
Are You Billing the New PT and OT Evaluation Codes Properly?

HCCA COMPLIANCE INSTITUTE
TUESDAY, MARCH 28, 2017, SESSION 603

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Presenters



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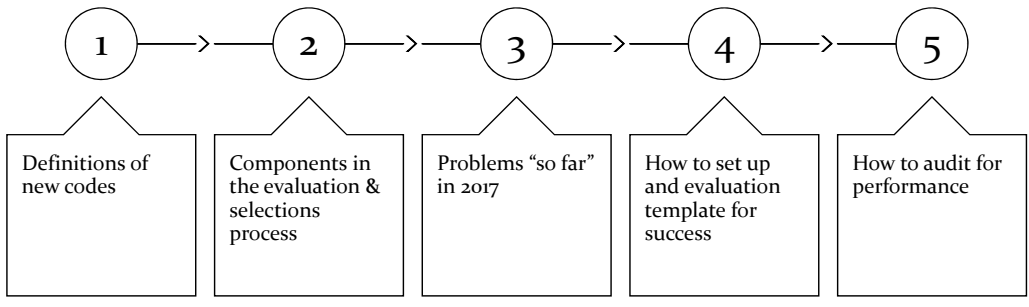


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Objectives

- Understand definitions of new PT and OT evaluation codes
- Learn the components that will determine the level of the evaluation code billed
- Take away an audit tool to ensure your therapy department's compliance

What We will Cover



New Evaluation Codes

WHO, WHAT, WHEN, WHERE AND WHY

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Physical Therapy Eval Codes

New CPT	Description	Personal Factors & Comorbidities	Body Structures & Functions, Activity Limitations, Participation Restrictions	Stability	Clinical Decision Making	Typical Face to Face Time
97161	Low Complexity Eval	None	1-2	Stable	Uncomplicated	20 minutes
97162	Moderate Complexity Eval	1-2	3 or more	Evolving	Moderate complexity	30 minutes
97163	High Complexity Eval	3 or more	4 or more Elements	Unstable	Unpredictable Clinical Presentation	45 minutes

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Physical Therapy Eval Codes

New CPT	Description	Personal Factors & Comorbidities	Body Structures & Functions, Activity Limitations, Participation Restrictions	Stability	Clinical Presentation	Typical Face to Face Time
97161	Low Complexity Eval	None	1-2	Stable	Predictable Clinical Presentation	20 minutes
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97163	High Complexity Eval	3 or more	4 or more Elements	Unstable	Unpredictable Clinical Presentation	45 minutes

Personal Factors: such as sex, age, coping styles, social background, education, and overall behavior patterns that may influence how disability is experienced by the individual

Comorbidities that impact current function and ability to progress through a plan of care

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97163	High Complexity Eval	3 or more	4 or more Elements	Unstable	Unpredictable Clinical Presentation	45 minutes

Body Functions: Physiological functions of body systems (including psychological functions).

Activity: Execution of a task or action by an individual.

Participation Restrictions: Problems an individual may experience in involvement in life situations

Physical Therapy Eval Codes

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97161	Low Complexity Eval	None	1-2	Stable	Uncomplicated	20 minutes
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Fluctuation in pain, fluctuating patient reported outcomes and functional tests, variable response to activity/prior treatment
Frequent acute episodes

Physical Therapy Eval Codes

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Clinical Patterns assessed in initial evaluation classification
Aggravating and easing signs
Response to examination

Physical Therapy Eval Codes

New CPT	Description	Personal Factors & Comorbidities	Body Structures & Functions,		Clinical Decision Making	Typical Face to Face Time
97161	Low Complexity Eval	None	Guideline only Typical expected face to face time Not really a factor in determining complexity			20 minutes
97162	Moderate Complexity Eval	1-2	3 or more	Evolving	Moderate complexity	30 minutes
97163	High Complexity Eval	3 or more	4 or more Elements	Unstable	Unpredictable Clinical Presentation	45 minutes

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Occupational Therapy Eval Codes: "Questions"

New CPT	Description	Performance Deficits	Clinical Decision Making	Comorbidities Affecting Occupational Performance	Modification or Assistance to Complete Eval	Approximate Face to Face Time
97165	Low Complexity Eval	1-3	Low complexity	None	None	30 minutes
97166	Moderate Complexity Eval	3-5	Moderate complexity	Maybe	Min-Moderate	45 minutes
97167	High Complexity Eval	5 or more	High complexity	Yes	Max	60 minutes

