

National Imaging Associates, Inc.*	
Clinical guidelines PLAN OF CARE	Original Date: November 2015
Physical Medicine – Clinical Decision Making	Last Revised Date: October 2020
Guideline Number: NIA_CG_607	Implementation Date: July 2021

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.

Criteria

- 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 (chiropractic)
 - 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.

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- 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 overall 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. If telehealth is included, 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.

POLICY HISTORY SUMMARIES:

July 16, 2019

- Greater detail added to elements of treatment plan
- Updated references

January 2020

- No edits made to guideline in response to the review of the evidence base

October 2020

- Removed therapy portion as it is duplicated in the Record Keeping Guideline
- Added statement about teletherapy

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