

**ARTICLE 3 - SERVICES****§74693. Preventive, Treatment and Rehabilitative Services**

- (a) To the extent that services are provided and the patient's condition makes it appropriate, preventive, treatment, rehabilitative and maintenance services for patients for whom the agency accepts responsibility shall be provided by the agency or through it under arrangements with other qualified providers of service.
- (b) The character and scope of advice, treatment and appliances provided by the agency shall be consistent with accepted standards of practice for the discipline involved.
- (c) The professional personnel of the agency shall check that equipment, apparatus or appliances supplied by the agency for a service or furnished to a patient in the course of their treatment, are in good working order at the time of the visit.
- (d) Each type of service provided by the agency for patients shall be approved by the Department and as a minimum shall:
- (1) Be under the direction of a person registered, licensed or certified to provide such service if registration, licensure or certification is required, or be otherwise qualified as provided in these requirements.
  - (2) Have written policies and procedures and reference material readily available to guide and assist agency personnel.
- (e) Services that may be provided and approved include, but are not limited to, the following:
- (1) Diet counseling
  - (2) Home health aide services
  - (3) Nursing services
  - (4) Occupational therapy
  - (5) Physical therapy
  - (6) Speech therapy
  - (7) Medical social services
  - (8) Medical supplies and appliances
- (f) Personnel shall be available to render rehabilitative treatment or other services prescribed for patients accepted for care by the agency.

**§484.105(f) Standard: Services Furnished**

- (1) Skilled nursing services and at least one other therapeutic service (physical therapy, speech-language pathology, or occupational therapy; medical social services; or home health aide services) are made available on a visiting basis, in a place of residence used as a patient's home. An HHA must provide at least one of the services described in this subsection directly, but may provide the second service and additional services under arrangement with another agency or organization.
- (2) All HHA services must be provided in accordance with current clinical practice guidelines and accepted professional standards of practice.

**§74695. Requirements for Acceptance of Patients**

- (a) All persons accepted for service whose care requires medical orders shall be under the care of a physician, dentist or podiatrist or other licensed practitioner within his or her scope of practice.
- (b) A home health agency shall only accept and retain patients for whom it can provide adequate care.
- (c) Home health agencies participating in the Medicare and/or Medi-Cal program shall meet applicable federal requirements.

**§484.60 CONDITION: Care Planning, Coordination of Services, and Quality of Care**

Patients are accepted for treatment on the reasonable expectation that an HHA can meet the patient's medical, nursing, rehabilitative, and social needs in his or her place of residence. Each patient must receive an individualized written plan of care, including any revisions or additions. The individualized plan of care must specify the care and services necessary to meet the patient-specific needs as identified in the comprehensive assessment, including identification of the responsible discipline(s), and the measurable outcomes that the HHA anticipates will occur as a result of implementing and coordinating the plan of care. The individualized plan of care must also specify the patient and caregiver education and training. Services must be furnished in accordance with accepted standards of practice.

**§74697. Plan of Treatment; Plan of Care; Plan for Personal Care Services**

(a) A written plan of treatment (or plan of care for home health agencies participating in the Medicare and/or Medi-Cal program) shall be established for each patient whose care requires medical orders. A plan of treatment or plan of care for patients requiring medical orders shall be:

- (1) Approved and signed within 30 working days by the attending physician, dentist, podiatrist or other licensed and legally authorized practitioner within his or her scope of practice.
- (2) Developed in consultation with agency health professional staff.
- (3) Modified and added to only with approval of the attending physician, dentist, podiatrist or other licensed and legally authorized practitioner within his or her scope of practice.
- (4) Reviewed and updated by the attending physician, dentist, podiatrist or other licensed and legally authorized practitioner within his or her scope of practice in consultation with the agency health professional personnel as frequently as the patient's condition warrants and at least every 62 days.
- (5) In compliance with applicable federal requirements for a plan of care when the home health agency participates in the Medicare and/or Medi-Cal program.

