



# In-Home Treatment

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## Purpose

This policy gives direction on the approval and payment of in-home treatment for eligible Veterans (see [Eligibility for Health Care Programs – Eligible Client Groups](#)).

## Policy

### General

1. For the purposes of this policy, treatment refers to:
  - a. treatment provided by a health professional;
  - b. the provision of any surgical or prosthetic device or any aid approved by the Minister, the maintenance of the device or aid and any home adaptation that is necessary to accommodate or facilitate its use; and
  - c. preventative health care approved by the Minister.

2. Treatment is normally provided in an institutional setting such as a physician's office, clinic, hospital or laboratory. In exceptional circumstances, it may be necessary to provide treatment in a Veteran's home.
3. In general, in-home treatment may be considered appropriate when:
  - a. for reasons beyond the control of the Veteran, the Veteran is unable to receive the treatment outside his place of residence;
  - b. in the opinion of the decision-maker, treatment can be justified based on the Veteran's health condition (See Determining Need for In-Home Treatment.); and
  - c. the home environment is an appropriate setting for the performance of the treatment or procedure.
4. The following are examples of scenarios in which in-home treatment may be appropriate for a Veteran who cannot travel to the provider's usual place of business:
  - a. the Veteran is bed bound and/or requires transportation by ambulance;
  - b. the Veteran is not bed bound, but is unable to drive (due to physical impairment or other health-related reasons), or cannot use public transit or other means of transportation.
5. For information on approval of in-home blood collection services, please consult the [In-Home Blood Collection \(POC 5\)](#) policy.
6. In-home treatment requires prior approval.

## **Fee Limits**

7. Payment for in-home treatment will be in accordance with section 5 of the [Veterans Health Care Regulations](#). That section provides that rates shall be set as follows:
  - a. if the treatment benefits are fully insured, rates shall be as established by the province for services and costs;
  - b. if the treatment benefits are not fully insured and an association has adopted a fee schedule, the rate that is approved by the Minister and that is based on the fee schedule; and
  - c. in any other case, the rate normally paid for the treatment benefits and costs in the community in which the treatment benefits are provided.

See the [Rates Payable for Treatment Benefits](#) policy for further information.

## **Travel**

8. Veterans Affairs Canada is authorized to pay a provider's costs of time-in-travel when providing in-home treatment, but the Department cannot reimburse directly any travel expenses (e.g. mileage, meals, and accommodation). See In-Home Treatment - Compensating Providers for Costs of Time-in-Travel.

## **References**

[\*Veterans Health Care Regulations\*](#), sections 4, 5

[Eligibility for Health Care Programs – Eligible Client Groups](#)

[In-Home Blood Collection \(POC 5\)](#)

[Rates Payable for Treatment Benefits](#)

[Health Professionals](#)