

FAQ: Emergency Waiver Allows OTs to Perform Initial and Comprehensive Home Health Assessments

The Centers for Medicare & Medicaid Services (CMS) temporarily suspended the rule that would prevent OTs from opening home health cases through the end of the emergency declaration. Under an [emergency waiver](#), **occupational therapists may now perform initial and comprehensive assessments for all home health patients receiving therapy as part of the plan of care.**

AOTA has received clarification from CMS staff that under the [emergency waiver](#), occupational therapists may perform the initial and comprehensive assessments when the physician order includes a variety of service combinations, including but not limited to the following examples (all CMS guidance appears in *red italics* below):

- Physician order includes nursing and OT: *OT may perform the initial and comprehensive assessments.*
- Physician order includes OT: *OT may perform the initial and comprehensive assessments.*
- Physician order includes another therapy service and OT: *OT may perform the initial and comprehensive assessments. HHAs [home health agencies] should match the needs of the patient to the clinician who performs the assessment, to the greatest extent possible.*
- Physician order includes nursing and PT (but not OT): *HHAs should match the needs of the patient with the clinician who performs the assessment, to the greatest extent possible. While it would not be ideal, OT may perform the initial and comprehensive assessments.*
- Physician order includes SLP (but not OT): *HHAs should match the needs of the patient to the clinician who performs the assessment, to the greatest extent possible. While it would not be ideal, OT may perform the initial and comprehensive assessments.*

Can OT do the initial assessment (including delivering a skill therefore constituting a start of care [SOC]) and another discipline do the comprehensive assessment? (They are two separate standards (a) and (b) under Section 484.55 of the Conditions of Participation.) *There is nothing in the regulations that requires the same discipline to do both assessments. So two different clinicians or disciplines could be responsible for completing the initial and comprehensive assessments.*

Does the waiver flexibility that permits occupational therapists to conduct the initial and comprehensive assessments extend to physical therapists and speech-language pathologists? For example, if PT or SLP services are ordered at the start of care (SOC) with skilled nursing, could either the PT or SLP conduct the initial and comprehensive assessment? *At this time, the additional flexibility for OTs to perform initial and comprehensive assessments even when nursing is an ordered service does not extend to PTs and SLPs.*

If OT is not on the order but performs the initial and/or comprehensive assessment, it would not be the first billable service, therefore not the actual start of care; what would be the advantage? *There would be no advantage. Only a visit where a service is provided can be billed to Medicare. A visit to perform the assessment without a service being provided is considered an administrative expense.*

When OT is ordered, OT may perform the initial and comprehensive assessment, but does OT *qualify* the episode as billable if no other discipline is on the order? *No. OT is not a qualifying service. If OT is the*

only service ordered, the patient would not qualify for Medicare home health care. OT can become a qualifying service if the patient continues to need OT after the need for other skilled services (PT, SLP, nursing) ends.

AOTA will continue to reach out to CMS staff, as needed, for additional clarifications about implementation of the emergency waiver.