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Occupational Therapy Eval Codes

New CPT	Description	Performance Deficits	Clinical Decision Making	Relating to physical, cognitive or psychosocial skills) which result in activity limitations and/or participation restrictions		Approximate Face to Face Time
97165	Low Complexity Eval	1-3	Low complexity			30 minutes
97166	Moderate Complexity Eval	3-5	Moderate complexity	Maybe	Min-Moderate	45 minutes
97167	High Complexity Eval	5 or more	High complexity	Yes	Max	60 minutes

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Occupational Therapy Eval Codes

New CPT	Description	Performance Deficits	Clinical Decision Making	Comorbid Affective Occupational Performance	Based on analysis of the occupational profile, analysis of data from problem-focused assessment(s), and consideration of treatment options.	
97165	Low Complexity Eval	1-3	Low complexity	None	None	30 minutes
97166	Moderate Complexity Eval	3-5	Moderate complexity	Maybe	Min-Moderate	45 minutes
97167	High Complexity Eval	5 or more	High complexity	Yes	Max	60 minutes

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Occupational Therapy Eval Codes

New CPT	Description	Performance Deficits	Clinical Decision Making	Comorbidities Affecting Occupational Performance	Modification or Assistance to Complete Eval	Approximate Face to Face Time
97165	Low Complexity Eval	1-3	Low complexity	None	None	30 minutes
97166	Moderate Complexity Eval	3-5	Moderate complexity	Maybe	Min-Moderate	45 minutes
97167	High Complexity Eval	5 or more	High complexity	Yes	Max	60 minutes

Must show how comorbidity affects occupational performance

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Occupational Therapy Eval Codes

New CPT	Description	Performance Deficit	Clinical Decision Making	Comorbidities Affecting Occupational Performance	Modification or Assistance to Complete Eval	Approximate Face to Face Time
97165	Low Complexity Eval	1-3	Low complexity	None	None	30 minutes
97166	Moderate Complexity Eval	3-5	Moderate complexity	Maybe	Min-Moderate	45 minutes
97167	High Complexity Eval	5 or more	High complexity	Yes	Max	60 minutes

For example: physical or verbal cueing necessary to complete the evaluation

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Occupational Therapy Eval Codes

New CPT	Description	Performance Definition	Complexity	Other	Completion	Approximate Face to Face Time
97165	Low Complexity Eval	1-3	Low complexity	None	None	30 minutes
97166	Moderate Complexity Eval	3-5	Moderate complexity	Maybe	Min-Moderate	45 minutes
97167	High Complexity Eval	5 or more	High complexity	Yes	Max	60 minutes

Guideline only
Typical expected face to face time
Not really a factor in determining complexity

Contrasting PT & OT Evaluation Complexity

	PT	OT
History	Personal Factors and comorbidities as they affect the plan of care	Occupational Profile, including review of medical and/or therapy records Comorbidities as they affect occupational performance
Clinical Decision Making	Using standardized instruments and measurable assessment of functional outcome	Includes an analysis of the occupational profile, problem focused assessment and consideration of treatment options
Clinical Findings	<ul style="list-style-type: none"> • Body Structures and Functions • Activity Limitations • Participation Restrictions Using standardized tests and measurements	<ul style="list-style-type: none"> • Physical • Cognitive • Psychosocial Skills As related to current functional performance
Clinical Presentation	Stable? Evolving? Unstable; Unpredictable	Degree of modification of tasks or assistance necessary to enable patient to complete evaluation

PT Evaluation Process

- History
 - Personal factors, comorbidities
- Examination of body systems
 - Body structures & functions, activity limitations, participation restrictions
- Clinical presentation
 - Stable, evolving, unstable
- Clinical decision making
 - Complexity in plan of care

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OT Evaluation Process

- Occupational Profile & history
 - Record review
 - Review PLOF w/patient (physical, cognitive, psychosocial)
- Assessment
 - Identify impairments (physical, cognitive, psychosocial)
- Clinical decision making
 - Level of assessment
 - Number of treatment options
 - Task Modifications

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ICF Definitions

- **Body functions** - The physiological functions of body systems (including psychological functions).
- **Body structures** - Anatomical parts of the body such as organs, limbs and their components.
- **Impairments** - Problems in body function and structure such as significant deviation or loss.
- **Activity** - The execution of a task or action by an individual.
- **Participation** - Involvement in a life situation.
- **Activity limitations** - Difficulties an individual may have in executing activities.
- **Participation restrictions** - Problems an individual may experience in involvement in life situations.
- **Environmental factors** - The physical, social and attitudinal environment in which people live and conduct their lives. These are either barriers to or facilitators of the person's functioning.

