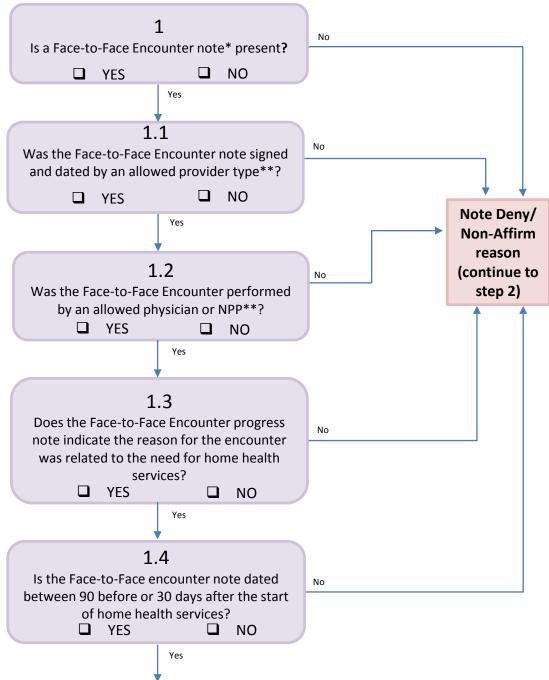
Home Health Review Tool

Step 1 (Face-to-Face Encounter Requirement)



F2F Encounter Requirement ARE MET.

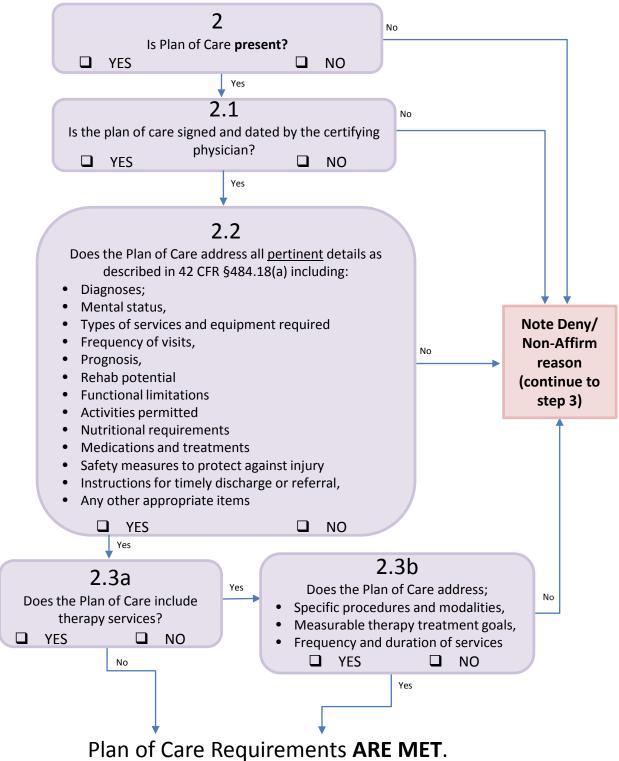
Proceed to Step 2

(Plan of Care requirements)

^{*} Face-to-face encounter note can include progress notes, discharge summary, etc.

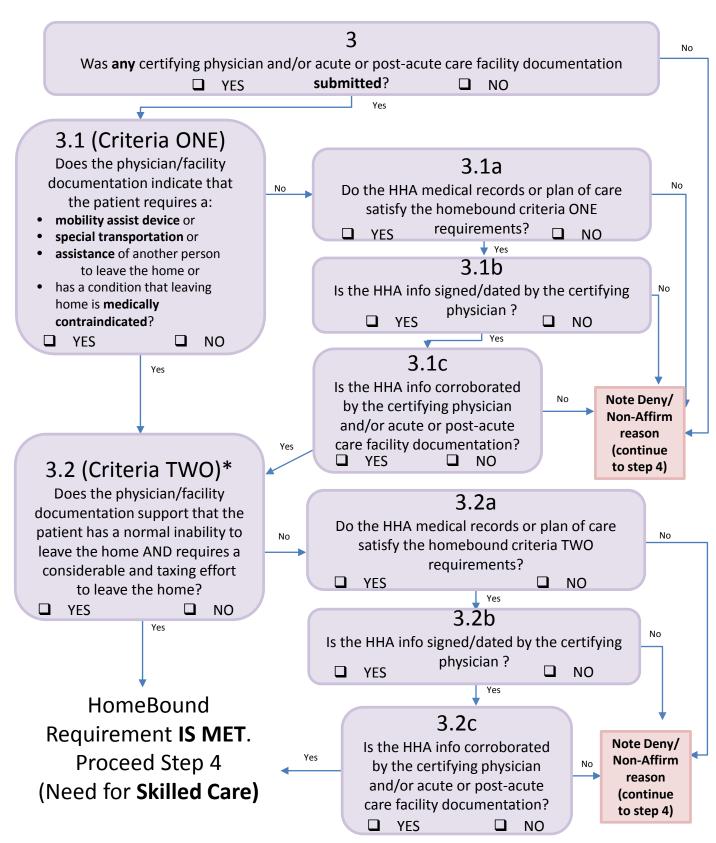
^{**}Please refer to 42 CFR 424.22(a)(1)(v)(A) for detailed information on who can perform the face-to-face encounter.

