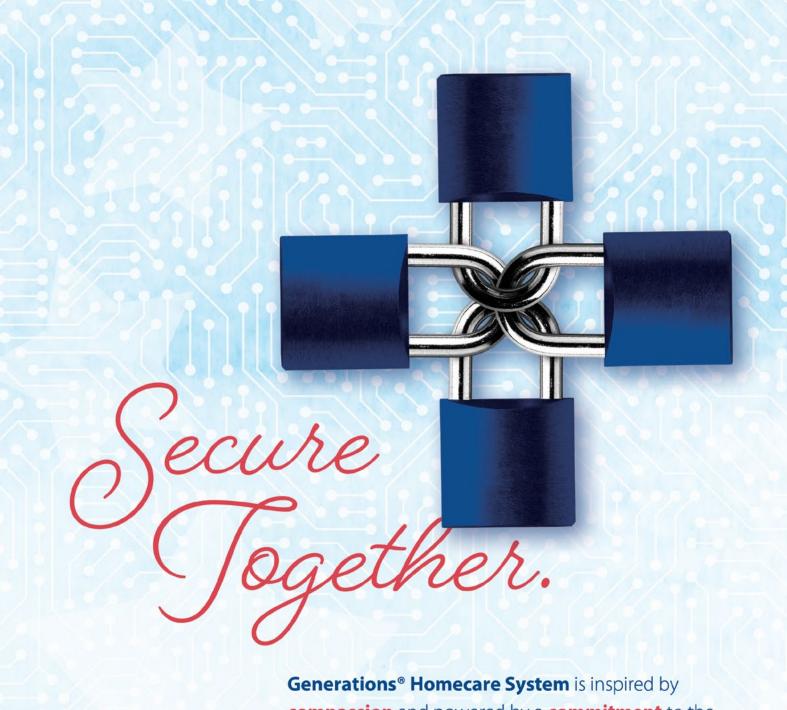




A Publication of the Home Care Association of America

Winter 2020





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Mission, Vision, Purpose & Guiding Principles

The Home Care Association of America (HCAOA) is the nation's first association for providers of private duty home care. HCAOA was founded on the principle that quality private duty home care has one model of care and that model is to employ, train, monitor and supervise caregivers, create a plan of care for the client and work toward a safe and secure environment for the person at home.

HCAOA Mission - The Home Care Association of America is the trusted voice of the home care industry, strengthening our members through advocacy, education and research.

/ision - Home care empowers all those in need to live their best lives wherever they call home

HCAOA Purpose - To provide leadership, representation and education for the advancement of non-medical private duty home care and provide a strong unified voice to speak to the issues of concern within the private duty home care industry.

HCAOA Guiding Principles - Associations that have guiding principles use them to help determine how the association will conduct its business, assist in determining policy and positions, and in providing direction. While the mission and vision of the Home Care Association of America are the main tools for determining strategy and direction, these guiding principles complement that mission and vision. We believe that people should be able to age safely in place at home to the extent possible according to their desires and permitted by their resources. We will champion measures at both the federal and state levels that promote home care quality and affordability. Appropriateness of care and client protection is best provided in an employee based model.

HOME for the Holidays

I AM A HOMEBODY. I take comfort in being in my home—the one place I can exhale and be myself. It is where I am making the fondest of memories with my grandkids. It is where my family and I celebrate Thanksgiving every year. And it is where I cared for my mother in the last years of her life—safe in the comfort of home.

This year, home has taken on a new meaning. As we all quarantined during the pandemic, home quickly became our offices, our gyms, our schools, and our social circles, as well as a sanctuary from the chaos outside. When people truly embraced the meaning of "no place like home," YOU made that happen for thousands of seniors, people with disabilities, and kids with complex medical conditions. Your caregivers left the sanctuary of their homes each day so your clients could stay safe and healthy at home. When the world looks back on 2020, home care will be on the list of heroes we remember.

As we navigate this holiday season, which now includes CDC guidelines and state restrictions in addition to the typical family drama and gift exchanges, remember that the Home Care Association of America is here for you, and we will continue to do all we can to ensure our members have access to PPE and protocols for staying safe. In this issue, we take a look at what the vaccine distribution plan could look like for the country, and for home care. We look ahead to the Biden Administration's plan for our industry. And we get some new perspectives from "outside looking in," as we discuss the perception of home care with several healthcare leaders.

