-type: none"> Registered Nurse on staff to assist with supervision. Ongoing supervision of staff by agency personnel to ensure the quality of work and adherence to provider policies. 	Ongoing supervision of staff by provider personnel to ensure the quality of work and adherence to provider policies.
Scheduling & Backup	Handles all scheduling. If a scheduled caregiver is unavailable, a substitute/backup caregiver will be sent.	
Discipline	<ul style="list-style-type: none"> Employees are disciplined by administrative staff if not meeting required standard of work. If an employee is not meeting expectations, another caregiver can be sent. Terminations are handled by provider. 	
Payroll	All payroll processing and payment of taxes are handled by the provider.	

FLORIDA HOME CARE PROVIDER TYPES AT A GLANCE

	Registry	Independent Caregiver
Type of Care Provider	<ul style="list-style-type: none"> License number will be 8-digits. License number is usually prefixed with “NR” (e.g. NR#30215555). 	<ul style="list-style-type: none"> N/A. Individual caregivers may or may not have individual licensing with the state (e.g. CAN license, RN license, etc.).
Employees or Contractors?	Contractors; a registry refers contractors to clients.	Contractors; all recruitment of caregivers is the responsibility of the client.
Non-medical Service Provided	<ul style="list-style-type: none"> Homemaker and companion care Personal care 	<ul style="list-style-type: none"> Homemaker and companion care Personal care <p>Note: The client must verify the qualifications/capability of the caregiver.</p>
Screening	Limited and varies. In Florida, registries are required to ensure background screening and to verify qualifications (e.g. home health aide training or CAN license). Check with the registry to ensure understanding of screening processes.	All screening is done by the client.
Liability Insurance & Workers’ Compensation	No liability insurance or Workers’ Compensation insurance.	No liability insurance or Workers’ Compensation insurance.
Training	None provided.	None. Any training is the responsibility of the client.
Supervision	The client must monitor the quality of work.	The client must monitor the quality of work.
Scheduling & Backup	Limited to none. Typically, the relationship with the client ends or is minimal after the referral is made.	None. The client is responsible for all scheduling.
Discipline	<ul style="list-style-type: none"> Disciplining of caregiver is done by the client who must also handle terminations. The client will need to work with the registry which will refer another qualified caregiver. 	<ul style="list-style-type: none"> Disciplining of caregiver is done by the client who must also handle terminations. The client will then need to recruit a replacement caregiver.
Payroll	<ul style="list-style-type: none"> Varies. No payment of taxes by the registry. Some registries require the family to pay the caregiver directly which makes client responsible for paying withholding taxes. Some registries process payroll, requiring the contractor to ensure all taxes are paid. 	Family to pay the caregiver directly which also makes the family responsible for paying taxes.

Training

A home care agency will verify state-required training or licensing upon hire and throughout employment. Many times, an agency will have higher training standards than required by the state. Employees must meet these standards throughout their term of employment.



With a homemaker and companion services provider, training may be limited. There are generally no set training standards required by the state. Check with the individual service provider for more information on the training they provide.

Examples of training that a provider may verify or conduct as part of their own training curriculum are:

- HIV/AIDS training
- Alzheimer's & dementia training
- CPR training
- Homemaker and companion care skills
- Home health aide/personal care skills

These types of training help employees become better prepared to meet the challenges encountered in home care.

A registry will verify required training and qualifications for licensing prior to referring to a client, but the relationship with the registry stops there in terms of training. Ongoing training is not provided by a registry.

With independent caregivers, there may or may not have been any prior training. Any training during their employment will be the responsibility of the caregiver or the client.

Supervision

Home care agencies and homemaker and companion services providers will ensure a certain standard is met on the job, often above and beyond what the state requires. With home care agencies and homemaker and companion services providers, ongoing supervision of caregivers by agency personnel is in place to ensure the quality of work and adherence to agency policies. However, an important distinction is that the home care agency, by law, has at least one registered nurse on staff to assist with supervision. A homemaker and companion services provider is not required to have a registered nurse on staff.

Registries, by law have limited to no oversight of their independent contractors. The client monitors the quality of work. When an independent caregiver is hired, the client also must monitor the quality of work.

Important: When working with contractors, the client essentially becomes the employer and is subject to all federal and state workplace laws.

Scheduling and Backup

With a home care agency as well as a homemaker and companion services provider, all scheduling is handled by the administrative staff. If the scheduled caregiver is for some reason unavailable, a qualified substitute caregiver will be sent.

