

TREATMENT CONSIDERATIONS

1. Department Staff Productivity expectation is 90%
 - If there are barriers preventing staff from achieving the 90%, notify a Regional manager to discuss the barriers
2. Documentation time is non-billable and is therefore to be done point of service.
3. For all Payers following **Med B Rules** (Med B, Ins B, Managed B, PA, Private pay):
 - When **Progress Reports** are due (every 10th visit or sooner) the THERAPIST is to treat the patient and complete the progress report. For WI sites, this is for all payers.
 - The **Discharge visit and DC Summary** are to be done by the THERAPIST. For WI sites, this is for all payers
4. For **all Payers**, when a **Recert** is due, the THERAPIST is to treat the patient and complete the Recert form in RO.
5. Therapist Assistants
 - Never discharge a patient without consulting with a therapist, preferably the evaluating therapist
 - Document patient conference with therapist weekly in Team communication section on note
6. Co-treat billing
 - If two of the same discipline treat a patient, each can bill for 1/2 the time.
Example: PT/PTA treat a patient for 60 mins; each bill for 30 mins
 - If two different disciplines treat a patient, each can bill for total time spent for all patients **for Med A and Ins pts**
Example: PT/OT co-tx 60 min, each bill 60 min
7. If a resident is not on your therapy caseload, DO NOT assist the resident personally
 - If resident requests assistance, you are responsible for getting the CNA
 - **DO NOT** issue food, drink, etc. to residents unless you are aware of their dietary restrictions and have asked permission of nursing.
6. ADLs in the mornings
 - Notify the patient's primary RN that ADLs will be provided on the following day
 - RN will communicate this to staff for following day
7. Cushions
 - Do not change a patient's cushion without consulting with the RN
 - RNs issue cushions for skin care
 - If a resident has a need for a cushion, notify Rehab RN or Floor Manager
8. Wheelchairs
 - **DO NOT** change a resident's wheelchair without consulting the maintenance supervisor
9. Isolation Rooms
 - **DO NOT ENTER** a room with an isolation cart outside room
 - Contact the primary RN for precautions before entering the room
10. Department Hours
 - Determined by department supervisor
 - Therapy department must be opened, in operation, and have at least 1 therapist working by 9am
 - Hours of operation should be staggered in therapy room so that department is not overcrowded and so that department is active until 5 or 6 pm
 - Therapy treatments are discouraged before 6 am and after 6pm
 - Exception: evals by a PRN staff, high level young population, patient specific request, or Out Patients
11. Completing Charges for patients
 - Therapy services (treatment codes and minutes) should not be billed in Net Health until after the service has been completed.