I wish you and your family the happiest of holidays, and health and joy for the new year.



Vicki Hoak, Executive Director





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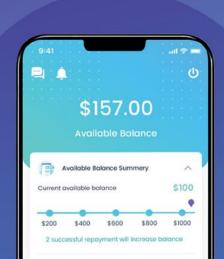


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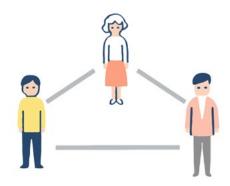
THIS MONTH, THE CENTERS FOR **DISEASE CONTROL AND PREVENTION**

(CDC) reported the highest number of cases in the U.S. since the COVID pandemic began. As cases continue to increase rapidly, the CDC reminds people that the safest way to celebrate the holidays is to celebrate at home with the people you live with. Gatherings with family and friends who do not live with you can increase the chances of getting or spreading COVID-19 or the flu.

If you do visit family or attend a holiday gathering, the CDC has released guidelines advising Americans on how to celebrate safely, including hosting smaller gatherings and eating dinner outside when possible.

Wear a Mask

The CDC recommends wearing a mask with two or more layers over your nose and mouth, making sure it is secure under your chin and against the sides of your face, to stop the spread of COVID-19.





Social Distance

Stay at least six feet away from those who do not live with you, which is especially important for people who are at a high risk of becoming very sick. Remember that people without symptoms can still spread COVID-19.



Wash your Hands

Regularly wash your hands with soap and water for at least 20 seconds and use a hand sanitizer with at least 60 percent alcohol when you're unable to wash your hands.





Attending a Holiday Gathering

Bring your own food, drinks, plates, cups, and utensils to a holiday gathering, and use single-use options, like salad dressing and condiment packets, and disposable items like food containers, plates, and utensils. Wear a mask and safely store the mask when eating and drinking, and avoid going in and out of areas where food is being prepared.

Hosting a Holiday Gathering

Host a small meal outdoors with family and friends who live in your community and limit the number of guests. If celebrating indoors, open windows. Speak with your guests ahead of the gathering to set expectations and ask them to bring their own food and drink. But, if you will be sharing food, have one person serve the food and use single-use utensils. Clean and disinfect frequently touched surfaces and items and between use, and limit the number of people in food preparation areas.



Traveling for the Holidays

The CDC strongly recommends staying home to protect yourself and others as travel increases the risk of getting and spreading COVID-19. However, if you do travel, check the travel restrictions before you go and get a flu shot before traveling. Wear a mask in public, and on public transportation, and stay at least six feet away from anyone outside your household. Additionally, wash your hands regularly or use hand sanitizer, avoid touching your mask, eyes, nose, and mouth, and bring extra supplies, such as masks and hand sanitizer.

TESTIN

There are two types of tests for COVID-19:

- Viral tests tell you if you have a current infection
- Antibody tests tell you if you've been previously infected

If you, your staff, your clients or family are experiencing symptoms or think you've been exposed to COVID-19, contact your state or local public health department to find out where you can get tested. Tests are available at many health centers and some pharmacies. Call in advance to see if an appointment is required. The testing process and timeline for results vary by location.





From the Outside

Looking In...





HCAOA talked with several healthcare leaders who work or have experience with the home care industry, but are now focused in other areas of healthcare. We asked them to give us their perspective on the industry, where we are, and what the future looks like for home care.



Care in the Home is Not One-Size-Fits-All

By Sherl Brand, RN, BSN Senior VP Strategic Solutions, CareCentrix

For many years in my career as a nurse, I supervised the delivery of home care. In that role, I learned one thing very quickly: while patients may need skilled nursing or therapy as a critical part of their care at home, it's the personal care that helps people stay well and at home on a longterm basis.

Personal care professionals not only deliver critical services for people who are healing at home, like meal preparation and safe bathing and dressing, but they are the eyes and ears of the home care experience. Their hands-on approach and time spent with the people they care for allows them to become aware of potential health concerns, such as loss of appetite or a behavior change, and alert the home care agency, physician, or family quickly so that these concerns can be addressed in a timely manner.

This role has always been important, but as home care plays an increasing role in our healthcare system, it is even more evident. Recent research commissioned by CareCentrix shows that most Americans-73 percent-prefer recovering at home instead of a medical facility. Their caregivers prefer home care over hospital or skilled nursing care as well, with 76 percent of caregivers favoring the home as the site of care. Our research also showed that health plan executives nearly universally agree that care at home benefits both the patient and the health plan.

