



National Imaging Associates, Inc.	
Clinical guidelines PLAN OF CARE	Original Date: Page 1 of 4
Physical Medicine – Clinical Decision Making	Last Review Date:
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Policy Statement

A properly documented plan of care is a required element of clinical documentation. It is based on the initial evaluation findings and patient’s functional status and establishes the medical necessity for treatment. The plan includes diagnoses, expected functional outcomes, specific interventions, and evaluation of progress toward outcomes based on follow up assessment. It is a framework to document critical thinking necessary for evidenced based outcomes.

Purpose

To provide network practitioners and therapy providers with current documentation requirements of a plan of care.

Scope

Physical medicine participating network practitioners, including chiropractors, physical therapists, occupational therapists, and speech language pathologists.

Definition/Background

- Plan of care must be included in the clinical documentation. Absence of this required information is considered failure to support the medical necessity of treatment.
- Plan of care must be individualized, goal-oriented, and aimed at restoring specific functional deficits.
- Plan of care elements:
 - Treatment diagnosis and specific contraindications to treatment
 - Baseline/current functional status/limitations as compared to pre-episode functional status
 - Patient-specific functional goals that are measurable, attainable, time-specific and sustainable. The initial plan of care for a musculoskeletal condition should not exceed 4 weeks.
 - Proposed frequency and duration of treatment within a reasonable and generally predictable time period
 - Specific therapeutic interventions to be provided
 - Predicted level of improvement in function (prognosis)
 - Specific discharge plan
- Plan of care should be reviewed at intervals appropriate to the patient and in accordance with state and third party requirements.

- Updated plan of care elements
 - Time frame for current treatment period
 - Total visits from start of care
 - Change in objective outcome measures and standardized testing compared to baseline and/or most recent re-assessment/updated plan of care
 - Measurable progress toward each goal including whether goal has been met or not met. Goals should be updated and modified as appropriate
 - Modification of treatment interventions in order to meet goals
 - Home program and self-management teaching
 - Collaboration with other services/professionals

- The plan of care should clearly support why the skills of a professional are needed, as opposed to discharge to self-management or non-skilled personnel without the supervision of qualified professionals.

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Reviewed / Approved by



Caroline Carney, MD, Chief Medical Officer