

# Home Health Med Set Up Documentation

**\*\*The process that is explained in this document is optional and might not be used in all agencies. Please check with your agency leadership to determine if this applies to you.\*\***

The following steps will be used to comply with 484.55(c)(5) from the Centers for Medicare & Medicaid Services (CMS). **A review of all medications the patient is currently using in order to identify any potential adverse effects and drug reactions, including ineffective drug therapy, significant side effects, significant drug interactions, duplicate drug therapy, and noncompliance with drug therapy.**

## **Interpretive Guidelines §484.55(c)(5)**

The patient's clinical record should identify all medications that the patient is taking (both prescription and non-prescription) as well as times of medication administration and route. As part of the comprehensive assessment the Home Health Agency (HHA) nurse should consider, and the clinical record should document, that the HHA nurse considered each medication the patient is currently taking for possible side effects and the list of medications in its entirety for possible drug interactions. The HHA should have policies that guide HHA clinical staff in the event there is a concern identified with a patient's medication that should be reported to the physician.

In rehabilitation therapy only cases, the patient's therapist must submit a list of patient medications, which the therapist must collect during the comprehensive assessment, to an HHA nurse for review. The HHA should contact the physician if indicated.



## **Try It Out!**

1. Prior to home visit
  - a. Sync remote client.
  - b. Review remote client medication list for any medication orders placed in One Chart since the last home visit.
  - c. Move any medication refill orders to On Plan of Care and move any end dated medications to Not on POC.
  - d. Sync the remote client.
2. At the home visit
  - a. Review the medication list with the patient using the following workflow: WF320 Medication List Verification-Reconciliation.
  - b. Copy the medication list from the Reports > Medications tab by highlighting the medications and either right clicking and selecting "copy" or using Ctrl C.

| Medication   | Sig   | Start Date | End Date | Hospice Covered |
|--|---|------------|----------|-----------------|
| aspirin (ECOTRIN LOW STRENGTH) 81 MG enteric coated tablet | Take 81 mg by mouth 1 time per day                            |            |          |                 |
| atenolol (TENORMIN) 100 mg tablet                          | Take 100 mg by mouth 1 time per day                           | 9/2/2021   |          |                 |
| fexofenadine (ALLEGRA) 180 mg tablet                       | Take 1 tablet by mouth 1 time per day                         | 9/2/2021   |          |                 |
| fluticasone (FLONASE) 50 mcg/spray nasal spray             | Spray 2 sprays into each nostril 1 time per day               | 9/2/2021   |          |                 |
| levothyroxine (SYNTHROID) 137 mcg tablet                   | Take 137 mcg by mouth 1 time per day                          | 9/2/2021   |          |                 |
| tramadol (ULTRAM) 50 mg tablet                             | Take 50 mg by mouth every 6 hours as needed for moderate pain | 9/2/2021   |          |                 |

- Paste the medication list in the comment box of the Medication Management and Risks form by either right clicking and selecting "Paste" or using Ctrl V.
- With your cursor in the Medication Management Comment box, click F3 to enlarge the box.
- Review each medication listed and edit as needed. Remove unnecessary information such as start date, Disp, Refill and Medication Note.

Who manages medications?  
 Patient Spouse **HH/Hospice Agency** Facility Other (Specify)

Medication Management  
 Prescribed medications are taken properly and achieve their planned, therapeutic outcome.

Medication Management Risks

|  |                                  |
|--|----------------------------------|
| No risks identified                                    | Numerous medications (5 or more) |
| Improper Mediset use                                   | Not taking meds as prescribed    |
| Duplicate meds (generic vs brand name)                 | Drug diversion                   |
| Difficulty managing bottles, inhalers, eye drops, etc. | Financial                        |
| Multiple pharmacies                                    | Out of date meds                 |
| Improper storage                                       |                                  |

Medication Management Comments

aspirin (ECOTRIN LOW STRENGTH) 81 MG enteric coated tablet Take 81 mg by mouth 1 time per day.

atenolol (TENORMIN) 100 mg tablet Take 100 mg by mouth 1 time per day. 9/2/2021

fexofenadine (ALLEGRA) 180 mg tablet Take 1 tablet by mouth 1 time per day. 9/2/2021

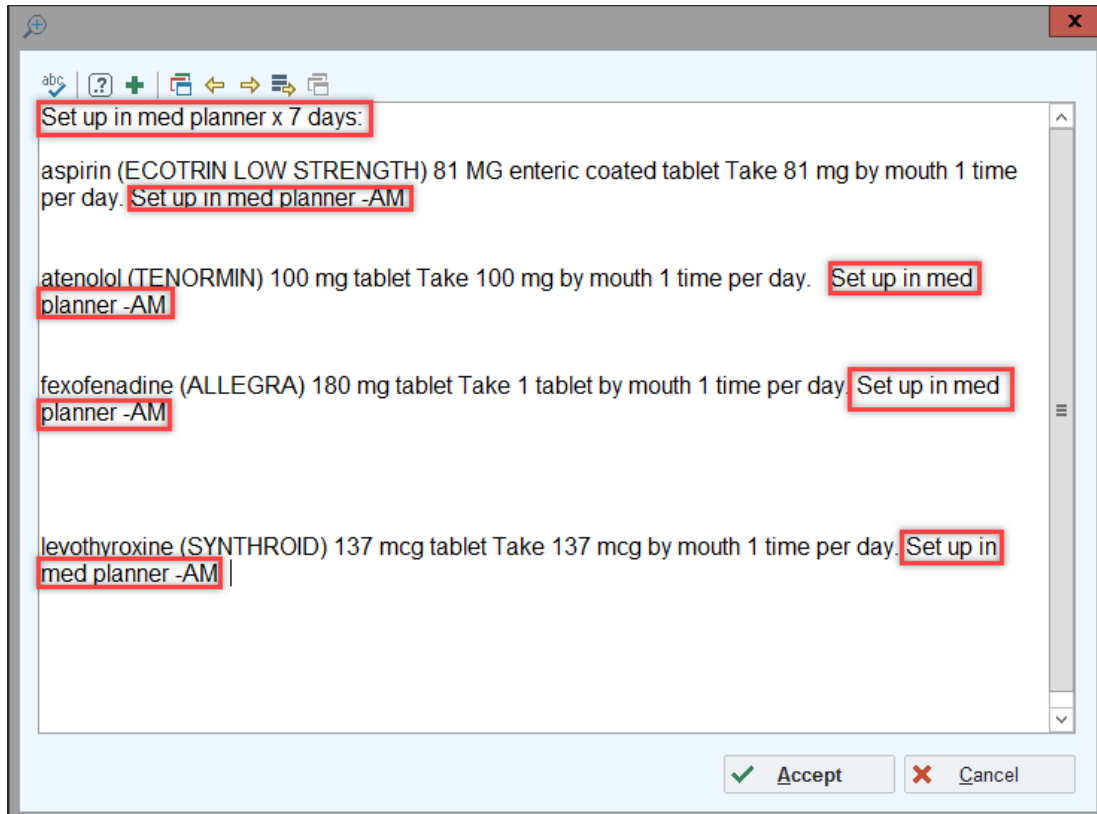
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tramadol (ULTRAM) 50 mg tablet Take 50 mg by mouth every 6 hours as needed for moderate pain. 9/2/2021

Accept Cancel

- f. For each medication, document the medication administration times and routes, if not already part of the medication order



- g. Add, change, or discontinue any medications in the Medication task that the patient reports during the medication review. Changes to the patient's medication list will only flow to the Summary Report after the Remote Client has been synced