



What is Home-Based Primary Care (HBPC)?

- HBPC provides in-home primary medical care, typically ongoing, to medically complex patients for whom office visits are either difficult or impossible.
- Also known as the “modern-day house call,” HBPC is exactly what it sounds like – physicians, nurse practitioners, and physician assistants travel to a patient’s home, or to the place they call “home,” to deliver primary care services.
- These providers also often function as part of an interdisciplinary team to manage both medical and non-medical needs (e.g., social factors, environmental needs).
- HBPC has been proven to improve health outcomes, enhance the quality of life for patients and caregivers, and reduce the total cost of care by preventing unnecessary emergency room visits and hospitalizations.

What types of services does HBPC provide?

By providing medically complex patients the same services they would receive in a primary care office, HBPC is markedly different from other types of in-home care, such as home health care. HBPC visits can include:

- Routine medical care and management of chronic diseases
- Annual wellness visits
- Addressing urgent medical needs
- Vaccinations
- Management of cognitive and neurological disorders
- Advance care planning (e.g., goals of care conversations, end-of-life preferences)
- Wound care and other procedures
- Care coordination with community services and other healthcare providers, including specialists in psychiatry, podiatry, optometry, dentistry, and more
- Coordination of diagnostic testing (e.g., blood tests, EKGs, ultrasounds, x-rays)
- Medical visits at assisted living facilities, group homes, foster care homes, and similar settings
- Caregiver support and guidance on managing the patient’s complex medical and social needs

Is HBPC covered by insurance?

- For Medicare beneficiaries, services delivered by the HBPC provider are covered under the same Medicare benefits that apply when seeing a provider for an office visit, e.g., Medicare covers 80% while the remaining 20% is subject to deductibles and copays.
- Certain Managed Care or Health Maintenance Organization (HMO) health insurance plans may require a referral or for the HBPC provider to be selected as the primary care provider. As available, an HBPC practice in your area can answer specific questions regarding coverage.

Is HBPC right for you or someone you care for?

- Patients do not need to be formally considered “homebound” to qualify for HBPC.
- Here are some examples of when HBPC might be in a patient’s best interests:
 - The patient has difficulty leaving the home due to medical conditions such as dementia or physical mobility limitations
 - The patient requires medical devices or special assistance/transportation accommodations to leave the home
 - Leaving the home can adversely affect the patient’s physical and/or mental health
 - Caregivers and/or other family members are not available or able to transport the patient
 - Patients transitioning from one healthcare setting to another need assistance with “bridging a primary care gap”

Talking to Your Primary Healthcare Provider about HBPC

- If HBPC seems like a good fit for you or someone you care for, discuss it first with your primary healthcare provider or healthcare system. They may be able to refer you to an HBPC provider.
- The following “conversation starters” may help during that discussion:
 - Leaving the home is very difficult for me/the person I care for and prevents me/them from coming to see you as often as needed. What are the options for receiving primary medical care at home?
 - My medication refills are out. It’s been more than a year since I last visited the clinic, and I am unable to get there due to my medical condition(s).
 - Can you recommend or refer me to a home-based primary care provider so that I can continue to receive the primary medical care I need at home?

What other in-home services are available besides HBPC?

- *Skilled home health services* provide patients in-home nursing, physical therapy, occupational therapy, or other support services under the direction of a primary care provider. These services are covered by Medicare when the patient is deemed “homebound” and is certified to have a skilled need by a provider.
- *Concierge healthcare* is a subscription-based program that guarantees patient access to medical professionals 24/7.
- *Hospital at Home*[®] provides hospital-level care to acutely ill older adults in their home; contact your local hospital/health system to inquire about availability.
- *Palliative care* is team-based consultative care focused on symptom management and advance care planning.
- *Hospice care* is non-curative support focused on providing comfort and end-of-life care when a patient is diagnosed with a terminal illness.

Connecting with Community Services

In addition to addressing your primary medical needs or those of the patient through HBPC, you or they may need community resources or social support. The resources below can be used to locate community programs and social services in your area:

- *Eldercare Locator* to find your local Area Agency on Aging – https://eldercare.acl.gov/Public/About/Aging_Network/AAA.aspx
- The *Aunt Bertha* network connects people seeking help and verified social care providers – <https://company.auntbertha.com>
- The *National Care Planning Council* helps families recognize the need for, and implement, long-term care planning – https://www.longtermcarelink.net/eldercare/ref_state_aging_services.htm
- The *U.S. Department of Health and Human Services (HHS)* provides a collection of resources by state for older adults and caregivers – <https://www.hhs.gov/aging/state-resources/index.html>

**If you or someone you care for is receiving skilled home health or hospice services, you can also ask your home health or hospice agency social worker about additional community resources.*

The Home Centered Care Institute is a national nonprofit organization focused on scaling home-based primary care and bringing it into the healthcare mainstream.



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