

CHEAT SHEET: MODERN PLAN OF CARE

Now that Medicare Audits are Revealing the Standards of Documentation Necessary to Comply with Requirements of the New Coverage Mandated by the LTA, Here are Some Basics That Should Be in Any Modern Plan of Care.

Your Plan of Care for both the Active Treatment and At-Home Maintenance Phases of Lymphedema Treatment Now have Established Medicare Standards. Here are Some New “Best Practices” to Incorporate Into Your Plan of Care:

TIPS

Best Practices

Best Practices are now rapidly evolving based on Medicare’s newly-established standards for lymphedema coverage. Here are some tips for building a modern Plan of Care that: (1) establishes a relevant diagnosis, (2) properly documents the need for custom garments, whenever necessary, and (3) meets or exceeds Medicare’s standard garment plan...



A Clearly Establish a Relevant Diagnosis Code

- Lymphedema Dx MUST Be Diagnosed by You AND the Referring Physician
- Medicare ONLY Acknowledges the Dx by an MD/NP/PA/DO
 - Even Though YOU Probably First Confirmed Lymphedema

B Your Plan of Care Must Document Relevant Criteria for Custom Garments

- This is CRITICAL for Medicare Coverage of Custom Garments
- Your Plan of Care MUST Document One or More Acceptable Reasons
- Here are Samples of Current Best Practices:
 - Patient is unable to don the garment independently without a donning aid.
 - Patient requires the wall stability of flat knit material to adequately manage lymphedema long-term due to stage and tissue density.
 - Patient will benefit from custom flat knit compression garment as the texture of her skin is inappropriate for ready-to-wear garments.
 - Due to history of infection, silver flat knit fabric is required.
 - A silicone border is required to hold the garment in place and prevent slipping.
 - Patient requires [ACCESSORY] added to garment because [REASON].
 - Patient requires custom garment because [REASON(S) RTW WON'T WORK AND/OR REASONS FLAT KNIT IS REQUIRED].

C Your Plan of Care Should Recommend a Garment Plan that Meets or Exceeds the Newly-Established Medicare Standard

- Why? Patient Outcomes & Professional Risk Management
- Here are Elements of a Sample Garment Plan that Meets or Exceeds:
 - 3 Day Garments per Affected Body Part, Per Every 6 Months
 - 2 Night Garments per Affected Body Part, Per Every 24 Months
 - Accessories for Donning & Doffing as Required for Compliance
 - Garment Maintenance Kit for Sustained Efficacy
 - Skin Care Treatments for Health & Safety

** It's Always Important to Consult Your Legal Counsel Regarding Compliance & Risk Management Issues.*

Talk to One of Our Experts Anytime...



Scan for Other Time-Saving Ideas

And if you’ve got questions about documentation, garment selection, or insurance coverage, our Case Managers are always here to help.

