



Therapist Contractor Expectation Overview

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The following article is to highlight key points related to branch and clinicians working together to ensure smooth operations and patient management. Thank you for being part of our clinical team and making patients' lives better one patient at a time.

1. Patient Conferencing: Care collaboration is intended to ensure we are making the best clinical decisions regarding the patient. Therapists performing admissions and/or evaluations need to speak with the office regarding findings and anticipated plans of care. There may be varying formats depending on location/branch so reach out to the branch location on expected call format and method. If you have a representative from your contract group reporting to the branches, make sure to provide the information to them timely so they can report.

2. Plans of Care: The frequency and duration for plans of care are required to be authorized by the branch. Be prepared to provide additional information if the plan recommendation is outside of normative ranges for the diagnosis. During care planning, always look at the patient holistically, or through a 60 day episode where appropriate, to minimize additional orders for therapy. Add on orders for therapy should be minimized.

3. Scheduling: Therapists should schedule their appointments with the patient at least 24 hours prior to the actual visit. Therapist should perform the evaluations timely. The 30-day reassessment requirement for Medicare patients needs to be completed prior to the mandatory timeframe to ensure compliance to the rule and the clinician is responsible to manage this. Best practice would be to plot the visit by the 3rd week to ensure the assessment will not be missed.

4. Absences/Time Off: It is your responsibility to make sure your patient(s) are covered (regardless of planned or unplanned absence). Give as much advanced notice as possible if taking time off. Also, please notify your supervisor to ensure patient coverage. This is especially important if a fellow contracted clinician needs to be cleared prior covering your patient visits.

If there is an unplanned absence, immediately notify your company so alternative caregiver arrangements can be made. We want to avoid gaps in the patient's plan of care.

5. Documentation: Make sure to bring the tablet into the patients home as all documentation should be performed at point of service, and completed within 24 hours, for accuracy and billing of services. The contract company is not able to invoice for services rendered until a note is in a saved and completed status.

6. Location of Care: If you work for a Part B therapy provider who leases space in the ALF facility, you cannot use that location to provide Part A therapy services. It is prohibited by Medicare. All therapy must be provided in the room, hallway, or common areas of the facility.

7. Synchronizing Tablet Frequently: Best practice is that the clinician will synchronize their tablet daily, and throughout the day, including morning, noon, and evening. This ensures that documentation is transmitted, and any updated medical record information will be processed.

8. Aveanna Tablets: If you are using an Aveanna provided tablet, or contractor provided tablet, do not share passwords or information to access the device. Please take care of tablet to avoid any damage and risk liability for repairs to device.

9. Compliance: All services rendered by the Contractor are to be in full compliance with all regulatory and other relevant requirements imposed by applicable governmental and other third-party reimbursement sources. The Company will not condone any acts of fraud, including but not limited to: falsified patient signatures, submission of visits to the Company that have not been performed or misstated as to the length and duration, and falsifying visit or travel times.

Any suspicion of fraud warrants the Company to conduct in-house investigations at its discretion. Conduct determined to be in violation could result in the termination of the contract for cause as well as non-payment of the visit(s) and reporting to applicable regulatory and licensing agencies. As part of our Contractor orientation, the Aveanna Healthcare Code of Conduct and Ethics is required to be reviewed. Should the Contractor, or any employee or agent of Contractor, become aware of a violation of the Aveanna Code of Conduct and Ethics, the Contractor agrees to report such violation to the Aveanna Compliance Department in writing or through the Aveanna Compliance Hotline at 1-800-408-4442.



10. Name Badge: When working with patients, it is a requirement to wear the company authorized name badge for Aveanna, for identification purposes.

11. Home Folder: All patients must understand their specific treatment plans and frequency/duration of services. In the patient's home folder, the frequency and duration of services must be written on the consent. Therefore, each therapist needs to complete their respective section on the consent with the frequency and duration after the SOC or evaluation.



12. Survey Readiness: The contract employer must have a conversation with the therapist to ensure that they are prepared for surveys when they arise.

13. Supplies: Aveanna will provide a clinical bag, adequate amounts of PPE, and blue barriers.

14. Infection Control: The contractor is required to follow the most updated policies and procedures according to CDC guidelines. Under this umbrella includes hand hygiene, bag technique, masking, and COVID vaccinations.

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