

## **FACE TO FACE ENCOUNTER - EXAMPLES**

## **Physician Documentation of Face to Face Encounter**

I certify that this patient is under my care and that I, or a Medicare enrolled NPP ( a nurse practitioner or physician's assistant working with me), had a face-to-face encounter with this patient that was in whole or in part related to the reason the patient needs home health care.

Date of face to face encounter:
SERVICES (SN, PT, OT, ETC) The findings of this encounter support the need for skilled nursing or therapy services because:
<ul> <li>skilled nursing is needed to provide treatments and care safely and effectively skilled nursing assessment/observation is needed due to the potential for complications or exacerbation of the patient's condition</li> <li>skilled nursing is needed for teaching /training the patient/caregiver to manage the treatment regimen for this illness or condition</li> <li>services of a skilled therapist are needed due to the complexity of the therapy needed to treat the injury, illness, or condition</li> </ul>
The findings of this encounter support that this patient is homebound because:  SOME EXAMPLES OF REASONS:
<ul> <li>the patient requires the assistance of a person or device to safely leave home absences from home are contraindicated except to receive medical treatment post-surgical restrictions and/or condition limit ability to leave home</li> </ul>
<ul> <li>leaving the home requires considerable and taxing effort due to a medical condition</li> <li>altered mental status requires supervision when leaving home severity of cardiac or pulmonary disease limits activity tolerance</li> </ul>
Signature of Medicare enrolled MD/Date
Signature:
Printed Signature: