

TBI – Waiver Services Supplemental – Occupational 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: **Occupational Therapy Services.**

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Waiver Services: Occupational Therapy Services Waiver Assurances Recommended Probes		Discovery Mechanisms		
Occupational Therapy Services: Desired Outcome: <i>Occupational Therapy Services means services provided by a licensed occupational therapist.</i>	OT I.A.1 Occupational Therapy will be provided by a licensed Occupational Therapist and authorized by the Individual's Plan of Care/Cost Comparison Budget (POC/CCB). 1. Are the services provided by the licensed Occupational Therapist reflected in the Individual's POC? 2. Is the need for OT services documented by an appropriate assessment? 3. Is the delivery of OT services authorized in the Individual's POC?	Spending Time With People (Initially during the conversation with the person using the Personal Outcome Measures®, then throughout the survey process.) Examples only: specific situations may change observations.	Conversations With People Selected Examples only: specific situations may change conversations with people.	Review of Documents Examples only: specific situations may change documents needing review.
Service Standards: <i>Occupational Therapy includes evaluation and training services in the areas of gross and fine motor function, self-care and sensory and perceptual motor function. Also included are screening, assessments, planning and reporting, direct therapeutic intervention, design, fabrication, training and assistance with adaptive aids and</i>	Observe to determine if the Individual receives any occupational services. (For a list of services see the Service Standards)	Ask the Case Manager to describe the occupational services the Individual receives. If the Occupational Therapist is available, ask that person to describe the OT services provided.	Review the Individual's POC to confirm the need and authorization for OT services. Review the documentation that confirms the credentials held by the OT providing the services.	

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<p><i>devices, consultation or demonstration of techniques with other services providers and family members and participating on the interdisciplinary team, when appropriate, for the development of the plan.</i></p>				
<p>Documentation Standards</p>	<p>OT I.B.1 Occupational 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 occupational therapist? 2. Are the occupational therapy services outlined in the POC? 3. Is there evidence of appropriate credentials for the occupational 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 OT services based on individual need? 		<p>Ask the Case Manager for any documentation for prior denial of OT 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 OT services.</p> <p>A Medicaid State Plan prior authorization denial is required before reimbursement is available through the Medicaid waiver for this service.</p>