Source: WHO 2001:8,10

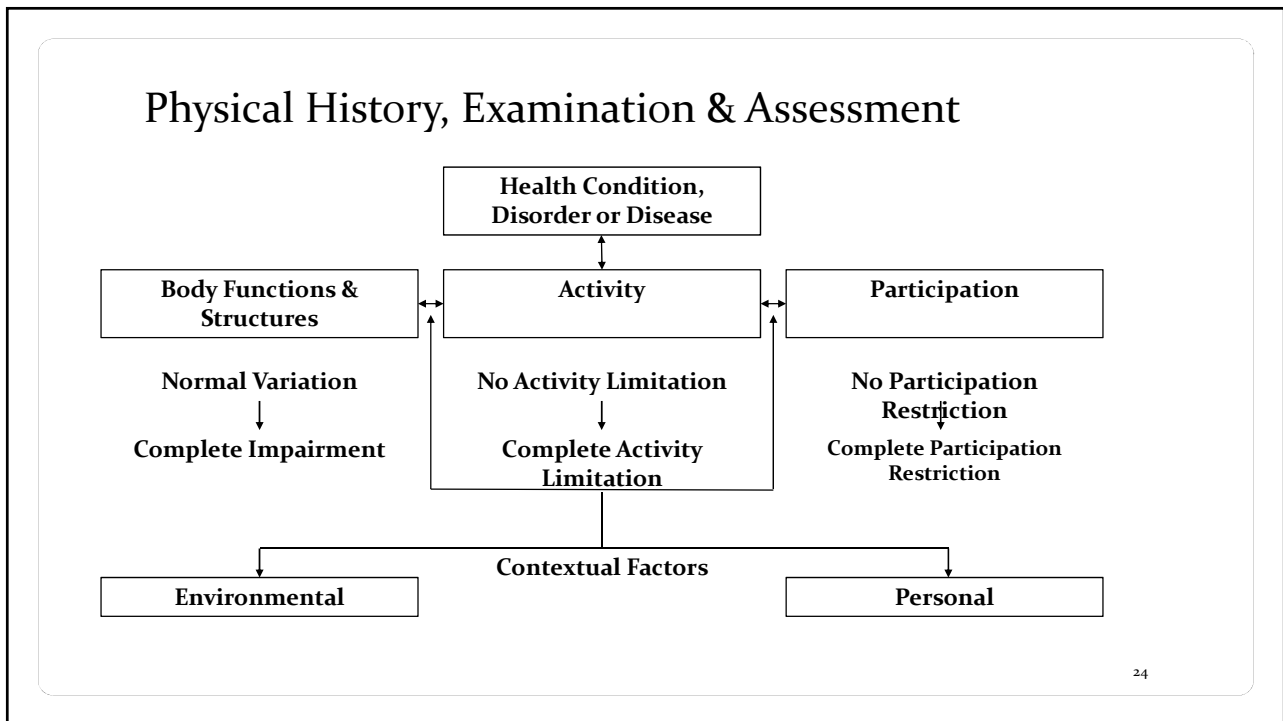
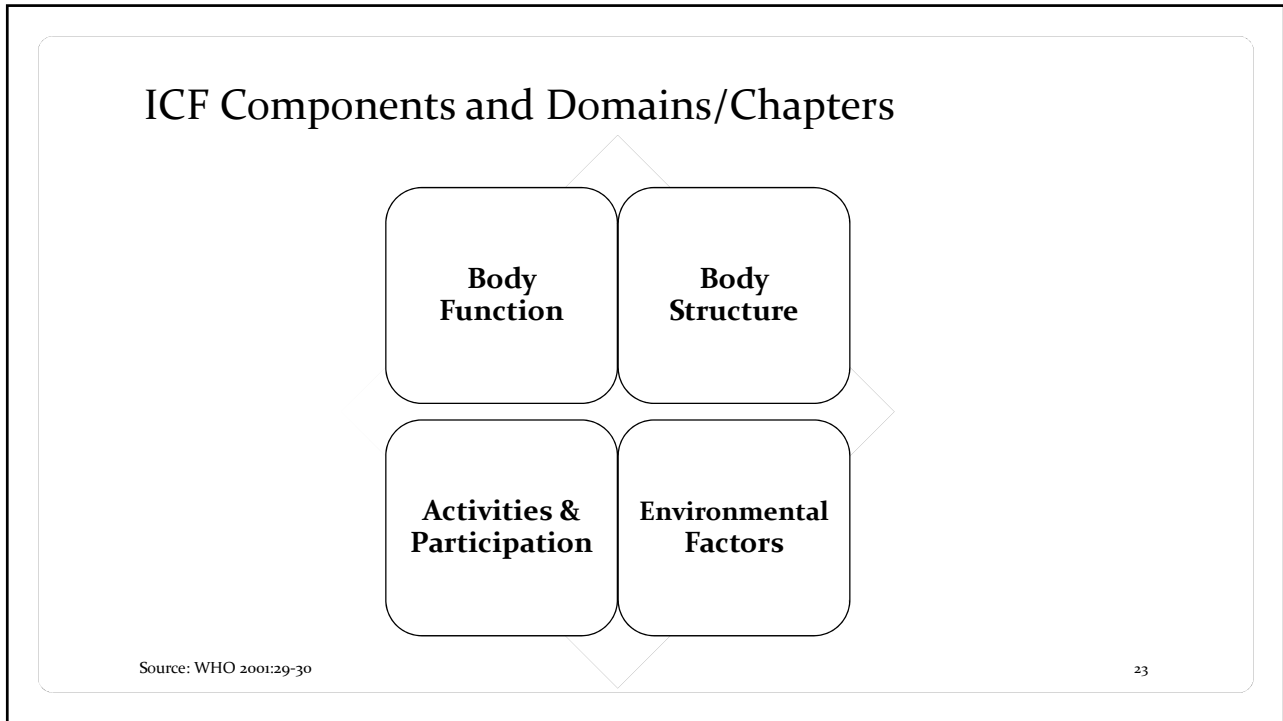
