Medicare

As a long-term care

payment source



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Here's the truth. Medicare will only pay for long term care under very specific circumstances.

Medicare will cover home care only when the person is homebound, and only when skilled care - care prescribed by a physician is needed. Examples of skilled care are Physical Therapy and Occupational Therapy. In order for home care to be covered by Medicare, the skilled care provided cannot be needed on a daily basis; the need for care must be what is called intermittent. Medicare will no longer pay for home care once the person is either 1) no longer homebound, or 2) needs daily skilled care, or 3) their need for skilled care has subsided.

Medicare will cover skilled *nursing home care* only when the person has first been hospitalized as an inpatient for 3 nights. They must be receiving skilled care in the nursing home for a reason related to their inpatient stay. Even then, only up to the first 20 days is covered fully by Medicare. From days 21-100 there is a significant copayment (usually covered by a Medicare supplement insurance plan).

Most surprisingly, even if skilled care is needed after day 100, at that point, Medicare stops paying. Since long term care – by definition – lasts more than 90 days, it's safe to say that Medicare pays for very little long term care in a nursing home. Although there can be some exceptions for readmissions and other unusual circumstances.