Step 2 (Plan of Care Requirement)



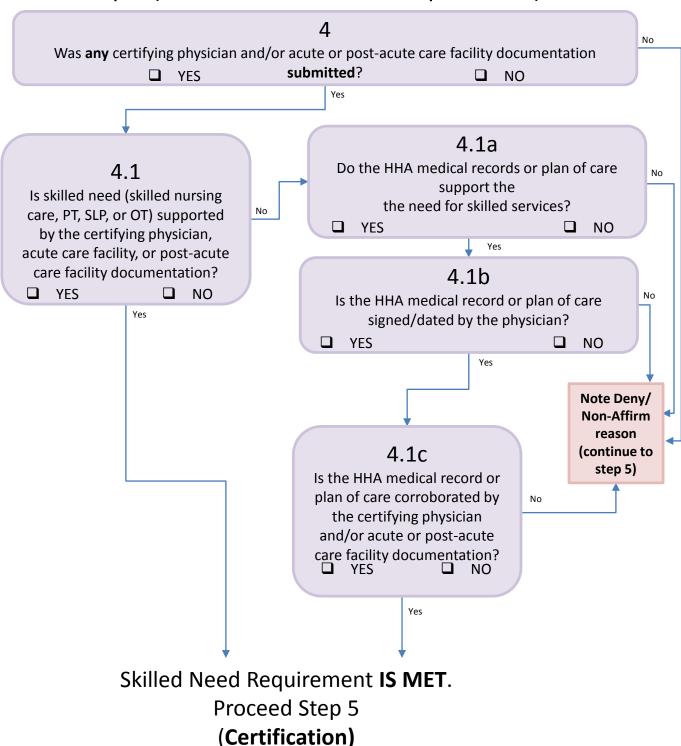
Plan of Care Requirements **ARE MET** Proceed to Step 3 (Homebound)

Step 3 Homebound Requirement



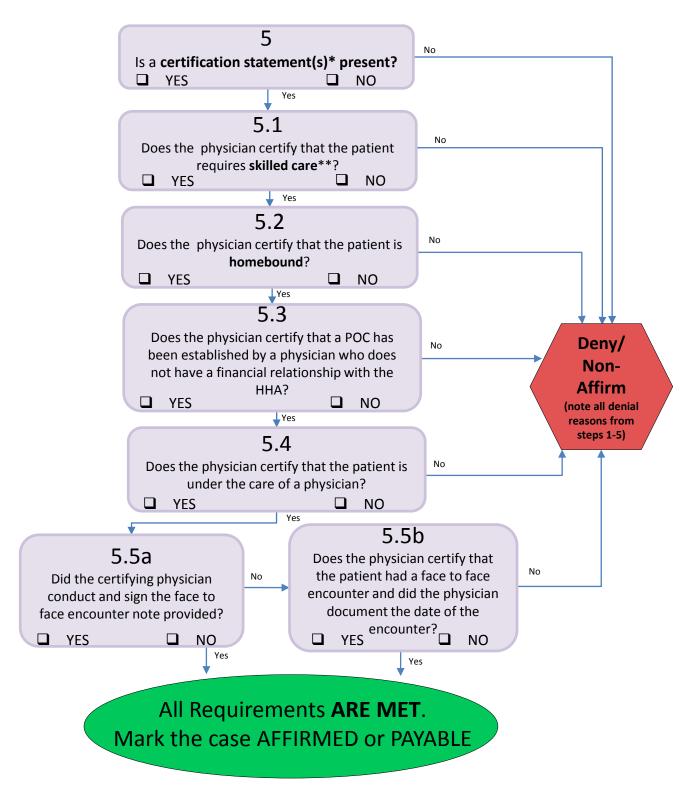
^{*}In determining whether the patient meets criterion two of the homebound definition, the clinician needs to take into account the illness or injury for which the patient met criterion one and consider the illness or injury in the context of the patient's overall condition.

Step 4 (Need for Skilled Care Requirement)



^{*}Skilled need may be substantiated through an examination of all submitted medical record documentation from the certifying physician, acute/post-acute care facility, and/or HHA (see below). The synthesis of progress notes, diagnostic findings, medications, nursing notes, etc., help to create a longitudinal clinical picture of the patient's health status.

Step 5 (Certification Requirement)



^{*} A certification statement may appear in a progress note, plan or care, or any other part of the patient's medical record. It may be on any form and in any format.

^{** &}quot;skilled care" means skilled nursing care, PT, SLP, or a continuing need OT *after* the need for skilled nursing, PT or SLP have ceased.