

## Medicare Appeal Letter Example for Case Study

### **Purpose statement for appeal**

This is an appeal letter for denial of payment occupational therapy services for Joan G. on the dates of 10/08/2018 and 10/10/2018. This appeal letter describes medical necessity for occupational therapy services.

**Medicare denial reason:** The denial letter stated occupational therapy services were “not medically necessary”. No further explanations were included.

### **Dates for denial of payment:**

10/08/2018

10/10/2018

### **Billing codes that were denied payment:**

Therapeutic Activities - 97535

Self-Care Management Training - 97530

### **Related Functional Limitation:**

Initial evaluation indicated she had a new onset of limitations in ADL performance due to weakness and lack of motivation related to limitations in emotional well-being. At the time of the OT evaluation, she was requiring moderate assistance with dressing, hygiene, grooming, and toileting and was not participating in any meaningful activities. She had difficulty with weight shift and stability when standing to pull up pants and had U/E tremors that made it difficult to manipulate objects, such as toothbrush and hair comb. The tremors contributed to *excess/double disability* because they caused her to decrease her participation, which led to further U/E weakness, decreasing her ability to use arms and hands for washing her body and combing hair and brushing teeth. Her happiness was evaluated with Dr. Denier’s Satisfaction with Life Scale, which revealed her happiness was significantly compromised. She added that she is sad “because I don’t have anything to do anymore.” 6 months prior to the OT evaluation, she reported she felt happy and was doing all of her cares and housekeeping tasks independently. A series of falls contributed to her decline in ADLs and emotional well-being and overall quality of life.

### **Related Functional Goals:**

The specific goal addressed on the days that were denied payment are listed below. As written in the initial OT Plan of Treatment dated 10/5/18:

Long Term Goal: JG will participate independently in 1 health promoting activity per day that supports physical and psychological wellbeing needed to participate in ADLs.

The related short term goals included: 1) “Will demonstrate safe weight shift in standing while performing task-specific leisure activities that correlate with dressing motions for pulling up pants.” 2) “Will verbally express motivation for engagement in therapeutic leisure activities that support U/E strength and mobility needed for U/E dressing, hygiene, and grooming.”

### **Assertion of medical necessity** for the days and codes that were denied:

10/08/2018: Therapeutic Activities 97535 (1 unit) and Neuromuscular Re-education 97112 (1 unit)

10/10/2018: Self Care Management Training 97530 (3 units)

It was medically necessary to help JG participate in more activities to enhance her L/E and U/E motor skills needed for self-cares. It was also important to use meaningful leisure activities as a modality (therapeutic activity) to increase the quality of her engagement and motivation toward improvement of ADL performance.

### **Interventions/Outcomes for Functional Goals**

On 10/8/18 OT used a leisure activity as a therapeutic modality to improve L/E and U/E motor skills such as vestibular, proprioceptive, and strength. The OT positioned the leisure activity and supplies at different heights and sides to facilitate trunk rotation and diagonal movement patterns for vestibular and proprioceptive stimulation (neuromuscular re-education). The OT stimulated proprioceptors (tapping for neuromuscular re-education) during the activity. The OT also added 1 lb wrist weights and graded up to 3 lbs while JG performed the activity to facilitate strengthening. Improvement in motor skills was noted within 15 minutes of doing this meaningful leisure activity as a modality, which is much greater improvement than rote exercise affords. For this reason, OT used the leisure activity as the modality for the health promoting activity to be included on the functional maintenance program.

On 10/10/18 OT targeted the “health promoting activity” goal as a self-care skill, by doing instruction to resident, activity and restorative aide personnel (5 staff) on the functional maintenance program (FMP) to facilitate ongoing participation to support health, well-being, and quality of life. The resident was present the whole time. FMP instruction is a Medicare reimbursable service described in Medicare rules. Health promotion intervention targets functional ability (occupation) that is also reimbursable by Medicare. Health promoting activities can target physical, cognitive, and emotional wellness.

Upon D/C of OT, resident was independent in dressing, hygiene, and grooming and her satisfaction with life scale was much higher (see attached D/C note). This shows that use of leisure as an occupation-based therapeutic activity for health management was a valuable approach for her. The resident stated at D/C “Thank-you so much for the fun therapy! Now I have something to do again!”

### **Evidence for Goals and Interventions:**

Dorrestein & Hocking (2010), O’Sullivan & Hocking (2006), and O’Toole, Connolly & Smith (2013): Leisure supports mental and physical health as well as overall well-being as residents are able to maintain or improve current skills to improve life satisfaction through participation in meaningful occupations.

Causey-Upton (2015): Participation in leisure also addresses cognition, physical and mental health to help provide a sense of personal identity.

Reza Rostami, Akbarfahimi, Hassani Mehraban, Reza Akbarinia, & Samani (2017): Compared to rote exercise, occupation-based group had better: performance in objective and subjective measures of occupational performance; motivation; satisfaction with, and perception of performance; and continued improvement at follow-up.

**Supplemental Documentation:**

Summary of supplemental documentation: The need to grade and adapt activities to be more challenging after OT was D/Cd illustrates the value of the FMP in using her leisure activities to promote physical and emotional well-being.

Irritable mood upon arrival at LTC facility, was not interested in daily activities facility had to offer > after implementation of FMP, JG began showing interest in engaging in activities as well as with others

**Final Request:**

Please, reconsider the denial of payment determination based upon the significant improvement JG made when using her leisure as a therapeutic activity related to health management, both of which are billable codes for Medicare reimbursement.

Thank you for taking the time to further consider coverage for this case.

**Signature(s)/Date**

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