The pandemic has accelerated this shift driving more care to the home in order to minimize the burden on hospitals and skilled nursing facilities while addressing COVID-19 concerns, and the momentum for the home as the site of care shows no sign of slowing down. As that happens, it's important to get it right—to deliver care in the home that is not one-size-fits-all, that takes into consideration individual needs, both skilled and supportive, and that helps engage the patient, plan, provider, and caregiver.

The value of personal care is further recognized by CMS as we see the expansion of Medicare Advantage (MA) supplemental benefits which include in home support services. Now more MA plans than ever before offer personal care benefits, which gives those plans a secret weapon that supercharges the home care they offer to their members, making it more personalized and effective. As a result, we will continue to see improved health outcomes, overall wellbeing, and satisfaction.



About CareCentrix

CareCentrix is the leader in health-at-home solutions and is committed to making the home the center of care. Managing care for 26 million members through a network of more than 8,000 provider locations, CareCentrix focuses on bringing members home to bring costs down. By drawing on insights from proprietary analytics, and connecting end-to-end clinical, social and caregiver services, CareCentrix eliminates unnecessary hospital readmissions, closes gaps in care, and reduces fragmentation. And ultimately, to help more people live, heal, and age at home. For more information, visit www.carecentrix.com.

Recent research commissioned by CareCentrix shows that most Americans— 73 percent—prefer recovering at home instead of a medical facility. Their caregivers prefer home care over hospital or skilled nursing care as well, with **76 percent** of caregivers favoring the home as the site of care

Patients and families do not think about home health, home care, post-acute, hospice, palliative care, or any other words like that. These are labels we—and the government—put on reimbursement and regulations. Patients and families need help, they need care, and if we can coordinate our efforts without them knowing when one type of care ends and the other starts, then we have done our jobs.



Partnership Between Home Care and Hospice

By Edo Banach, JD,President & CEO, National Hospice and Palliative Care Organization

When I became President and CEO of the National Hospice and Palliative Care Organization (NHPCO), the nation's oldest and largest association dedicated to hospice and palliative care providers and those they serve, I had already worked for several years in the home-based care world and in government. Although I certainly worked and regulated hospice and palliative care providers, I didn't fully realize how both broad and limited hospice and palliative care can be, and yet how the benefits could truly serve as a beacon for the rest of the health care system during this incredibly challenging time.

Hospice is limited by eligibility rules (prognosis of six months or less), lack of concurrent care, and a cap on services. Palliative care is limited in more fundamental sense: despite constant discussion there is no uniform fee-for-service community-based palliative care benefit in Medicare. However, both benefits are also quite broad: while the rest of the health care system is organized around "medical necessity" hospice and palliative care (and PACE) are free to provide any benefits that are needed by a patient. Music therapy? Comfort care? Chaplain? Emotional supports? These are not typically benefits that are provided in the rest of Medicare but can be quite common parts of a care plan in hospice.

There are two fundamental ways in which hospice and non-medical home care or personal care intersect. First, while the rest of the health care system is chasing value, non-medical supports and services, population health, etc., personal care and hospice/palliative care providers have already been providing this non-medical care for years. I think that it is imperative that our providers take an active role in helping to lead various value-based and alternative care models that aim to reduce

costs and improve quality. We do not need hospitals telling us how to do what we've been doing for years. We do need to help teach, and help coach our friends and colleagues, but we need not bashfully bow out after they have stepped up. We must continue to be engaged and lead this person-centered care (which happens to be NHPCO's tag line).

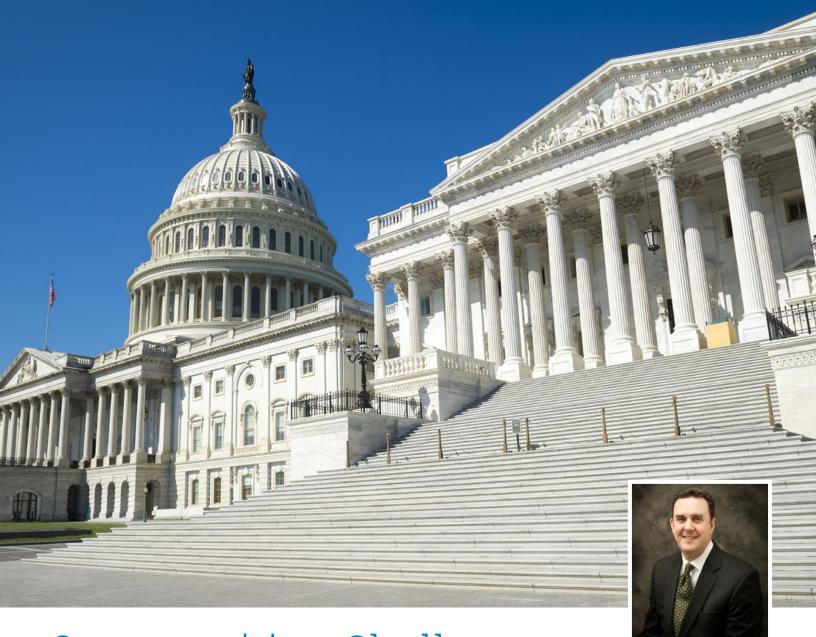
Second, as anybody who has had a loved one on hospice knows the benefits—although generous—are not unlimited. The availability of 24-hour care does not mean that this care is constant. This is where coordination and partnership with a home care agency is crucial—a delicate and hopefully seamless dance between home care, family, and hospice leads to better results and more satisfied families.

Patients and families do not think about home health, home care, post-acute, hospice, palliative care, or any other words like that. These are labels we-and the government-put on reimbursement and regulations. Patients and families need help, they need care, and if we can coordinate our efforts without them knowing when one type of care ends and the other starts, then we have done our jobs. I'm proud to stand with the Home Care Association of America, and look forward to doing our very best to coordinate our efforts and care. This would be important at any time, but so crucial in the middle of a pandemic that has cut through the soul of this nation. Together, we can help care for and heal America.



About NHPCO:

As the leading organization representing hospice and palliative care providers, NHPCO works to expand access to a proven person-centered model for healthcare—one that provides patients and their loved ones with comfort, peace, and dignity during life's most intimate and vulnerable experiences. To learn more, visit www.nhpco.org.



Opportunities, Challenges President, The Federal Group, Inc. for HCAOA with 117th Congress

AS THE 116TH CONGRESS COMES TO A CLOSE THIS MONTH,

we begin considering a home care agenda for the 117th Congress. While two Senate races in Georgia remain undecided until the runoff on January 5, what we know is that whichever party holds the majority will have a difficult task in moving legislation that does not have bipartisan support. In the House, the majority lost several seats to Republicans which will similarly require more compromise to get legislation done.

President-Elect Joe Biden will have a difficult but not impossible task in working with Congress. His advantage is that he knows well how Congress works. He was sworn into office in the Senate at age 30 on January 3, 1973. He was re-elected six times, resigning on January 15, 2009.

The following are policy focus areas for the Home Care Association of America (HCAOA) in this upcoming Congress:

COVID-19 Relief Efforts

The 117th Congress will attempt to provide additional support to businesses, schools, and the general public as we continue testing for COVID-19 and distributing vaccines. The last COVID-19 relief bill signed into law was in April of 2020.

HCAOA will be pushing to ensure home care is recognized along with other providers caring for seniors. Access to child care benefits and funding for small business loans will be important as will access to personal protective equipment as supply chain issues continue.



Workforce

The clearest present challenge for the home care industry is maintaining an adequate workforce to care for our aging population. Nationwide, aging experts estimate that about 10,000 baby boomers turn 65 each day. In order to keep up with their demand for home care services and a general preference for aging-in-place, the home care industry will likely need to fill millions of caregiver jobs.

HCAOA will be working with Congress to promote opportunities that exist in the home care industry for American workers. It will also need to encourage Congress to expand legal immigration to address shortages of workers across the long-term care spectrum of providers.

Medicaid Coverage

President-Elect Biden earlier this summer issued a plan to invest \$450 billion in senior care over the next 10 years with a focus on home care. Whether something so significant could get through

Congress is open to debate. It is clear, however, that expanding Medicaid (and perhaps Medicare) to provide greater access to home and community-based care will be a topic of discussion in the new Congress.

HCAOA will be working to educate Members of Congress and the Biden Administration about the value of home care and the employer-based model its members represent.

Additionally, the HCAOA will be monitoring a variety of other tax, health, and labor policies within the Congress and the Biden Administration that may impact the home care community. These include, but are not limited to, the federal minimum wage, paid sick leave, health reform legislation, tax credits for home care services, electronic visit verification, and expanding health saving accounts to include home care.

Essential to HCAOA's success at the federal level in the new 117th Congress will be the voices of home care providers educating their lawmakers on the impact of these policies.

The clearest present challenge for the home care industry is **maintaining an adequate workforce** to care for our aging population. Nationwide, aging experts estimate that about **10,000 baby boomers turn 65 each day.**







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Post-Election Update

What the Biden Presidency Means for Home Care

THE FEDERAL GENERAL SERVICES ADMINISTRATION has recognized President-Elect Joe Biden as the apparent winner of the November 3 election, allowing Biden to coordinate with federal agencies on plans for taking office on January 20. Immediately following the election, the Biden/Harris Administration launched a plan outlining four top priorities:

- COVID-19 Pandemic
- Economic Recovery
- Racial Equality
- Climate Control

President-Elect Biden's main priority will be controlling the spread of COVID-19 with several initiatives focusing on the population most vulnerable to the virus, protecting frontline workers, and ensuring the government's support of small businesses. The Home Care Association (HCAOA) has summarized the issues most relevant to the home care industry from the standpoint of in-home care, clients, and operations.





President-Elect Biden's main priority will be controlling the spread of COVID-19 with several initiatives focusing on the population most vulnerable to the virus, protecting frontline workers, and ensuring the government's support of small businesses.

COVID-19 Pandemic

- Ensure all Americans have access to regular, reliable, and free testing.
- Double the number of drive-through testing sites.
- Invest in next-generation testing, including at-home tests and instant tests, so we can scale up our testing capacity by orders of magnitude.
- Set up a Pandemic Testing Board to produce and distribute tens of millions of tests.

Personal Protective Equipment (PPE)

- Give states, cities, tribes, and territories the critical supplies they need.
- Fully use the Defense Production Act to ramp up production of masks, face shields, and other PPE so that the national supply of personal protective equipment exceeds demand and our stores and stockpiles—especially in hard-hit areas that serve disproportionately vulnerable populations—are fully replenished.
- Build immediately toward an American-sourced manufacturing capability to ensure we are not dependent on other countries in a crisis.
- Provide clear, consistent, evidence-based guidance for how communities should navigate the pandemic—and the resources for schools, small businesses, and families to make it through.
- Provide a "restart package" that helps small businesses cover the costs of operating safely, including things like plexiglass and PPE.

 Establish a U.S. Public Health Jobs Corps to mobilize at least 100,000 Americans across the country with support from trusted local organizations in communities most at risk to perform culturally competent approaches to contact tracing and protecting at-risk populations. President-Elect Biden has expressed support for the home care industry, saying his Administration will make it "far easier to afford child care and to ensure aging relatives and people with disabilities have better access to home and community-based care."

Protect Older Americans and Other High-Risk Individuals

- Establish a COVID-19 Racial and Ethnic
 Disparities Task Force, as proposed by Vice
 President-Elect Harris, to provide recommendations and oversight on disparities in the
 public health and economic response. At the
 end of this health crisis, it will transition to a
 permanent Infectious Disease Racial Disparities Task Force.
- Create the Nationwide Pandemic Dashboard that Americans can check in real-time to help them gauge whether the local transmission is actively occurring in their zip codes. This information is critical to helping all individuals, but especially older Americans and others at high risk, understand what level of precaution to take.

Learn more about the Build Back Better plan at



https://buildbackbetter.com



Vaccine Projects					
Preclinical	Phase I	Phase II	Phase III	Limited use	Approved
164	37	17	13	6	0
Source: World Health Organization, December 2020					

VACCINES TYPICALLY REQUIRE YEARS OF RESEARCH and testing

before reaching the public, but given the number of cases and the severity of the coronavirus, scientists are racing to produce a safe and effective coronavirus vaccine that will be widely available by next year. As of early December, researchers are testing 55 vaccines in clinical trials on humans, and at least 87 preclinical vaccines are under active investigation in animals.

When will vaccines be available?

The Food and Drug Administration will consider emergency approval requests by December 10. After a vaccine is approved, first inoculations can occur quickly.

Who gets them first?

