# Local Coverage Article:
## Maintenance Programs (A56110)

Links in PDF documents are not guaranteed to work. To follow a web link, please use the MCD Website.

## Contractor Information

<table>
<thead>
<tr>
<th>Contractor Name</th>
<th>Contract Type</th>
<th>Contract Number</th>
<th>Jurisdiction</th>
<th>State(s)</th>
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## Article Information

### General Information

- **Original Article Effective Date**: 08/31/2018
- **Revision Effective Date**: N/A

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Article Guidance

Article Text:

Noridian Healthcare Solution is providing clarification regarding outpatient therapy services and maintenance programs.

Development of a maintenance program may be reasonable if the qualified professional determines the patient's expected rehabilitation potential would be insignificant in relation to the extent and duration of therapy services required to achieve such potential. Maintenance programs are developed to:

1. Maximize the patient's rehabilitation potential;
2. Assure patient safety;
3. Train the patient, family member and/or unskilled staff in home maintenance activities;
4. Prevent further decline in the patient's condition.

Maintenance programs must be individualized to meet the needs of each patient. Revisions to the maintenance program must be medically reasonable and necessary, i.e. documentation should support a significant change in the patient's condition/status that requires additional skilled therapy evaluation and training services.

There is an expectation that the development of the maintenance program and any medically necessary revisions will be completed in a reasonable (and generally predictable) period of time. It is also anticipated that updates to the maintenance program will be necessary on an infrequent basis. Once the maintenance program can be safely and effectively furnished by non-skilled personnel without the supervision of a qualified professional, the patient should be discharged from skilled services. The actual performance of the maintenance program is not reimbursable by Medicare, as it is not considered to be at a skilled level of care.

When providing therapy services related to a maintenance program, the qualified professional must clearly document:

1. Therapy services being provided are clearly focused on establishing or revising an individualized maintenance program.
2. The specific change in patient status/condition, which justifies the skilled intervention as medically reasonable and necessary at this point in time.
3. Therapy services being provided are at a skilled level of care: The services are not palliative procedures which are repetitive or that reinforce previously learned skills or only maintain function after a maintenance program has already been developed.

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Coding Information

Bill Type Codes:
Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the article does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the article should be assumed to apply equally to all claims.

N/A

Revenue Codes:
Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the article, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the article should be assumed to apply equally to all Revenue Codes.

N/A

CPT/HCPCS Codes N/A
ICD-10 Codes that are Covered N/A
ICD-10 Codes that are Not Covered N/A

Revision History Information

N/A Related Local Coverage Document(s) N/A

Related National Coverage Document(s) N/A

Statutory Requirements URL(s) N/A

Rules and Regulations URL(s) N/A

CMS Manual Explanations URL(s) N/A

Other URL(s) N/A

Public Version(s) Updated on 08/21/2018 with effective dates 08/31/2018 - N/A

Keywords