With a registry, there is limited to no involvement in scheduling. More specifically, registries, by law, cannot dictate schedules or methods to contractors. Typically, the scheduling is coordinated by the client, as the relationship the client has with the registry is minimal after the referral of the independent contractor is completed.

All scheduling is the responsibility of the client when working with an independent contractor.

When working with contractors, whether it be through a registry or directly with an independent caregiver, consider what you will need to do if the caregiver cannot make a shift. In some cases, you may know of the caregiver's absence well in advance of the shift. However, in other cases (e.g., sickness, personal emergency) the inability to make a shift is communicated by the caregiver at the last minute. Will a family member or friend be available to provide care during the caregiver's absence? Will this have an impact on the family member's employment or ability to attend other activities?



Discipline

Home care agency or homemaker and companion services provider employees are disciplined by administrative staff if they are not meeting the required standards of work. If the employee is not meeting expectations, another caregiver can be sent in their place. If necessary, terminations are handled by the provider.

Contractor caregivers are disciplined by the client, whether through a registry or hired directly. The client also must handle terminations or ask the caregiver to not return, which can be a difficult conversation. If the caregiver has been provided by a registry, the client will need to work with them again to have another qualified caregiver referred. If the client has hired an independent contractor, the client will need to invest additional time and perhaps financial resources to recruit and interview more caregivers. This may result in a gap in the delivery of care.

Give some thought to how comfortable you are with disciplining employees involved in home care before choosing a provider.

Payroll

All payroll processing and payment of taxes are handled by home care agencies. This includes federal and state taxes, Social Security, Medicare, and unemployment. Typically, the same is true for homemaker and companion services providers.



By law, registries cannot pay taxes for contractors. Some registries require the family to pay the caregiver directly which also makes the client responsible for paying withholding taxes. Some registries will process payroll, requiring the contractor to ensure that all taxes are paid. When taxes are not paid by the employer, the situation can open the door to confusion on the part of the contractor regarding how much is owed and when and who is responsible. This situation has the potential to embroil the family in a dispute over the matter.

When employing an independent contractor, the client is the employer and is legally responsible for paying taxes in a timely and accurate manner. Most home care clients do not know or understand all details involved with payroll. However, that does not decrease their liability or responsibility.

Consideration: Homemaker and Companion Services Providers

An important consideration with homemaker and companion services providers is continuity of care. Even though the needs of you or your family member may be limited to homemaker and companion services at this time, the needs generally progress in the future. For instance, your loved one may have early onset Alzheimer's disease that later advances and will require additional care. In this situation, if personal care is required in the future, you will have to find a new provider.

Consideration: Comparing Costs Across the Types of Providers

In general, you should expect that a home care agency that provides multiple services such as HR, scheduling, training, payroll, and insurance would be priced higher for caregiving services than a caregiver referred through a registry or an independent caregiver. If you select a caregiver through a registry or if you select an independent caregiver, there should be significant cost savings given the burden you will assume related to HR, scheduling, liability, and other factors.

TIP: Do some research by calling several providers in the area. In general, the pricing should be comparable based on the provider type (i.e., home care agency, homemaker and companion services providers, or registry). If a caregiver referred through a registry is priced at or near the average price for a caregiver through an agency, the price is probably too high. In contrast, if the cost for a caregiver through an agency is similar to that of a registry, the price is probably too low and you should be concerned about the quality of services provided. Use our checklist on page 16, “Questions to Ask When Selecting a Home Care Provider,” to help guide your selection.

Ensure all aspects identified in this section are considered when you compare costs:

- As the employer of an independent caregiver or a caregiver referred through a registry, you must consider the cost associated with recruitment, screening, etc.
- As the employer of an independent caregiver or a caregiver referred through a registry, you may be responsible for payroll processing and paying the applicable withholding taxes. You may choose to do so yourself or hire an accountant, both of which will result in additional time and cost.
- As an employer of an independent caregiver or a caregiver referred through a registry, you must consider the cost related to scheduling as well as planning for backup caregivers. If the caregiver is unavailable on a given day, is a family member going to have to fill-in to provide care? Will this affect their ability to go to work or other activities?
- As an employer of an independent caregiver or a caregiver referred through a registry, if the caregiver is injured in the home, you may have to handle the bill for disability and medical expenses.



