

Strategies for Documenting the Need for Assistive Technology

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This is the eighth slide lecture in a series of eight lectures that are intended to provide an overview of the wheelchair mobility and seating evaluation process. The lecture series contains:

- Seating Biomechanics
- Wheelchair Seat Cushions
- Pressure Mapping
- Wheelchair Backs
- Manual Wheelchair Set Up & Propulsion Biomechanics
- Rehabilitation Technology Suppliers & Clinicians
- Service Delivery
- Strategies for Effective Documentation

Presenter Biosketch

- Mark Schmeler is the Director of Clinical Services at the Center for Assistive Technology. He has many years of front-line clinical experience in seating and mobility with individuals with complex seating needs.
- Mary Ellen Buning is a research associate in the Rehabilitation Science and Technology Department with interest in AT education, service delivery and functional outcomes that result from AT devices and services.

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Introduction & Overview

- The Need
- Perspective
- Perspectives of the Funding Source
- Identify the User
- Existing Technology & Means of Function

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It is important to realize up front the importance of documentation to the provision of assistive technology (AT) devices and services. These AT devices are new for the end-user and also tend to be new for persons who authorize payment for them.

Payers need help to understand exactly what the client's situation is, what the AT is, what it will do and why the AT is the best alternative for a given client.

Your job is to persuade! If you are not willing to do a good job on this step in the AT evaluation process then you shouldn't start. Funding and delivery **depend** on good documentation.

This presentation will cover these points above.

Introduction & Overview Cont'd

- Additional Information
- Evaluation Procedures
- Description of Equipment's Function
- Alternatives to Recommendations

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As a result of your documentation, the funding agency should have a clear picture of who the client is, what their functional limitations and needs are, and what devices are being recommended to address those needs. They should know what your other device recommendations are and why they will not deliver the optimal results.

The Need for Documentation

- As Important as Evaluation
- Denial of Service
- Cost-Effectiveness

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Documentation that is not effective can lead to denial of the requested device or service.

These days any documentation should substantiate the contribution of the AT device to a more cost-effective outcomes such as reduced personal care time, increased independence from more expensive forms of care or levels of supervision, more expensive living situations or less restrictive educational settings.

Perspective of Funding Source

- Health/Medical Insurance
- Vocational Rehabilitation
- Public School Systems
- Others

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It important to remember the point of view of the particular funding source that your documentation is directed to.

Health/Medical funders want to know about the client's issues in the context of the medical model. They want a medically based assessment that contains recommendations for devices/services that affect health and safety in relationship to a medical condition.

Vocational Rehabilitation wants to know about work & employment related issues. They want to know about factors like the client's ability to get to work dependably, to perform the functions of the job, and to move or communicate in work related situations.

Public Schools want to know about issues according to the educational model, i.e., educationally based assessment that addresses the tasks related to learning, communicating and functioning within the school environment. Remember the role of related services in the public schools... the services that will allow a child to benefit from a public education in the least restrictive environment.

Assumptions Regarding the Funding Source

- Knows Nothing About the User
- Knows Nothing About You
- Knows Nothing About the Equipment
- Has Every Incentive not to Pay

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Don't make any assumptions about the knowledge level of the person functioning as the case reviewer at the funding source. Many times they are simply following a policy manual and have little practical knowledge about the issues, the credentials, diagnoses, and functional consequences of medical issues such as spasticity, legal blindness, or impaired sensation.

Since conserving financial resources for their employer is their primary objective, they have every incentive **not** to pay. You have to give them good reasons to spend their money, i.e., convince them that this situation is what they had promised to pay for or were obligated to pay for under the law, in the insurance policy or in their prior agreement.

Identify the User

- Age, Gender, Diagnoses
- Secondary Conditions
- Relationship to Function

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Always relate this type of information back to a functional level.

Talk about and define or list the tasks can or cannot be done because of the symptom or deficit. Helpful to contrast this with more expensive alternatives, i.e., the cost of living at home independently with "X" adaptations versus long-term care or assisted living without "X" adaptation.

JP Example

- JP is a 30 year old gentleman with a nineteen year history of Duchennes Muscular Dystrophy resulting in severe muscle weakness and multiple orthopedic deformities.



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The following slides are some examples of how to use documentation to create a fuller picture of what is needed to help funders see the value, purpose or contribution of Assistive Technology (AT) devices to the individual in question.

AH Example

- AH is 12 year old student diagnosed with Morquio Syndrome which causes decreased muscle strength throughout his body and joint contractures in both upper extremities which interfere with his daily activities.