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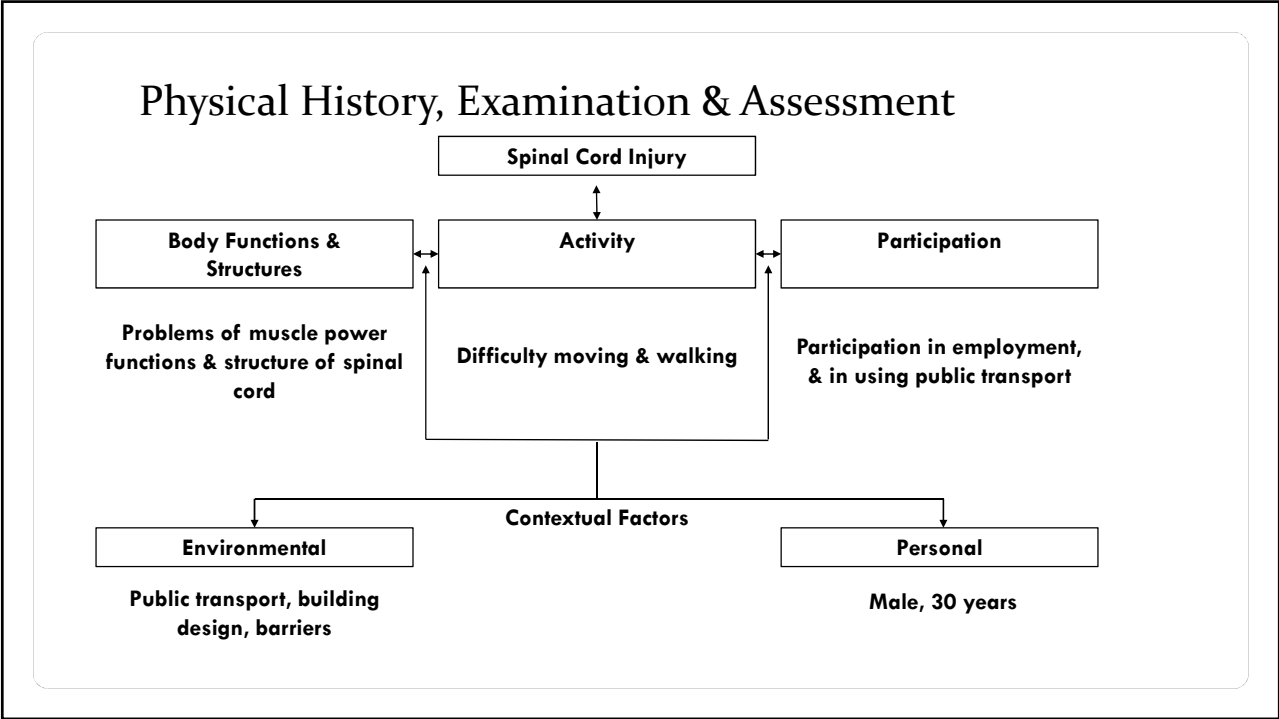
ICF Definitions