Questions to Ask When Selecting a Home Care Provider

When selecting a home care provider, it is important to understand the implications of your decision. Use the cheat sheet below to help guide you through the process. The chart allows you to compare three different home care providers.

Question	Provider 1	Provider 2	Provider 3	Notes
What type of provider are they (Home Care Agency, Homemaker and Companion Services Provider, Registry, or Independent Caregiver)?				
Are all individuals who provide direct care employees with taxes withheld as opposed to contractors? If contractors, who is responsible for taxes?				
Does the provider have liability insurance and Workers' Compensation coverage for all individuals providing direct care? Ask for proof.				
Does the provider do background screening on all direct care employees? <i>*At a minimum, agencies, homemaker and companion services providers, and registries should include the background screening processed by the Background Screening Unit at the Agency for Healthcare Administration (AHCA). Ask for more information about screening before hiring and throughout employment.</i>				
Does the provider have a drug testing policy for both illegal and prescription drugs?				
Do I have direct contact with the owner of the business?				
Can my service and my schedule be modified at any time to meet my needs?				
Does the provider have 24/7 live phone access in case of emergencies or questions?				
Can I pay for services via credit card, ACH, or check?				
Does the provider follow up on the level of care and service the client is receiving? Ask for specifics.				
Does the provider have ongoing training for their caregivers?				

Home Care Costs

In general, the industry standard is to price the cost of care for home care at an hourly rate.

Genworth 2015 Cost of Care Survey for Florida

When considering home care in the State of Florida, the best report available is the Genworth 2015 Cost of Care Survey for Florida. In that report, you will find ranges and averages for the cost of home care, assisted living, and independent living. This will give you a good idea of hourly pricing for home care in Florida in general or for a specific region in Florida. In some areas of Florida, care will be more expensive compared to other areas of the state. It's important to look at the costs specific to where you live. Also, be aware that pricing has increased since the report was originally published. When we contacted Genworth, 2015 was the last year their organization published a cost of care report for the State of Florida.



This report can be found by entering the URL below or by entering the words “Genworth 2015 Cost of Care Survey Florida” in a search engine such as Google or Bing.

https://www.genworth.com/dam/Americas/US/PDFs/Consumer/corporate/cost-of-care/118928FL_040115_gnw.pdf

Genworth Long-Term Care Cost – Online Tool

Genworth also has an online tool to estimate the cost of care. This online tool uses more current data than the report referenced above and will help you look at ranges of pricing across the United States, across a specific state, or for a specific region. It gives a monthly cost, based on the assumption of 44 hours of care per week on a regular basis. Unfortunately, however, the tool does not give pricing on an hourly basis.

This online tool can be found by entering the URL below or by entering the words “Genworth Long-Term Care Cost” in a search engine such as Google or Bing.

<https://www.genworth.com/about-us/industry-expertise/cost-of-care.html>

How to Pay for Home Care

There are multiple sources to pay for home care. Home care providers will differ in terms of what sources of payment they can or will accept.

Payment sources for home care can be categorized into two broad categories: 1) private pay and 2) federal, state, and county programs.



Medicare May Pay for Home Care When Receiving Skilled Care

To help you understand what Medicare will pay for, the terms “skilled care” and “unskilled care” are reiterated in this section for purposes of clarity and to avoid confusion of terminology.

It is a common misconception that Medicare will pay for ALL home care (unskilled care) needs. However, home care (unskilled care) may only be paid for by Medicare if home health care (skilled care) is currently being received.

In general, Medicare will pay for services in the home when a doctor certifies that home health care (skilled care) is required. The payment for services is done by lump sum to a Medicare-certified home health home agency for covered services in a 60-day period. This period is known as the “episode of care”. The lump sum must cover all services (both skilled and unskilled) rendered during the episode of care. Therefore, even though some home care (unskilled care) may be included as part of those services being received, those unskilled services may be limited (if at all) as they reduce the portion of the lump sum that can be used to cover the home health services (skilled care). If a portion of the lump sum is used for home care (unskilled care) to assist with ADLs such as bathing, feeding, transferring, etc., these home care visits will be intermittent and for short durations.

For more information on Medicare and what services are covered in the home, visit Medicare.gov or call 1-800-MEDICARE (1-800-633-4227). A great resource is their official government booklet ‘Medicare & Home Health Care’, which explains eligibility and what is and is not covered. That booklet is found at the following URL:

<https://www.medicare.gov/Pubs/pdf/10969-Medicare-and-Home-Health-Care.pdf>

Private Pay Options

Savings

Many home care clients opt to pay for home care using their savings. Savings may be in the form of cash on hand, bank accounts, retirement accounts, etc.

