

OASIS Alert

Reader Question: Know When a Homebound Patient can Receive Outpatient Therapy

Question: We are a small home health agency and we don't offer speech therapy. We have a patient who is going to be starting outpatient speech therapy. Our question is, can we continue to see this patient? Or do we have to discharge him? We were under the impression that if we don't offer speech therapy, patients can receive it as an outpatient without affecting their homebound status for home health care. Is this correct?

California Subscriber

Answer: It is possible to continue home health services when a patient goes to outpatient therapy, but certain conditions must be met, says **Judy Adams, RN, BSN, HCS-D, HCS-O, COS-C** with **Adams Home Care Consulting** in Chapel Hill, N.C.

First, your patient must be homebound. Going to outpatient services must require considerable effort and difficulty on his part, Adams says. If the patient can go to outpatient therapy without effort, the next logical question is "What makes this patient homebound to continue to qualify for home health services?"

Tip: For patients receiving outpatient therapy, make certain the reason for continued homebound status is thoroughly documented, Adams says.

Second, generally the only time outpatient and home health services are provided concurrently is when the patient requires some type of equipment that cannot be provided in the home and is only available in the outpatient setting, Adams says. For example, a patient might receive hydrotherapy at a hospital as an outpatient.

Third, you must be able to document why the patient requires you to provide a qualifying service at home that cannot be obtained in the normal course of leaving home.

Fourth, the outpatient department cannot get paid for the outpatient services unless your agency pays the outpatient clinic, Adams says. This will require a contract between the providers. Your agency could then bill for services for which there are physician orders.

Essential: The clinical notes must support the services that meet Medicare coverage guidelines.

Bottom line: Your patient may be covered as a unique situation. But often home health agencies must discharge patients receiving outpatient therapy because they are no longer considered homebound.

Documentation tip: If your patient meets the requirements to receive outpatient therapy and remain a home health patient, you must be extra careful with your documentation. Be sure to thoroughly describe any unique issues related to him that clearly show how he is still homebound and in need of home health services while receiving outpatient therapy services, Adams says.