**§484.60(a) Standard: Plan of Care**

- (1) Each patient must receive the home health services that are written in an individualized plan of care that identifies patient-specific measurable outcomes and goals, and which is established, periodically reviewed, and signed by a doctor of medicine, osteopathy, or podiatry acting within the scope of his or her state license, certification, or registration. If a physician refers a patient under a plan of care that cannot be completed until after an evaluation visit, the physician is consulted to approve additions or modifications to the original plan. Patient measurable outcomes may include such measurements as end-result functional and physical health improvement/stabilization, health care utilization measures (hospitalization and emergency department use), and potentially avoidable events.
- (2) The individualized plan of care must include the following:
  - (i) All pertinent diagnoses;
  - (ii) The patient's mental, psychosocial, and cognitive status;
  - (iii) The types of services, supplies, and equipment required;
  - (iv) The frequency and duration of visits to be made;
  - (v) Prognosis;
  - (vi) Rehabilitation potential;
  - (vii) Functional limitations;

- (b) The plan of treatment or plan of care for patients requiring medical orders shall include, but not be limited to, the following pertinent information:
- (1) Diagnosis.
  - (2) Types of services and equipment required.
  - (3) Statement of treatment goals.
  - (4) Medications and treatment.
  - (5) Functional limitations.
  - (6) Mental status.
  - (7) Activities permitted.
  - (8) Nutritional requirements.
  - (9) Rehabilitation potential.
  - (10) Any safety measures required to protect against injury to the patient.
  - (11) Proposed frequency of services.
  - (12) Discharge and referral plan.
  - (13) Instructions to patient and family.
  - (14) Food or drug allergies.
- (c) If after the evaluation visit, it is determined that the initial plan of treatment or plan of care for patients requiring medical orders does not meet the patient's needs, the attending physician, dentist, podiatrist or other licensed or legally authorized practitioner within his or her scope of practice, shall be consulted to approve additions or modifications to the original plan.
- (d) The professional person responsible for any specific treatment shall notify the attending physician, dentist, podiatrist or other health professionals and responsible agency staff of significant changes in the patient's condition. "Significant changes" means those changes that suggest the need to modify or develop a plan of treatment or plan of care. The agency shall develop and implement policies and procedures stating when notification is required for a significant change.
- (e) All plans of treatment or plans of care and notification to the attending physician, dentist, podiatrist or other health professionals and responsible staff shall be made a part of the patient's health
- (viii) Activities permitted;
- (ix) Nutritional requirements;
  - (x) All medications and treatments;
  - (xi) Safety measures to protect against injury;
  - (xii) A description of the patient's risk for emergency department visits and hospital re-admission, and all necessary interventions to address the underlying risk factors.
  - (xiii) Patient and caregiver education and training to facilitate timely discharge;
  - (xiv) Patient-specific interventions and education; measurable outcomes and goals identified by the HHA and the patient;
  - (xv) Information related to any advanced directives; and
  - (xvi) Any additional items the HHA or physician may choose to include.
- (3) All patient care orders, including verbal orders, must be recorded in the plan of care.
- §484.60(c) Standard: Review and Revision of the Plan of Care**
- (1) The individualized plan of care must be reviewed and revised by the physician who is responsible for the home health plan of care and the HHA as frequently as the patient's condition or needs require, but no less frequently than once every 60 days, beginning with the start of care date. The HHA must promptly alert the relevant physician(s) to any changes in the patient's condition or needs that suggest that outcomes are not being achieved and/or that the plan of care should be altered.
  - (2) A revised plan of care must reflect current information from the patient's updated comprehensive assessment, and contain information concerning the patient's progress toward the measurable outcomes and goals identified by the HHA and patient in the plan of care.
  - (3) Revisions to the plan of care must be communicated as follows:
    - (i) Any revision to the plan of care due to a change in patient health status must be communicated to the patient, representative (if any), caregiver, and all physicians issuing orders for the HHA plan of care.
    - (ii) Any revisions related to plans for the patient's discharge must be communicated to the patient, representative, caregiver, all physicians issuing orders for the HHA plan of care, and the patient's primary care