

LONG TERM CARE COMMUNITY COALITION

Advancing Quality, Dignity & Justice

NURSING HOME THERAPY SERVICES FACT SHEET

Nursing homes are required to follow specific standards in order to ensure that residents receive appropriate care, have a good quality of life, and are treated with dignity. **You can use these standards to advocate for your rights.**

Following are the standards we have identified as essential when it comes to therapy services in nursing homes. LTCCC took descriptions directly from federal regulations and Guidance (as indicated by text in italics). For information about Medicare-covered skilled therapy services, please see LTCCC's [Issue Alert](#).

Standards of Care

Rehabilitative Services

42 C.F.R. § 483.40(c)(1)-(2) | F825

If rehabilitative services such as but not limited to physical therapy, speech language pathology, occupational therapy, and rehabilitative services for mental disorders and intellectual disability, are required in the resident's comprehensive plan of care, the facility must—

- *Provide the required services, including specialized rehabilitation services . . . ; or*
- *Obtain the required services from an outside resource . . . from a Medicare and/or Medicaid provider of specialized rehabilitative services.*

Specialized Rehabilitative Services

42 C.F.R. § 483.65(a) | F825

If specialized rehabilitative services such as but not limited to physical therapy, speech language pathology, occupational therapy, respiratory therapy, and rehabilitative services for mental illness and intellectual disability or services of a lesser intensity . . . are required in the resident's comprehensive plan of care, the facility must—

- *Provide the required services; or*
- *[O]btain the required services from an outside resource that is a provider of specialized rehabilitative services and is not excluded from participating in any federal or state health care programs*

What Does "Specialized Rehabilitative Services" Mean?

The Centers for Medicare & Medicaid Services' (CMS) Interpretative Guidance states that therapy services are specialized (or skilled) when "they are provided based on each resident's individual assessed rehabilitative needs based on their comprehensive plan of care and can only be performed by or under the supervision of qualified personnel."

A Note about Care Planning

While the regulation specifically mentions the comprehensive care plan, nursing homes are also required to develop a baseline care plan **within 48 hours** of a resident's admission. Baseline care plans must include the minimum health care information necessary to properly care for a resident, including information about therapy services. For more information, please see our [Issue Alert](#).

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Qualifications

42 C.F.R. § 483.65(b) | F826

Specialized rehabilitative services must be provided under the written order of a physician by qualified personnel.

Who are "Qualified Personnel?"

According to CMS, the following types of care professionals are qualified personnel:

(1) physical therapists, **(2)** occupational therapists; **(3)** respiratory therapists; **(4)** speech-language pathologists; **(5)** physicians, **(6)** nurse practitioners, **(7)** clinical nurse specialists; and **(8)** physician's assistant, who is licensed or certified by the state to furnish therapy services.

Additionally, CMS notes that "qualified personnel may also include a physical therapist assistant (PTA), or an occupational therapy assistant (OTA) when furnishing services under the supervision of a qualified therapist."

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Maintenance Therapy

A federal district court approved the settlement agreement in [Jimmo v. Sebelius](#) in 2013. The *Jimmo* Settlement required CMS to confirm that Medicare coverage depends on an individual's need for skilled nursing and/or therapy, **not** on his or her potential for improvement. See 42 C.F.R. § 409.32(c). As a result, residents in a Medicare-covered nursing home stay can receive skilled therapy to maintain their condition or to slow or prevent further decline. The Settlement pertains to all Medicare beneficiaries nationwide, regardless of whether a resident has traditional Medicare or Medicare Advantage. To learn more about the *Jimmo* Settlement, please see our [fact sheet](#).

The federal Nursing Home Reform Law also requires nursing homes to provide residents services that help them attain or maintain their highest practicable physical, mental, and psychosocial well-being. 42 U.S.C. § 1395i-3(b)(2). **CMS's Interpretative Guidance to the regulations notes that skilled therapy is within the scope of a facility's services. Thus, nursing homes should provide skilled therapy, including under a maintenance program, to any resident whose plan of care calls for it.**

For more information about nursing home care, please visit
www.NursingHome411.org.