Part 1: Therapeutic Exercises and the Use of Exercise Equipment - 97110: When is it Skilled?

As clinicians caring for the long term population, we have a multitude of therapeutic exercise protocols and programs at our disposal to restore strength, ROM and flexibility for a documented loss or restriction of joint motion, strength and or mobility which has resulted from a specific disease or injury.

When considering therapeutic exercise as a treatment intervention, it is essential to document the following:

- Identify the correct ICD-10 treatment diagnosis that reflects the patient’s impairment/s and which have been assessed
- Specific impairment/s (strength, ROM, coordination, edema, pain, balance, respiratory status, cardiovascular endurance, etc.)
- Impaired functional deficits (bed mobility, transfers, gait, dressing, bathing, toileting, grooming, etc.)
- Short and long term goals that specifically address the impairment/s identified on the evaluation or subsequent documentation
- What types of exercises, equipment and/or machines will be utilized to improve the patient’s impairment/s to achieve his/her prior level of function and enhance their quality of life

Therapeutic Exercises and Use of Exercise Equipment (Omnicycle, NuStep, Upper Body Cycle, Restorator, Treadmill, etc.) qualify as SKILLED when...

- The actual time of direct 1:1 contact with the patient providing exercises which requires the skills of a therapist/assistant is billed and documented
- Therapeutic exercises include resistance, active, active assisted or passive participation by the patient (e.g., isokinetic exercise, NDT techniques, lumbar stabilization, stretching and strengthening)
- The unique skills of a therapist are required to evaluate and document the patient’s abilities, design the program and instruct the patient or caregiver in the safe completion of the special technique/s
- Teaching and training a prescribed HEP to the patient and caregiver/s is provided and specifics are documented
- Teaching and training nursing in a specific restorative program to benefit the patient is provided and documented

Note: Exercise equipment should be utilized with care and caution in regards to their use. They should be used as an adjunct to a specific exercise program to: reduce pain, improve cardiovascular and respiratory capacity, ROM, coordination and strength as well as assisting in the achievement of long term mobility, reduction in fall risks, and improvement in patient motivation, and functional independence.

Therapeutic Exercises and Use of Exercise Equipment are NOT Skilled when...

- Supervision only of a previously taught exercise program is performed
- Patient is performing an exercise independently without direct contact by the therapist/assistant or use of different exercise equipment without requiring the skills of the therapist/assistant
- The teaching of the exercises has been successfully completed, repetition of the exercise/s and monitoring for the completion of the task in the absence of additional skilled therapy
- The patient is warming up on a bike independently without skilled intervention, modification, positioning and or safety
- Documenting while the patient is exercising but not performing skilled evaluation or teaching
- The goal is to promote overall fitness, flexibility, weight reduction, endurance, aerobic conditioning or for maintenance purposes in the absence of a complicated patient condition with distinct goals and objectives for improvement in specific impairments and functional deficits
- Continuing therapeutic exercises when there is no objective improvement in ROM, strength, coordination or function