- **Functioning** is an umbrella term for **body function, body structures, activities and participation**. It denotes the positive or neutral aspects of the interaction between a person's health condition(s) and that individual's contextual factors (environmental and personal factors).
- **Disability** is an umbrella term for **impairments, activity limitations and participation restrictions**. It denotes the negative aspects of the interaction between a person's health condition(s) and that individual's contextual factors (environmental and personal factors).

Source: WHO 2001:8,10

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Auditing for Compliance

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UPCODING, UNDERCODING AND WHO KNOWS HOW TO CODE?

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Why?

- Ensure billed code is supported by the documentation
- Identify needed changes in your EMR to support the codes
- Identify additional education focus areas related to the codes

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When?

- For the first year of implementation of these codes, CMS has decided not to revise Medicare Benefits Policy Manual to reflect the new codes and has instructed auditors to hold off on audits for this first year

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How?

- Develop an audit tool based on code definitions

- Test your tool!
 - IRR if multiple auditors

- Determine audit sample size
 - Be Realistic

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LOCATION: _____ PATIENT NAME: _____ DOS: _____ THERAPIST: _____

History	Total # Checks	Check all IMPACTING POC, if not impacting POC then do not check: <input type="checkbox"/> Comorbidity 1 <input type="checkbox"/> Comorbidity 2 <input type="checkbox"/> Comorbidity 3 <input type="checkbox"/> Sex <input type="checkbox"/> Age <input type="checkbox"/> Coping Style <input type="checkbox"/> Social Background <input type="checkbox"/> Education <input type="checkbox"/> Profession <input type="checkbox"/> Past / Current Experience <input type="checkbox"/> Behavior Pattern <input type="checkbox"/> Character		
Examination	Total # Checks	Body Systems: Musculoskeletal (Symmetry, ROM, Strength, Height, Weight, Pain, Posture): <input type="checkbox"/> Head <input type="checkbox"/> Neck <input type="checkbox"/> Back <input type="checkbox"/> LE <input type="checkbox"/> UE <input type="checkbox"/> Trunk Neuromuscular: <input type="checkbox"/> Balance <input type="checkbox"/> Gait/Locomotion <input type="checkbox"/> Transfers <input type="checkbox"/> Bed Mobility <input type="checkbox"/> Motor Control/Learning <input type="checkbox"/> Cardiovascular/Pulmonary (HR, RR, BP, Edema) <input type="checkbox"/> Integumentary (Pliability (texture), scar formation, color, integrity, wound) <input type="checkbox"/> Other (Ability to Make Needs Known; Consciousness; Orientation; Learning Preference; Expected Behavioral/Emotional Response) Activity Limitation: <input type="checkbox"/> Bed Mobility <input type="checkbox"/> Transfers <input type="checkbox"/> Locomotion Level <input type="checkbox"/> Stairs <input type="checkbox"/> Bathing <input type="checkbox"/> Dressing <input type="checkbox"/> Toileting <input type="checkbox"/> Self Feeding <input type="checkbox"/> Hygiene/Grooming <input type="checkbox"/> Reaching Overhead <input type="checkbox"/> Bend <input type="checkbox"/> Squat <input type="checkbox"/> Lift <input type="checkbox"/> Carry <input type="checkbox"/> Stand <input type="checkbox"/> Sleep <input type="checkbox"/> Sit <input type="checkbox"/> Continence <input type="checkbox"/> Other Participation Restriction: <input type="checkbox"/> Work <input type="checkbox"/> School <input type="checkbox"/> Church <input type="checkbox"/> Community Activity <input type="checkbox"/> Drive <input type="checkbox"/> Volunteer <input type="checkbox"/> Interpersonal Rel'ship <input type="checkbox"/> Meal Prep <input type="checkbox"/> Cleaning <input type="checkbox"/> Shop <input type="checkbox"/> Laundry <input type="checkbox"/> Medication Mgmt <input type="checkbox"/> Personal Finances <input type="checkbox"/> School <input type="checkbox"/> Other		
Clinical Presentation		<input type="checkbox"/> Stable &/or Uncomplicated	<input type="checkbox"/> Evolving with Changing Characteristics	<input type="checkbox"/> Unstable & Unpredictable Char.
Code:	History	Examination	Clinical Presentation	Clinical Decision Making
Low Complexity -- 97161	<input type="checkbox"/> None	<input type="checkbox"/> 1-2	<input type="checkbox"/> Stable/Uncomplicated	<input type="checkbox"/> Low
Moderate Complexity-- 97162	<input type="checkbox"/> 1-2	<input type="checkbox"/> 3+	<input type="checkbox"/> Evolving with Changing Characteristics	<input type="checkbox"/> Moderate
High Complexity--97163	<input type="checkbox"/> 3+	<input type="checkbox"/> 4+	<input type="checkbox"/> Unstable/Unpredict.	<input type="checkbox"/> High
PT EVAL CPT CODE SUPPORTED: <input type="checkbox"/> 97161 (Low) <input type="checkbox"/> 97162 (Moderate) <input type="checkbox"/> 97163 (High)				

