



Home Health Services

Home health services are delivered to Medicaid beneficiaries in their homes to manage chronic health conditions or help them recover from illness, injury, or surgery.

Some examples of individuals who may benefit from home health services are those in need of the following supports:







How do Home Health Services Help Beneficiaries?

Home health services help beneficiaries recover from injury or illness and maintain their independence by receiving personalized one-on-one care in their homes. Receiving care in the home allows beneficiaries to receive focused attention and assistance from their caregiver.

What are the Eligibility Requirements for Home Health Services?

To be eligible for these services, applicants must:

- Be Medicaid eligible.
- Be identified by their doctor as in need of home health services.
- Have had a comprehensive physical examination and a medical history or history update by their doctor within the 12 months preceding the:
 - Start date of a new plan of care OR
 - First date of service in an extended benefit period OR
 - Date of a service in a revised or renewed plan of care





What Home Health Services are Available to Beneficiaries?

Home Health Services are administered by a home health agency and include part-time or intermittent care for a few hours a day, one or more times a week. Home health includes the following:



- **Home health aide services:** Care provided by home health aides to help beneficiaries perform activities of daily living (e.g., bathing, dressing, food preparation, laundry, etc.).
- **Physical therapy:** Therapy provided by a qualified physical therapist to help beneficiaries make functional gains or prevent a worsening of their condition.
- Other: Certain injections, disposable medical supplies, diapers, and underpads.

Who is Responsible for Administering Home Health Services?

Home health services are available to beneficiaries through Arkansas Medicaid, which is managed by the Department of Human Services (DHS). Within DHS, the Division of County Operations (DCO) handles all eligibility, and the Division of Medical Services (DMS) manages program operations.