

Patient Refusal

Most clinicians have experienced or heard about the patient that refuses therapy, are difficult to engage or that challenge us to keep them involved and motivated. There will be times when patients refuse therapy and we are unable to provide a skilled service. Remember that to bill services, the patient must be actively involved in the therapy session and the therapist must be providing a skilled service that cannot be provided by an unskilled clinician. **If skilled intervention is not indicated or provided billing should not occur. If you are unsure if the service provided to the patient was skilled, the service should NOT be billed.**

In the examples below, the documentation in the **left** column is reflective of what we occasionally see in documentation of challenging patient involvement; this documentation is **not skilled**. The documentation in the **right** column represents the same or similar circumstance, however the documentation is reflective of **skilled** care.

Non-Skilled Documentation	Skilled Documentation
Patient difficult to engage in therapy session; attempted to discuss benefits of engagement in physical therapy.	Patient fatigued following dialysis treatment in AM. However, patient agreeable to afternoon treatment session. Therapist reviewed HEP with patient and family in anticipation of discharge next week to home. Patient able to return demonstrate exercises and patient/family verbalized understanding of ongoing exercise plan and the relation to overall physical function and wellness. Patient/family expressed no additional questions or concerns.
Patient refusing therapy involvement. Max encourage required for therapy intervention.	Patient continues to be reluctant to participate in skilled therapy session. Patient agreeable to education session regarding anterior hip precautions related to current medical conditions (THA). Patient expressed understanding of hip precautions and was able to recount precautions to therapist. Patient vocalized no additional questions/concerns during skilled therapy session.
Patient states they do not want to participate in therapy session. Refusing to come to gym.	Patient refused to conduct therapy in therapy gym, however, patient agreeable to complete therapy activity in room. Patient was able to roll side to side and from supine to sit. Patient then completed static and dynamic balance activities of reaching for water picture and television control to improve core stability and sitting balance. At edge of bed patient performed sit to stand exercises to focus on standing base of control, quad strengthening and balance in sit to stand. Patient complained of fatigue after 20 minutes and returned to bed.

Please review and familiarize yourself with the aforementioned examples. If you have any questions, please contact your Clinical Performance Specialist.