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PT: History

Check all IMPACTING POC, if not impacting POC then do not check:

- Comorbidity 1 Comorbidity 2 Comorbidity 3
- Sex Age Coping Style Social Background Education
- Profession Past / Current Experience Behavior Pattern Character

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PT: Examination

Body Systems/Structure/Function:

Musculoskeletal (Symmetry, ROM, Strength, Height, Weight, Pain, Posture):

- Head Neck Back LE UE Trunk

Neuromuscular:

- Balance Gait/Locomotion Transfers Bed Mobility
- Motor Control/Learning

Cardiovascular/Pulmonary (HR, RR, BP, Edema)

Integumentary (Pliability (texture), scar formation, color, integrity, wound)

Other (Ability to Make Needs Known; Consciousness; Orientation; Learning Preference; Expected Behavioral / Emotional Response)

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PT: Examination

Activity Limitation:

- Bed Mobility
- Transfers
- Locomotion Level
- Stairs
- Bathing
- Dressing
- Toileting
- Self Feeding
- Hygiene/Grooming
- Reaching Overhead
- Bend
- Squat
- Lift
- Carry
- Stand
- Sleep
- Sit
- Continenence
- Other

Participation Restriction:

- Work
- School
- Church
- Community Activity
- Drive
- Volunteer
- Interpersonal Rel'ship
- Meal Prep
- Cleaning
- Shop
- Laundry
- Medication Mgmt
- Personal Finances
- School
- Other

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PT: Clinical Presentation

- Stable and/or uncomplicated characteristics
 - Signs/symptoms remain localized to body structure/function
- Evolving clinical presentation with changing characteristics
 - Signs/symptoms peripheralizing or changing
 - Weight Bearing changes
- Unstable and unpredictable characteristics
 - Pattern of signs/symptoms difficult to establish
 - Red Flags
 - Medical Issues Impacting – orthostatic

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Location: _____ Patient Name: _____ DOS: _____ Therapist: _____

