

TBI – Waiver Services Supplemental – Physical Therapy Service

The waiver includes adult day services, attendant care, case management, homemaker, residential based habilitation, respite care, structured day program, supported employment, behavior management/behavior program and counseling, environmental modifications, healthcare coordination, occupational therapy, personal emergency response system, physical therapy, specialized medical equipment, and supplies, speech-language therapy and transportation. These are waiver services options that can be provided and will be services that people are receiving. Not everyone will be receiving the same services, however. Some will receive Physical Therapy or Transportation or Attendant Care, or some other service that reflects their needs.

The **Person Centered Compliance Tool** will be supplemented with the following tool depending on what waiver service the person is currently receiving. A review of the CCB/POC will determine what services the person has. The surveyor will determine by reviewing the CCB/POC and talking with the Case Manager the exact services the person has. By so doing, the surveyor will take the appropriate supplemental Provider Survey Tool to complete the survey. The following is an example of that supplemental Provider Survey Tool for a person who is receiving: **Physical Therapy Services.**

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| Physical Therapy Services | | Discovery Mechanisms | | |
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| <p>Waiver Services: Physical Therapy Services</p> <p>Waiver Assurances</p> <p>Recommended Probes</p> | | <p>Discovery mechanisms are not meant to be inclusive. They are meant to be suggestions to gather information for the surveyor. Guidelines are intended to help the surveyor to make decisions about the presence or absence of the indicators. The Discovery mechanisms listed here in no way imply they are meant to be directives for completion, or a requirement to be answered in every instance.</p> | | |
| <p>Physical Therapy Services:</p> <p>Desired Outcome: Physical Therapy Services means services provided by a licensed physical therapist.</p> | <p>PT I.A.1 Physical Therapy will be provided by a licensed Physical Therapist and authorized by the Individual's Plan of Care/Cost Comparison Budget (POC/CB),</p> <p>1. Are the services provided by the licensed Physical Therapist reflected in the Individual's POC? 2. Is the need for PT services documented by an appropriate screening or assessment? 3. Is the delivery of PT services authorized in the Individual's POC?</p> | <p>Spending Time With People (Initially during the conversation with the person using the Personal Outcome Measures®, then throughout the survey process.)</p> <p>Examples only: specific situations may change observations.</p> | <p>Conversations With People</p> <p>Selected Examples only: specific situations may change conversations with people.</p> | <p>Review of Documents</p> <p>Examples only: specific situations may change documents needing review.</p> |
| <p>Service Standards: Physical Therapy includes screening and assessment, treatment and training programs designed to preserve and improve abilities for independent functioning, such as gross and fine motor skills, range of motion, strength, muscle tone, activities of daily living. Also included are planning and reporting, direct therapeutic intervention, training</p> | <p>Observe to determine if the Individual receives any Physical therapy services. (For a list of services see the Service Standards)</p> <p>Ask the Case Manager to describe the physical therapy services the Individual receives.</p> <p>If the Physical Therapist is available, ask that person to describe the PT services provided.</p> | <p>Review the Individual's POC to confirm the need and authorization for PT services.</p> <p>Review the documentation that confirms the credentials held by the PT providing the services.</p> | | |

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| <p><i>and assistance with adaptive aids and devices, consultation or demonstration of techniques with other service providers and family members and participating on the interdisciplinary team, when appropriate, for the development of the service plan.</i></p> | | | | |
| <p>Documentation Standards</p> | <p>PT I.B.1 Physical Therapy Services are documented to reflect the individual's identified needs, with the information required by Waiver assurances.</p> <ol style="list-style-type: none"> 1. Is there an assessment completed by a qualified physical therapist? 2. Are the physical therapy services outlined in the POC? 3. Is there evidence of appropriate credentials for the physical therapist service provider? 4. Are there attendance records, therapist logs and/or charts detailing services provided with dates and times? 5. Is there evidence of a prior Medicaid Service denial of PT services based on individual need? | | <p>Ask the Case Manager for any documentation for prior denial of PT services based on individual need.</p> | <p>Review the assessment completed by the licensed therapist.</p> <p>Review the attendance records to confirm the documentation of services, dates and times.</p> <p>Review any documents that document the denial of PT services.</p> <p>A Medicaid State Plan prior authorization denial is required before reimbursement is available through the Medicaid waiver for this service.</p> |