



# OIG Says Providers Can Offer Services to Caregivers

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**“In Advisory Opinion No. 18-05; issued on June 18, 2018; the OIG also addressed the circumstances under which providers can establish “caregiver centers” that provide or arrange for free or reduced-cost support services to caregivers in local communities.”**

**P**rimary caregivers – often patients’ family members – are crucial players in home care. Without them, it can be impossible to provide home care services and to keep patients in their homes. If patients cannot care for themselves, reliable caregivers are an essential prerequisite for the provision of all types of home care.

Caregivers have a very “hard row to hoe” because caregiving is physically, emotionally, intellectually, and spiritually demanding. Is it possible that enhanced assistance for caregivers can positively impact quality of care? Intuitively, the answer to this question seems to be “yes.” What additional assistance may be helpful and can providers offer it?

*Here are some initial ideas for helpful assistance:*

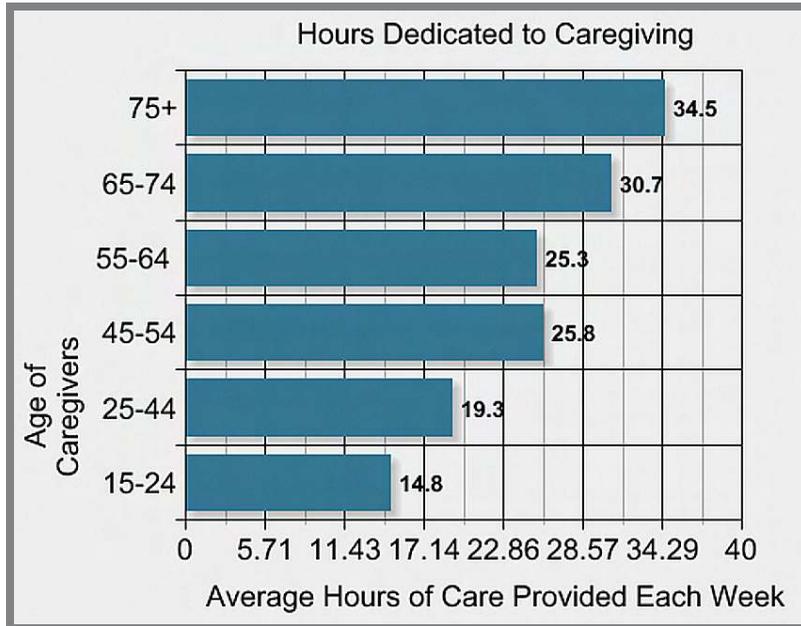
- Caregiver support groups.
- More intensive education about patients’ clinical conditions, with an emphasis on signs and symptoms of changes in patients’ conditions and what to do about them.
- Assistance from volunteers, especially for patients who are chronically ill.

The next question is whether providers can offer additional assistance, such as the activities described above. This issue has been addressed by the Office of Inspector General (OIG) of the U.S. Department of Health and Human Services, the primary enforcer of fraud and abuse prohibitions. The OIG has clearly stated that providers may not give patients or potential patients free items or services that cost more than \$15.00 at a time or more than \$75.00 in aggregate per calendar year.

In Advisory Opinion No. 18-05; issued on June 18, 2018; the OIG also addressed the circumstances under which providers can establish “caregiver centers” that provide or arrange for free or reduced-cost support services to caregivers in local communities. The provider that requested this Advisory Opinion recognized the difficulties faced by primary caregivers and, consequently, established a caregiver Center. The Center is staffed primarily by volunteers. Private donations fund the Center and none of its costs are shifted to any federal health care program.

The Center either directly or, in collaboration with local nonprofit organizations, provides free and fee-based services to caregivers. Free services include, but are not limited to, access to a resource library, various educational sessions, a short-term equipment lending program, and free on-site respite

## Number of Hours Dedicated to Caregiving by Age of Family Caregiver



[The Partnership for Solutions. (2004). Chronic Conditions: Making the Case for Ongoing Care.]

▶ Older caregivers are more likely to care for a spouse or partner. The average age of spousal caregivers is 62.3. [National Alliance for Caregiving and AARP. (2015). Caregiving in the U.S.]

▶ Many caregivers of older adults are themselves growing older. The average caregiver of a recipient 65 years of age or older is 63 years old. Of these caregivers, one-third report being in fair to poor health. [Administration on Aging. (2005). NFCSP: Complete Resource Guide.]

care during events sponsored by the Center and attended by caregivers. The Center offers our partners with other providers in the community to offer stress reduction workshops, low-cost ride-share programs, and additional respite care.

The provider does not specifically market the Center's services, but the information is available on its website, social media pages, and in brochures. These sources make it clear that every caregiver is eligible to use the Center's services, regardless of healthcare provider or payor. Center staff members do not market, promote, or make referrals for any medical items or services that are reimbursable by federal care programs and do not provide any items or services that are reimbursable by federal health care programs. Referrals for services include a comprehensive list of local service providers offering requested services, without recommending any provider over another.

In response to this request, the OIG first stated that the key question is whether these services are likely to influence caregivers to select the provider or items or services reimbursable by the Medicare or State health care programs in the future. The OIG then acknowledged that the services provided have intangible, psychological value to caregivers. Some of the services relieve caregivers of expenses they might otherwise have incurred. The OIG also noted that many of the support services take place on the provider's premises, which might encourage selection of the provider for future services. The OIG also acknowledged that this arrangement does not fit into any safe harbor or exception under the federal anti-kickback statute.

Nonetheless, the OIG said that it would not impose sanctions on the provider because:

- The services offered at the Center primarily benefit caregivers, not patients.
- The Center's services are available to all caregivers.
- The provider does not actively market the Center and its services.
- The Center is unlikely to increase costs to federal health care programs.

Caregivers have a tough job and need the support of home care providers. Based on this Advisory Opinion, the OIG has provided guidance about how home care providers of all types can expand their support for caregivers. ■