Occupational Profile & History	<input type="checkbox"/> Brief History Including Review of Records Relating to Presenting Problem	<input type="checkbox"/> Expanded Review of Records & add'l review of physical, cognitive, psychosocial hx related to current func. performance	<input type="checkbox"/> Review of Records and Extensive Add'l review of physical, cognitive, psychosocial hx related to current func. performance
Assessment (performance deficits)	Total # of Checks	Body Structure/Function/Physical Skills: <input type="checkbox"/> Balance <input type="checkbox"/> Mobility <input type="checkbox"/> Strength <input type="checkbox"/> Endurance <input type="checkbox"/> FMC <input type="checkbox"/> GMC <input type="checkbox"/> Sensation <input type="checkbox"/> Dexterity <input type="checkbox"/> Vision <input type="checkbox"/> Hearing <input type="checkbox"/> Vestibular <input type="checkbox"/> Proprioception <input type="checkbox"/> Pain <input type="checkbox"/> ROM <input type="checkbox"/> Tone <input type="checkbox"/> Continence <input type="checkbox"/> Wound Cognitive Skills: <input type="checkbox"/> Attention <input type="checkbox"/> Perception <input type="checkbox"/> Thought <input type="checkbox"/> Understand <input type="checkbox"/> Problem Solve <input type="checkbox"/> Sequencing <input type="checkbox"/> Learn <input type="checkbox"/> Memory <input type="checkbox"/> Emotional <input type="checkbox"/> Consciousness <input type="checkbox"/> Orientation <input type="checkbox"/> Temperment/Personality <input type="checkbox"/> Energy/Drive Psychosocial Skills: <input type="checkbox"/> Interpersonal Interaction <input type="checkbox"/> Habits <input type="checkbox"/> Routines & Behaviors <input type="checkbox"/> Coping Strategies <input type="checkbox"/> Environmental Adaptations	
Clinical Decision Making	<input type="checkbox"/> Low <input type="checkbox"/> Problem Focused Assessment <input type="checkbox"/> Limited # of Treatment Options <input type="checkbox"/> No Comorbidities	<input type="checkbox"/> Moderate <input type="checkbox"/> Detailed Assessment <input type="checkbox"/> Several Treatment Options <input type="checkbox"/> May have comorbidities impacting occupational performance	<input type="checkbox"/> High <input type="checkbox"/> Comprehensive Assessment <input type="checkbox"/> Multiple Treatment Options <input type="checkbox"/> Presence of comorbidities impacting occupational performance
	<input type="checkbox"/> No Modification of Tasks or assist necessary to complete evaluation	<input type="checkbox"/> Min-Mod Modification of Tasks or assist with assess necessary to complete eval	<input type="checkbox"/> Significant Modification of Tasks or assist with assess is necessary to complete eval
Code:	Occupational Profile & History	Performance Deficits	Clinical Decision Making
Low Complexity -- 97165	<input type="checkbox"/> Brief	<input type="checkbox"/> 1-3	<input type="checkbox"/> Low
Moderate Complexity--97166	<input type="checkbox"/> Expanded	<input type="checkbox"/> 3-5	<input type="checkbox"/> Moderate
High Complexity--97167	<input type="checkbox"/> Extensive	<input type="checkbox"/> 5+	<input type="checkbox"/> High
OT EVAL CPT CODE SUPPORTED: <input type="checkbox"/> 97165 (Low) <input type="checkbox"/> 97166 (Moderate) <input type="checkbox"/> 97167 (High)			

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OT: Occupational Profile & HX

<input checked="" type="checkbox"/> Brief History Including Review of Records Relating to Presenting Problem	<input type="checkbox"/> Expanded Review of Records & add'l review of physical, cognitive, psychosocial hx related to current func. performance	<input type="checkbox"/> Review of Records and Extensive Add'l review of physical, cognitive, psychosocial hx related to current func. performance
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OT: Assessments (Performance Deficits)

- **Body Structure/Function/Physical Skills:**
 - Balance Mobility Strength Endurance FMC GMC Sensation
 - Dexterity Vision Hearing Vestibular Proprioception Pain ROM
 - Tone Contenance Wound
 -
- **Cognitive Skills:**
 - Attention Perception Thought Understand Problem Solve Sequencing
 - Learn Memory Emotional Consciousness Orientation
 - Temperament/Personality Energy/Drive
 -
- **Psychosocial Skills:**
 - Interpersonal Interaction Habits Routines & Behaviors Coping Strategies
- Environmental Adaptations

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OT: Clinical Decision making

Low	<input type="checkbox"/> Moderate	<input type="checkbox"/> High
<input type="checkbox"/> Problem Focused Assessment	<input type="checkbox"/> Detailed Assessment	<input type="checkbox"/> Comprehensive Assessment
<input type="checkbox"/> Limited # of Treatment Options	<input type="checkbox"/> Several Treatment Options	<input type="checkbox"/> Multiple Treatment Options
<input type="checkbox"/> No Comorbidities	<input type="checkbox"/> May have comorbidities impacting occupational performance	<input type="checkbox"/> Presence of comorbidities impacting occupational performance
<input type="checkbox"/> No Modification of Tasks or assist necessary to complete evaluation	<input type="checkbox"/> Min-Mod Modification of Tasks or assist with assess necessary to complete eval	<input type="checkbox"/> Significant Modification of Tasks or assist with assess is necessary to complete eval

