

Managed Care Documentation: Abbreviated Documents

Due to differences between Medicare and Managed Care documentation requirements, we are providing a new documentation option for select payers within SMART eDoc.

Managed care documentation will be available on 12/19/18 for all RehabCare SNFs. RehabCare PLUS sites will not have access to Managed Care documentation at this time.

The following “blue boxes” will be hidden on managed care documentation:

POC & SPOC Hidden Fields:

- Reason for Referral
- Environmental Factors
- Medications
- Previous Therapy
- Anticipated Treatment Minutes
- Prognostic Indicators

DC Summary Hidden Fields:

- Caregiver Ed
- Contraindications
- Evidence Skilled Services since SOC
- Evidence Skilled Services
- Impact Daily Life
- Precautions

- Medicare A, Med A ‘like’ (RUG based), Med B and ‘B-like’ payors will generate the full POC . All other payors will generate the abbreviated documentation.
- **If a managed care/abbreviated POC is completed and the payor is changed to Med A like or Med B like after the fact, the POC will be rendered incomplete and will be in draft until those additional fields have been completed.**
- If a managed care payor is entered prior to initiating the POC, the abbreviated POC will be presented. If no payor is entered, the full documentation will be presented for completion.
- Progress notes will be scheduled the same as full documentation for facilities new to managed care documentation.
- Functional Deficits, Underlying Impairments, and Goals remain required.

Therapy Necessity Blue Box Tip: Utilize the Statement Starters and add free-text information about the events that caused the need for therapy to create a quick, comprehensive justification for therapy.