

BLOG

Home Health CoPs Update: New Opportunities for OTs

By Terrey L. Hatcher, on October 25, 2021

There's a new opportunity for occupational therapists practicing in home health settings. OTs working in home health can initiate the start of care in more situations beginning in 2022 under changes to the Medicare conditions of participation (CoPs). With this change, home health leaders need to ensure proper training, including procedural knowledge and coding, for their OT team members.

Taking advantage of the changed rules will allow home health agencies to more efficiently use the first visit, which has positive implications for clinical outcomes and the agency's bottom line, observed Karen Vance, BSOT, discussing the CoP update in a recent [Relias webinar](#).

As the Centers for Medicare and Medicaid Services (CMS) noted in its fact sheet on the [Home Health Prospective Payment System rate update](#), the 2021 Consolidated Appropriations Act allows occupational therapists (OTs) to conduct initial and comprehensive assessments for Medicare beneficiaries under the home health benefit when the care plan calls for either physical therapy (PT) or speech-language pathology (SLP) to establish program eligibility, includes OT services, and does not initially include skilled nursing care. To align with the appropriations act, CMS is changing the requirements for responsibility for the initial assessment in the home health conditions of participation (CoP).

Under previous rules, an OT was not authorized by Medicare to conduct an initial assessment in home health.



Terrey L. Hatcher

Director of Content Marketing, Relias

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OTs Can Conduct Medicare Initial Assessment

Under the new CoPs, if therapy services establish home health eligibility, OT is included in the care plan, and no skilled nursing care is designated, the start of care visit can be done by an OT instead of having to wait for a nurse, PT, or SLP to be available.

During her presentation, Vance explained the progression of rules allowing therapists to conduct the home health admission visit. Vance has more than 35 years of experience as an OT, including serving as a consultant and as chairperson of the American Occupational Therapy Association Home and Community Health Special Interest Section.

Previously, the Medicare CoPs required that the initial and comprehensive assessments be conducted by the disciplines that establish eligibility for the patient to receive home health services. OT is not a qualified stand-alone home health service under Medicare.

Yet other payers already allowed OTs to initiate home health services. "People assumed that because Medicare didn't allow OTs to perform the start of care that other payers did not allow it," she notes.

Keep in mind that under the new rule OT is not a qualified stand-alone service under Medicare, Vance said.

Flexibility for Agency at Start of Care

The intent of the new Medicare rule is to add flexibility to let the agency decide who is appropriate to perform the start of care assessments, Vance said. The challenges of the pandemic and the introduction of the Patient-Driven Groupings Model (PDGM) in 2020 strained home health agencies' capacity to initiate the start of care in the timely manner required.

Agency leaders will now have the flexibility to choose the discipline best suited for conducting the comprehensive assessment at the start of care. This includes collecting and analyzing assessment data needed to complete the Outcome and Assessment Information Set (OASIS).

Vance shared an example of an appropriate use of this option. A client with a hip replacement lives alone and has orders for PT and OT in home health. The OT could meet the client and nearby family at the home on the day of release. The OT could conduct the initial assessment and provide information on where the family can obtain a raised toilet seat and shower chair for safe bathroom use.

The OT would reinforce hip precautions and begin the comprehensive assessment with OASIS data collection. She would do this while performing the usual OT evaluation of activities of daily living.

With that approach, the OT is able to address activities crucial for client success on the first day and is able to initiate care in a timely manner. The OT also is able to communicate the assessment findings and visit information to the entire home health agency team.

OTs Can Step Up and Coordinate Care

This change in authority allows more interdisciplinary care management, Vance said, and increased data accuracy in functional items that make up the PDGM payment in home health. With more accurate assessments, home health agencies have opportunities for improved coding, billing, and outcomes.

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PDGM also incentivizes agencies to be more collaborative in coordinating holistic care, rather than maintaining silos between disciplines.

These changes can provide opportunities for home health therapists to redefine their roles in a home health agency and prove their value by linking the therapy provided to patient outcomes, Vance observed. Better outcomes can improve a home health agency's quality measures and star rating.

To ensure compliance, Vance advises home health therapists and leaders to go to the source of the rules, the Federal Record. Home health agencies also need to ensure their care teams have adequate education to fill knowledge gaps in the start of care process, she said.

With that knowledge in hand, therapists can stay aligned with what works best for the care team and the patient while complying with the home health CoP for Medicare.

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