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Practice Makes Perfect

PT AND OT CASE STUDIES

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Case Study 1

- Patient presents to PT with a new onset CVA with R hemiparesis, swallow dysfunction, and R distal tib/fib fracture as a result of a fall when suffered infarct. Precautions: NWB R LE and thickened liquids.
- Comorbidities include HTN with new medication after CVA requiring close monitoring and knee OA with pain with weight bearing with ID'd need for TKR in future. Patient lives alone in a one story home with a 4 step entry with handrail bilateral, tub/shower combo, laundry in basement.
- No AD/AE prior. Was independent with functional mobility and ADL/IADL. Examination: Strength R UE 2/5; L UE 4/5 and R LE 2/5 except testing prevented by cast; L LE 4-/5. PROM intact.
- Bed mobility with moderate assist. Transfer with slide board with moderate assist. Unable to ambulate. Balance FIST score 8/56. BP: 130/70 rest; 150/75 activity. HR 70 rest and on betablocker. Goal is to return home alone.

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Case Study 2

- 76 year old female admitted following a 3 day hospital stay with new dx of CHF, PMH include diabetes, L TKR 5 yrs post, and renal failure with dialysis. Resides in senior apt with supportive son living nearby.
- PLOF independent in all aspects of mobility and self cares. She was completing simple meal prep, housekeeping, and laundry tasks without difficulty in apartment. Son assisted with shopping, med management and personal finances. SOB with all tasks, O₂ at 4L and O₂ sats at 87% with activity requiring frequent rests and max cuing on breathing technique.
- She requires mod A for UE/LE dressing, bathing, and toileting tasks. L hand grip 10 pounds and R hand grip 5pds, overall MMT BLE and BUE 3/5, Barthel 65/100, Berg 25/56, Functional reach 5 inches in stand.
- Pt reports pain at 4/10 in BUE shoulders and BORG scale is 17/20 with all tasks. BP varies 110/90 to 150/100. Weight upon eval 190 pounds with edema noted in BLE. Referral made to ST as slight memory and problem solving issues noted during OT evaluation.

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Case Study 3

- 69 year old female presents to OT for lymphedema evaluation of left UE following mastectomy. Prior to surgery and development of lymphedema was completely independent, working part time data entry for her son's business, babysat grandson 2x/week, attended monthly bookclub, and participated in gardening club.
- Currently she is unable to lift grandson, having difficulty with typing for data entry, notes decreased grip strength, feels clumsy with dressing with buttons and zippers, and has pain 5/10.
- Exam findings include edema, grip strength loss, skin intact, FMC deficits, and ROM loss at elbow, wrist and digits. Treatment plan is MLD and bandaging with HEP instruction.

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Case Study 4

- 69 year old female presents to outpatient PT for evaluation of neck pain and numbness and tingling in face and intermittent dizziness. PMH includes COPD with frequent use of steroids and on O₂, rheumatoid arthritis, B TKR requiring continued use of two wheeled walker, and BMI of 44.
- PLOF independent with ADLs, assist with IADLs, ambulatory with two wheel walker, stairs independent with bilateral handrails and socially very active with family and friends.
- Reports since onset of s/s requires assist on stairs tub/shower transfers, LB ADLs and showering due to worsening s/s and fear of falling due to onset of dizziness. In addition she has not been able to attend her social functions with friends/family.
- Due to s/s clinician begins with upper cervical stability tests which are positive resulting in call to physician for orders for imaging.

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Essential References & Tools

- Definitions
- Code descriptions
- APTA
- AOTA
- ICF
- Cheat Sheet
- Audit Tools



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Summary & Q & A

HOW CAN WE HELP YOU?

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What Can You Do?

1. Familiarize yourself with the evaluation complexity matrix for PT & OT
2. Run through some PT & OT cases studies prior to conducting an audit
3. Audit to ensure documentation supports complexity
4. Make a cross walk to your EMR

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Presenters



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