

Home Health Face to Face Checklist

General:

- Is the encounter performed within the time frame (90 days before 30 days after)?
- Does the actual encounter visit note address the primary reason home care is being provided and does not simply include a diagnosis?
- Is it signed and dated prior to the submission of the claim for billing?
- Does it contain the date of the encounter?
- If the encounter was performed by an allowed non-physician practitioner, does the practitioner's documentation in the clinical record corroborate the encounter documentation in accordance with each state's standards of practice?
- Does information submitted by the Home Health Agency corroborate other medical record entries and align with the time period in which services were rendered?
- Is information submitted by the Home Health Agency signed by the physician?

Documentation to support the need for Home Health Services:

- Does it describe the patient's condition and symptoms, not just a list of diagnoses?
- Is the reason for Home Health services a:
 - > New problem or
 - An exacerbation of a previous problem Describe/support. Listing a date is not adequate to support an exacerbation

- If this a post-operative patient:
 - How long ago was the surgery? _____
 - Were there any complications? ______
- If pain is a symptom:
 - Is pain a new symptom? _____
 - How severe is the pain? _____

Does the patient have medical restrictions on activity?

Is the need for assistive devices documented?

Documentation to support the need for skilled services:

- Is there evidence that skilled Therapy is needed?
 - Restore patient function yes no
 - > Design or establish a maintenance program yes no
 - > Perform maintenance therapy yes no
- Is there evidence that skilled Physical Therapy (PT) is needed? (Note this is not an allinclusive list.)
 - > Assessment of functional deficits and home safety evaluation
 - Therapeutic Exercises
 - > Restore joint function for post joint replacement patient
 - Gait Training
 - > ADL Training
 - > Other _____

- Is there evidence that skilled Occupational Therapy (OT) is needed? (Note this is not an all-inclusive list.)
 - > Assessment of functional deficits and home safety evaluation
 - > Task oriented therapeutic exercise to improve/restore physical function
 - Task oriented therapeutic exercise to improve/restore sensory-integrative function
 - > ADL training; teaching compensatory techniques
 - > Design, fabricating and/or fitting or orthotic and self-help devices
 - Vocational and Prevocational Assessment and training
- Is there evidence that Speech Therapy is needed? (Note this is not an all-inclusive list.)
 - > Therapeutic exercise to improve swallowing
 - > Therapeutic exercise to improve language function
 - > Therapeutic exercise to improve cognitive function
- Is there evidence that Skilled Nursing is needed? (Note this is not an all-inclusive list.)

Teaching/training for
Observation & assessment for
Complex care plan management
Administration of certain medications
Psychiatric evaluation & therapy
Rehabilitation nursing/direct nursing care

Can these four questions be answered in the documentation?

- 1. What is the structural impairment?
- 2. What is the functional impairment?
- 3. What is the activity limitation?
- 4. How do the skills of a nurse or therapist address the specific structural/functional impairments and activity limitations cited in steps 1-3?

** It is recommended that you not use checkboxes and generalized terms and restating requirements would not be adequate without corroborating documentation.