Planning documents call for patients, health care workers, public safety personnel, and vulnerable populations to receive vaccines first. Broad availability may come months later. Each state has been tasked with developing its own vaccine action plan. The Home Care Association of America has been on the front lines with our state chapters encouraging state health officials to include home care in their definition of health care workers.

Things to Know "" ABOUT VACCINE PLANNING

With the possibility of one or more COVID-19 vaccines becoming available before the end of the year, here are eight things you need to know about where those plans currently stand:

The safety of COVID-19 vaccines is a top priority.

The U.S. vaccine safety system ensures that all vaccines are as safe as possible.

Many vaccines are being developed and tested, but some might be ready before others—CDC is planning for many possibilities.

CDC is working with partners at all levels, including healthcare associations, on flexible COVID-19 vaccination programs that can accommodate different vaccines and scenarios.

At least at first, COVID-19 vaccines might be used under an Emergency Use Authorization (EUA) from the U.S. Food and Drug Administration (FDA).

An EUA facilitates the availability and use of medical treatments during public health emergencies such as the COVID-19 pandemic. Under an EUA, the FDA may allow the use of unapproved medical products, or unapproved uses of approved medical products in an emergency to diagnose, treat, or prevent serious diseases.

There may be a limited supply of COVID-19 vaccines before the end of 2020, but supply will continually increase in the weeks and months that follow.

The goal is for everyone to be able to easily get a COVID-19 vaccine as soon as large quantities are available. The plan is to have several thousand vaccination providers available, including doctors' offices, retail pharmacies, hospitals, and federally qualified health centers.

If there is limited supply, some groups may be recommended to get a COVID-19 vaccine first.

Experts are working on how to distribute these limited vaccines in a fair, ethical, and transparent way. The CDC makes vaccination recommendations based on input from the Advisory Committee on Immunization Practices.

At first, COVID-19 vaccines may not be recommended for children.

In early clinical trials for various COVID-19 vaccines, only non-pregnant adults participated. However, clinical trials continue to expand those recruited to participate. The groups recommended to receive the vaccines could change in the future.

Cost will not be an obstacle to getting vaccinated against COVID-19.

Vaccine doses purchased with U.S. taxpayer dollars will be given to the American people at no cost. However, vaccine providers will be able to charge administration fees for giving or administering the shot to someone.

COVID-19 vaccine planning is being updated as new information becomes available.

Check the CDC website at www.cdc.gov for the latest updates as vaccine plans develop.

Source: Centers for Disease Control and Prevention



NEW MEMBER BENEFIT

HCAOA Launches Agency Momentum Program

THE NEWEST BENEFIT FOR 2021 Home Care Association of America (HCAOA) members is Agency Momentum, an expertly-curated series of hour-long, monthly webinars covering the four key pillars of agency management:

- √ Recruitment and Retention
- √ Leadership and Management
- √ Growth Opportunities
- √ Improving Quality

"Many agency owners, including those who own independent agencies, spend the majority of their time working in their business rather than on their business. Having a standing time each month to work on the business—along with the benefit of HCAOA's expertise and network to help focus on individual aspects of the business is a highly valuable resource," said Vicki Hoak, HCAOA Executive Director.

The series kicks off this month with a special, 90-minute discussion on business planning for 2021 and best practices for setting your agency's one-year plan, as well as your 10-year vision, and determine what you need to do in Q1 to kick 2021 off on a growth path. Each session will be led by an industry expert.

"We are excited to be able to offer this Agency Momentum webinar series, especially with the ever-changing travel and training environment. As we built out the session schedule, we took great care to make sure we were selecting topics and speakers who can help have a direct and immediate impact on our members and would give practical advice on growing their business and improving the quality of care. We hope by creating a consistent time each month for home care agency owners to commit to their business that we could inspire greater action," Hoak said.

Visit www.hcaoa.org to register for Agency Momentum monthly webinars in the first quarter of 2021.



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Joint Commission leaders, staff, and surveyors recognize the courage and dedication of home care and community-based professionals, and we commend you for your daily efforts to put your patients' health and safety first.

We are here to support, assist and guide health care providers just like you, both personally and professionally, through this ever-evolving environment.

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Visit www.jointcommission.org/covid-19/ to access our special library of COVID-19 resources, which includes critical pandemic information and topics dedicated to enhancing your well-being. Also please feel free to reach out to our home care service team. Call 630.792.5070 or email homecare@jointcommission.org. We're here for you.



