

GUIDELINES FOR IDENTIFICATION OF SKILLED CARE
TO BE USED BY MUTUAL OF OMAHA CLAIM PERSONNEL

Skilled care may be classified in three major categories - skilled treatment, skilled supervision and skilled observation. The following comments reflect the current views of Mutual of Omaha's Medical Department concerning "skilled care" in Medicare.

The guidelines are to assist claim personnel in making "skilled care" determinations efficiently and to inform physicians on Utilization Review Committees, in the facilities that we serve, concerning Mutual of Omaha's interpretation of skilled care. Modifications of and additions to these guidelines may be developed in the future as experience is accumulated in these determinations.

✓ A. SSA Definition of Skilled Care

A skilled service is one which must be furnished by or under the supervision of trained medical or paramedical personnel. A service is not skilled merely because it is performed by a trained medical or paramedical person. A service which can be safely and adequately self-administered or performed by the average, nonmedical person, without the direct supervision of trained medical or paramedical personnel, is a nonskilled service without regard to who actually provides the service.

0 ✓ B. Skilled Treatment

1. Nursing Care

Close supervision of medical aids by a Registered Nurse must be provided and a "skilled service" must be identified if nursing care is to be considered "skilled." "Rehabilitation care" should not be accepted as skilled nursing care without satisfactory explanation. Assistance in the activities of daily living by Registered Nurses is not skilled nursing care.

2. Physiotherapy

The classification of the provider, the form of supervision and the nature of treatment should be considered in determining whether physiotherapy represents a "skilled service." Recognized modalities of physical medicine, such as heat (diathermy, infrared lamp, hydrocollator packs, ultrasound), massage or whirlpool treatment, range of motion exercises or gait training, personally provided or closely supervised by a Physiatrist (M.D. specializing in Physical Medicine and Rehabilitation) or a Registered Physiotherapist (R.P.T.) are considered as "skilled care." Such services, closely supervised by the attending physician or a Registered Nurse with special training in physiotherapy, may qualify as "skilled" physiotherapy. Close supervision does not require attendance of the supervisor at the time treatments are provided by a specially trained medical aid, but the supervisor should personally evaluate the response to treatment at least weekly.

Heat treatments are considered a skilled service since they are potentially dangerous for older individuals with atrophic skin and impaired circulation.

Massage, whirlpool treatment and range of motion exercises are not considered as skilled care unless provided or closely supervised by a physician, Registered Physiotherapist or a Registered Nurse, with special training in physiotherapy.

"Assistance in walking" would rarely be considered a "skilled service."

Occupational therapy for Medicare beneficiaries commonly represents diversional activity, rather than medical treatment, and usually is not considered as "skilled care."

3. Inhalation Therapy

"Respiratory cripples," due to such conditions as emphysema, asthma, bronchiectasis and pulmonary fibrosis may require intermittent positive pressure breathing (IPPB), or oxygen. The safety of beneficiaries requires that such care be very closely supervised by Registered Nurses or certified Inhalation Therapists. Such care is considered "skilled."

4. Open Lesions and Skin Diseases

Decubitus ulcers and other chronic skin ulcers require "skilled" nursing care. A colostomy, or an ileostomy, usually requires "skilled" management. Many skin diseases require skilled treatment. In questionable cases the attending physician can usually provide a satisfactory explanation of skilled care needed.

5. Speech Therapy

Few extended care facilities are able to obtain the services of certified Speech Therapists. The qualifications of a noncertified provider of speech therapy should be reviewed by the URC and Mutual's Medical Department.

6. Special Diets

Some conditions, such as diabetes mellitus or peptic ulcer, require special diets. Special medical diets may require the services of a dietician for formulation but can be provided by unskilled personnel. Special medical diets seldom qualify as "skilled care." "Intravenous feedings" and "tube feeding" represent "skilled" treatment.

7. Recreational Program

Usually, such programs represent diversional activity rather than medical treatment for Medicare beneficiaries. In unusual situations, the recreational program might represent an integral element in a treatment program and be accepted as "skilled care."



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