

# WEST VIRGINIA CODE: §33-28-5A

## §33-28-5a. Home health care coverage.

(a) Any insurer who, on or after January 1, 1981, delivers or issues for delivery in this state individual basic hospital expense or major medical expense coverage shall make available to the policyholder home health care coverage consistent with the provisions of this section. For purposes of this section, "home health care" means health services provided by a home health agency certified in the state in which the home health services are delivered or under Title XVIII of the Social Security Act.

(b) Home health care coverage offered shall include:

- (1) Services provided by a registered nurse or a licensed practical nurse;
- (2) Health services provided by physical, occupational, respiratory and speech therapists;
- (3) Health services provided by a home health aide to the extent that such services would be covered if provided to the insured on an inpatient basis;
- (4) Medical supplies, drugs, medicines and laboratory services to the extent that they would be covered if provided to the insured on an inpatient basis; and
- (5) Services provided by a licensed midwife or a licensed nurse midwife as these occupations are defined in section one, article fifteen of the code.

(c) Home health care coverage may be limited to:

- (1) Services provided on the written order of a licensed physician, provided such order is renewed at least every sixty days;
- (2) Services provided, directly or through contractual agreements, by a home health agency certified in the state in which the home health services are delivered or under Title XVIII of the Social Security Act; and
- (3) Services as set forth in subsection (b) of this section without which the insured would have to be hospitalized.

(d) Coverage under this section shall be provided for at least one hundred home visits per insured per policy year, with each home visit by a member of a home health care team to be considered as one home health care visit including up to four hours of home health care services.

(e) No such policy need provide such coverage to persons eligible for Medicare.