Post-Inpatient Hospital Discharge Home Visits

The post-discharge home visit benefit allows patients to receive visits in their home from a physician or other licensed clinician after an inpatient hospital discharge. This service can help ease the transition from the hospital to the patient’s home for the patient and their caregiver(s) and may help to prevent readmission to the hospital. Some of the services a patient can receive through this benefit include, but is not limited to, receiving instructions on how to change surgical dressings, how to operate special medical equipment, how to administer special medications, assistance in knowing who to call if there’s an issue or question, understanding the patient’s medical plan, and more. The Next Generation ACO Model’s post-discharge home visit waiver allows for a physician to partner with licensed clinicians such as a nurse practitioner, to provide the post-discharge home visit service for up to two days in a 30-day period post discharge. For more details about this benefit, please find information in the frequently asked questions (FAQs) below.

Post-Discharge Home Visits & What it Means for You

Q1. How do I know if I am a beneficiary associated with a Next Generation ACO and if I can receive this benefit?
A1. Medicare beneficiaries who receive care from a doctor participating in a Next Generation ACO should receive a letter from the ACO notifying them that they are associated with the ACO. If the beneficiary’s doctor (or a number of his or her doctors) participates in the Next Generation ACO, then the beneficiary may be associated to the ACO and may make them eligible for this post-discharge home visit benefit. You can also call 1-800-MEDICARE to ask whether you are associated to a Next Generation ACO.

Q2. How do I know if my physician is participating with a Next Generation ACO to use this benefit?
A2. Your Next Generation ACO is required to maintain on its website a current list of providers and facilities participating in the ACO’s care network. You can also ask your doctor if they are participating in the Next Generation ACO, and whether they are participating in this benefit with the ACO.
Q3. Is this benefit only available to those discharged from a hospital?
A3. No. The post-discharge home visit benefit is available to patients discharged from inpatient facilities, which includes hospitals, critical access hospitals, skilled nursing facilities, and inpatient rehabilitation facilities.

Q4. How often can I receive this benefit?
A4. You can receive this benefit one time within 10 days of discharge from an inpatient facility and one more time in the following 20 days from the first home visit.

Q5. How is this benefit different from existing post-discharge home visit benefits?
A5. Currently, the existing post-discharge home visits services must be provided under the direct supervision of a physician or in other words, the physician is required to provide this service directly to the beneficiary in their home and a nurse practitioner (or other licensed clinician), cannot provide this service in place of the physician. The Next Generation ACO Model’s post-discharge home visit waiver allows for a physician to provide general supervision to a licensed clinician to provide a post-discharge home visit service to a physician’s patient in their home.

Q6. This service sounds great, how much does it cost?
A6. Medicare post-discharge home visit service costs (e.g., co-insurance) remain the same with or without this waiver. For more information, please visit the Medicare Part B coverage and costs website at: https://www.medicare.gov/what-medicare-covers/part-b/what-medicare-part-b-covers.html.

Q7. I’m covered under Medicare – does this limit my choice of doctors and hospitals?
A7. No. Your choice under Medicare is not limited. You still have your choice of doctors and hospitals, but this waiver applies only to beneficiaries who receive their care from a provider who partners with a Next Generation ACO. If you choose a provider that your ACO does not have an agreement with, the normal Medicare rules apply.