Long-term Care Insurance

Some individuals have planned for long-term care expenses with a long-term care (LTC) insurance policy. LTC insurance policies allow for coverage of the unpredictable cost of long-term care in the future. LTC insurance policies may have been purchased individually or provided through an employer or other organization or program. Premiums are paid over time. An individual that has an LTC plan will qualify for benefits generally when they need help with two to three ADLs. Be aware of what is called an elimination period during which the individual may have to pay for a certain amount of days or hours of care before benefits are received from the LTC insurance policy.



Other Options

Additional options that can be considered from a private-pay perspective are reverse mortgages, home equity lines of credit, life insurance policy conversions, or loans designed specifically for home care. Before proceeding with these options, you may wish to seek the guidance of a financial advisor.

County Programs

Check with your county government to see if they offer services to assist in the home. The program name may be something along the lines of “Aging Services,” “Elder Services,” etc. There may be qualifications for these programs such as income level, age, and how dire the need is. In addition, some programs may require a copay based on a sliding fee scale.



Federal & State Programs

Navigating the U.S. Department of Veteran Affairs (VA) Pension benefits and Medicaid Long-Term Care benefits can be very confusing and complex. We recommend seeking guidance from VA-accredited professionals (attorney, agent, or veteran service organization) and/or an expert in Medicaid benefits in the state of Florida. If an individual is eligible for both VA pension benefits and Medicaid long-term care benefits, receiving benefits through one program may result in the denial of benefits or a penalty from the other program.

VA Benefits

For more information on VA benefits, call the VA toll-free at (800) 827-1000, visit their website at www.va.gov, or visit a VA regional office.

VA Aid and Attendance Pension Benefit

The VA has an Aid and Attendance Pension Benefit for veterans and surviving spouses with non-service related disabilities that require regular assistance with their ADLs. There are four eligibility requirements: a) the veteran must have served at least 90 consecutive days of active duty service with one day during a period of war, b) the veteran must have non-service-related medical conditions that require assistance with ADLs, c) asset limitations based on a sliding scale based on age, and d) medical expense to income ratio. Contact the VA for further information.



VA Health Care System Enrollees

A veteran enrolled in the VA health care system may be eligible for home and community-based service benefits, including home care. Contact the VA for further information.

Medicaid

Individuals who are eligible for Medicaid may have options to receive home care. Typically, this care is provided through the Statewide Medicaid Managed Care program (SMMC) or through Home and Community-Based Services (HCBS) Waiver Programs.

To learn more about Medicaid in Florida, visit the Agency for Health Care Administration's website at the following URL: ahca.myflorida.com/Medicaid or enter the words "Florida Agency for Health Care Administration Medicaid" in a search engine.

Statewide Medicaid Managed Care (SMMC)

SMMC is the program where most Medicaid recipients receive their Medicaid services. Home care services are offered as a part of this program. Visit www.flmedicaidmanagedcare.com or call 1-877-711-3662 to talk to a choice counselor.

Home and Community-Based Services (HCBS)

Waiver Programs

Several HCBS programs exist in Florida, such as Adult Cystic Fibrosis Waiver (ACF), Developmental Disabilities Individual Budgeting (iBudget) Waiver, and Traumatic Brain Injury and Spinal Cord Injury Waiver. The contact information for these programs varies. To learn more about the waiver programs, visit the following URL and scroll down to the “Home and Community-Based Services Waivers” section. Click on the link to the Waiver program that interests you to learn more about the program and to find website and contact information.

Learn more: https://ahca.myflorida.com/Medicaid/Policy_and_Quality/Policy/federal_authorities/federal_waivers/index.shtml or enter the words “Florida Agency for Health Care Administration Waivers” in your search engine.

Take Time to Find the Right Home Care Provider

Hopefully, this guide has given you some helpful information to better understand your home care options. Take your time to find the right home care provider for you, your family, or other loved ones in your life. Finding the right provider can make all the difference in their life—and yours.

