Examples of Valid, Patient-Specific Face-to-Face Homebound Documentation

Please note: Examples list multiple conditions and symptoms that specifically explain “why” each patient is homebound.

Example #1: GAIT/SOB/FALLS/CV DISEASE EXAC.
Patient is homebound due to inability to ambulate for more than a few minutes or few feet without falling due to poor balance and extreme fatigue/weakness; very SOB with minimal exertion and patient must stop to sit and rest every few minutes or he/she cannot go on. Patient has had multiple falls with injury in recent past and also requires the assistance of another person to ambulate at all times due to unsafe gait pattern and cardiopulmonary disease exacerbation.

Example #2: DEMENTIA/SAFETY/FALLS
Patient is homebound due to end-stage dementia and cannot be left unattended due to wandering behaviors and extremely poor cognition. Patient has wandered away from home and been lost in the past resulting in injury. The patient is now too disoriented to safely leave home alone and requires frequent prompting and redirection of another person to keep the patient from harm. The patient also exhibits poor balance and falls easily if not supported by another person during all attempts at ambulation.

Example #3: PAINFUL AMBULATION/PAIN MED SIDE EFFECTS/ASST. DEVICES
Patient is homebound due to unsteady, painful ambulation with extremely poor balance and current use of narcotic pain medications to address pain issues. Side effects of the narcotic pain medications being exhibited by the patient are disorientation, drowsiness, and dizziness; all increasing patient’s fall risk and making it very difficult and unsafe for the patient to leave home. Patient requires supportive devices of wheelchair and special transportation, as well as the assistance of another person at all times when attempting to leave home for medically-required appointments.

Example #4: OBESITY/SOB/02 DESAT/FALL RISK
Patient is homebound due to morbid obesity, unsteady and unsafe ambulation, very poor balance and weakness from recent surgery. Attempts to leave the home exacerbate the patient’s COPD with extreme SOB and uncontrollable coughing resulting. The patient’s oxygen saturation levels also fall below 90% and it takes several minutes for coughing to subside and oxygen levels to return to above 90% after stopping and resting. Patient is at very high risk for falls with serious injury due to problems with oxygenation and leaving home is medically contraindicated for all the reasons cited above.

Example #5: LOWER EXTREMITY WOUND AFFECTING GAIT/INFECTION RISK/DM
Patient is homebound due to complex surgical wound to __ foot. The patient is non-weight bearing on __ foot resulting in new mobility, balance, and transfer limitations which increase patient’s fall risk. Leaving the home also presents risks of complication such as infection and delayed healing for this diabetic patient. It is medically contraindicated for the patient to leave home until wound heals.