

American Health Care Professionals Newsletter



Test Your OASIS Savvy.....



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Scenario: The patient is admitted to home care for “therapy only” on May 10. Your agency’s policy is that the skilled nurse goes to the home to open the case, including assessing homebound status and medical necessity, getting the patient’s consent, filling out forms etc. The SN also does the SOC OASIS and some teaching. The physical therapist visits the next day, May 11.

Question: Which is correct?

- A) The SOC date in MOO30 is May 10 because that is the day the SN performed the OASIS assessment.
- B) The SOC date is May 11, the date of the PT visit, because it is a therapy only case, so that is the first billable visit. The OASIS assessment must be redone because it was done before the first billable visit.
- C) The SOC date is May, 10, the date of the SN visit, because the SN provided a skilled service, so that is the first billable visit.

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Special points of interest:

- Home Health care updates
- Quality Improvement issues
- Billing , Payroll & OASIS
- Spiritual Counseling
- Nsg. And Rehab
- Upcoming meetings and events
- Resource for AHCP staff
- Employee of the Month

Careplans Reminders

Tja Ford

Attention all clinicians:

It is very important that you remember to be in compliance with your careplan. If your careplan calls for 3 visits each week and there are only 2, you need to be sure that you are documenting the reasons why there were only

2 visits made as well as a physicians order. If you notice that the patient’s careplan will change before it ends, or if you plan on continuing care after the carplan ends, remember to submit the careplan addendum as well as a Physicians Order to cover yourself. You are responsible for knowing when the patients care-

plan and cert period end. If there is any deviation in care i.e. (hospitalization, resumption, transfer, **missed visit**, labs, medication changes etc.) please make sure that you complete a physicians order and turn it in.

Tja



Quality Improvement Issues

Claire & MaryKay

Hi everyone, hopefully you all are getting more comfortable with the changes and the new forms. Thank you for working with us during this transition.

There are a few reminders when filling out the visit notes:

- Each visit must have recorded vital signs (all clinicians)
- Homebound status must be filled in (SN, PT, OT)
- Mental/ psych status must be filled in (SN, PT, OT)
- Neurological, respiratory, cardio, vascular etc. must be

filled in (SN)

- Mobility, transfers, ambulation, ROM, assisted devices (PT)
- Nutritional/ endocrine status must be filled in (SN)
- Medications and pain assessment must be checked and filled in (SN, PT, OT)
- Medical supplies must be marked if the patient needs them (all clinicians)
- There must be notes stated on each visit pertaining to the patients care and any other additional information.
- Progress towards goals must be recorded as well (SN, PT, OT)

- Discharge planning must be filled in (SN, PT, OT)
- Plan for next visit must have a date as well as the plan for care (all clinicians)

All of these must be marked during each visit as well as the information on the bottom portion of the visit sheet. In other words, all spaces and applicable boxes are to be filled in during each visit.

Thanks,
Mardi & Mary K

“Always Now”

By Oswald Chambers



We . . . beseech you that ye receive not the grace of God in vain. 2 Cor.6:1.

The grace you had yesterday will not do for to-day. Grace is the overflowing favor of God; you can always reckon it is there to draw upon. “In much patience, in afflictions, in necessities, in distresses”—that is where the test for patience comes. Are you failing the grace of God there? Are you saying—‘Oh,

well, I won’t count this time?’ It is not a question of praying and asking God to help you; it is taking the grace of God *now*. We make prayer the preparation for work, it is never that in the Bible. Prayer is the exercise of drawing on the grace of God. Don’t say—‘I will endure this until I can get away and pray.’ Pray

now; draw on the grace of God in the moment of need. Prayer is the most practical thing, it is not the reflex action of devotion. Prayer is the last thing in which we learn to draw on God’s grace.

“In stripes, in imprisonments, in tumults, in labours,”—in all these things manifest (cont on page 3)

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Answer: B

The nursing visit in this case is non-billable, therefore, this visit cannot be the SOC date. A visit made by an SN solely for the purpose of establishing eligibility for care (home-

bound, medically necessary care, etc.) is not considered skilled care.

Even if the SN provides teaching at the visit, it still will not be considered skilled care because the medically necessary care

must be intermittent for the SN’s visit to be considered billable. One visit is not intermittent.

Any information collected for the comprehensive assessment prior to the (continue on page 3)



“Always Now”

a drawing upon the grace of God that will make you a marvel to yourself and to others. Draw now, not presently: The one word in the spiritual vocabulary is *Now*. Let circumstances bring you where they will, keep drawing on the grace of God in every conceivable condition you may be in. One of the greatest proofs that you are drawing on the grace of God is that you can be humiliated without manifesting the slightest trace of anything but His grace.

“Having nothing . . .”
 Never reserve anything. Pour out the best you have, and always be poor. Never be diplomatic and careful about the treasure God gives. This is poverty triumphant.

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UPCOMING MEETINGS AND EVENTS

Please mark these dates on your calendar :

Innovative Team: Headed by Kekelwa Nyaywa

Meeting July 9, 2009

12-1pm * Lunch will be provided

Staff Meeting: Every Wednesday at 11a-12noon.

Morning Prayer: Every Morning (all AHCP staff invited).



Test Your OASIS Savvy.....

Mary 11 SOC date (the therapist’s visit date) is void and must be completed once the SOC has been established by a billable visit.

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The Vision and Mission of American Health Care Professionals (AHCP):

AMERICAN HEALTH CARE PROFESSIONALS WAS ESTABLISHED WITH ONE GOAL IN MIND: TO PROVIDE SAFE, AFFORDABLE, QUALITY CARE TO THOSE IN NEED.

American Health Care Professionals (AHCP), a division of the American Health Home Care Group, Inc., was established in 1995 in the State of Virginia. AHCP is one of the leading providers of comprehensive home health care services in the Northern Virginia area. AHCP participates in Medicare / Medicaid, commercial insurance, private pay, and personal care waiver.

AHCP is a single source for skilled nursing, physical, occupational, speech and social work, disease management education, help with daily living activities, as well as other therapies and services. A **CHRISTIAN COMPANY OPERATING UNDER CHRISTIAN PRINCIPLES.**

For further information, please contact Clishia Taylor RN, MBA - Administrator ex. 204

EMPLOYEE OF THE MONTH (June 2009)

American Health Care Professionals would like to recognize **Rosemary Villca** for being voted as Employee of the Month for June 2009. Rosemary is a **Certified Nurses Aide** and has been outstanding in the care she provides to our clients.