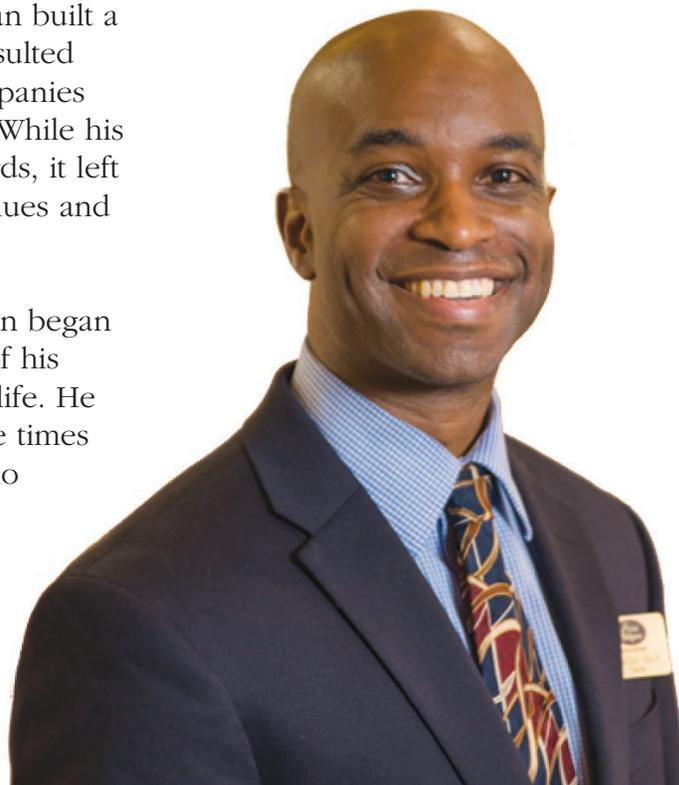


About the Author Jonathan Marsh, *Owner of Home Helpers of Bradenton*

Jonathan Marsh is an impassioned, compassionate professional with a vision of service and community. He now stands at the forefront of a company that is changing the very course of home care services.

After graduating from Florida State University, Jonathan built a career spanning 16 years. During those years, he consulted with some of the most recognizable Fortune 500 companies but also began to take stock of his personal journey. While his work had been deemed a success by industry standards, it left him feeling empty and often at odds with his own values and personal goals.

It was during this period of re-evaluation that Jonathan began to consider his best destiny. He reflected on the life of his grandmother, a strong and formative influence in his life. He remembers that during her life of 97 years, there were times when she needed regular care in her home but had no family or resources locally to provide that. Jonathan witnessed firsthand the sheer devastation that this can bring upon families in this situation. This realization, along with some deep consideration, extensive conversation and encouragement from friends inspired Jonathan to consider a new direction.



In January of 2015, with the formation of Home Helpers of Bradenton, Jonathan embarked on a lifelong dream of fulfilling his best destiny. With the formation of his home care agency, Jonathan now provides a resource to give compassionate, complete, and empowering care to the community. Through the use of technology and sincere, personal involvement, his company stands to set the benchmark for total, personal care.

Jonathan is a Certified Alzheimer's Educator and holds a degree from Florida State University, College of Business. He has traveled extensively and enjoys sports and healthy living. His greatest desire is to give back to the community through helping others while creating jobs and providing exceptional service.



Glossary of Terms

ACH	Automated Clearing House
ADL(s)	Activities of Daily Living
AHCA	Agency for Health Care Administration
Basic ADLs	Eating, bathing, dressing, toileting, transferring (walking) and continence
Client	Person receiving care and/or Family Member
CNA	Certified Nursing Assistant
CPR	Cardiopulmonary Resuscitation
DOL	Department of Labor
HCBS	Home and Community-Based Services
HCS	Homemaker and Companion Services
HHA	Home Health Agency
HR	Human Resources
iBudget	Developmental Disabilities Individual Budgeting
Independent Contractor	A self-employed contractor or business owner as opposed to one of your employees. Also known as a 1099 contractor.
Instrumental ADLs	Activities requiring complex skills to live independently such as meal preparation, housekeeping, and laundry.
IRS	Internal Revenue Service
LPN	Licensed Practical Nurse
LTC	Long-Term Care
NR	Nurse Registry
OSHA	Occupational Safety and Health Administration
RN	Registered Nurse
SMMC	Statewide Medicaid Managed Care
VA	U.S. Department of Veteran Affairs
W-2 Employee	Payroll taxes are deducted by an employer and paid to the government.





Making *Life Easier*®

HHA#299994455

941-999-1960

HomeHelpersHomeCare.com/Bradenton

Each office is independently owned and operated.