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Specific Problem

- Avoid reducing the client to a "diagnosis."
- Relate the stated problem to client's functional issues.

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JP Example

- Because of limited physical motor capabilities, JP is completely dependent on caregivers for most activities of daily living including mobility.



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JP Example - Cont'd

- He is also unable to shift his posture or move himself which has resulted in the onset of orthopedic deformities. Additionally, this places him at high risk of developing pressure sores.
- He has been referred to the assistive technology team for the evaluation and prescription an appropriate wheelchair and seating system.

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AH Example

- One of AH's most significant problems is his inability to write, which impacts his ability to complete school work.



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AH Example - Cont'd

- AH has recently completed 6th grade and will be proceeding to the 7th grade in an inclusion program. He has been referred to the assistive technology team for the evaluation and recommendation of computer access to assist with academic inclusion.

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Existing Technology & Means of Function

- Provides Baseline
- Description
- Condition
- Age
- Problems

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Describe what is currently being used and the contribution that it is making to function, health, interaction, independence.

JP Example

- JP currently has a power wheelchair equipped with a standard proportional joystick as well as sling seat and back upholstery.



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JP Example- Cont'd

- The seating system is 9 years old and not in operating condition due to burned out motors which are not worth repairing due to the overall poor integrity of the frame and poor seating system.

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JP Example - Cont'd

- JP is currently pushed in this wheelchair by his personal care attendant. JP's posture in the system is severely compromised. It is characterized by a kyphoscoliosis of the spine, pelvic obliquity, and windswept posturing of the lower extremities.

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JP Example - Cont'd

- He is unable to adjust his posture and reports being very uncomfortable. He has superficial redness over his coccyx and is at high risk of developing pressure sores.

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JP Example - Cont'd

- He is interested in a power wheelchair with proper seating that will provide him with an independent means of mobility both in his home and the community.

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AH Example

- AH had been using an Apple IIe at home with removable keyboard while lying in a prone or supine position on the floor.



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AH Example - Cont'd

- Reports indicate that AH fatigues easily when engaged in all types of activities. He reports that his wrists become painful when using his existing computer.

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Problem List & Goals

- Be specific!
- Relate to what can't be done
- Relate to the user's goals
- Importance of these goals

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When discussing the client's situation in the documentation, lay out as clear a picture as is possible.

JP Example

- The following specific problems have been identified related to JP's condition:



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JP Example 1 - Cont'd

- He has no independent means of mobility due to severe muscle weakness and therefore needs full-time personal care attendants to push him.

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JP Example - Cont'd

- Due to a lack of postural support in his wheelchair, he has developed multiple orthopedic deformities which cause pain and difficulty with overall management of his activities of daily living. If not addressed, he will be at high risk for compromised vital organ capacity, pressure sore development, and increased pain.

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AH Example

- The following specific problems have been identified related to AH's condition:



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AH Example - Cont'd

1. Due to decreased muscle strength and joint contractures in both upper extremities, AH is unable to write or access a computer effectively. These are necessary activities in order for him to engage in an academic program.

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Evaluation Procedures

- Clarify the clinician's decision making process.
- Demonstrates use of accepted professional assessment procedures.
- Standardized & Non-Standardized
 - Physical Motor Assessment
 - Clinical Trials / Simulations
 - Natural Environments

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JP Example

- Following the completion of a comprehensive interview and physical motor assessment, JP was placed in a seating simulator which was adjusted to accommodate his postural deformities.



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JP Example - Cont'd

- Pressure mapping was conducted to determine the most appropriate seat cushion to provide him with comfort, support, and pressure distribution. It was found that a custom modular foam seat and backrest was most ideal in addressing these needs.



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JP Example - Cont'd

- It was also found that adjustable tilt in space provided him with good postural realignment and pressure relief. Adjustable recline did not work due his limited hip range of motion and spinal deformity.

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JP Example - Cont'd

- JP had an opportunity to test drive three different power wheelchairs in the clinic and outside. He found that the heavy duty system was most ideal because it would be able to negotiate the rough terrain around his home yet still fit in his bathroom.

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JP Example - Cont'd

- A loaner version of this power wheelchair and seating system was delivered to his home by a local supplier for a two week trial. JP reported he used the wheelchair on a daily basis and that it was very effective in meeting his needs.

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JP Example - Cont'd

- He was satisfied with the performance and encountered no difficulties with accessibility in his home or transportation system.

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AH Example

- Following a comprehensive interview and complete assessment of AH's upper extremity function, he was provided with an opportunity to try several alternative keyboards, software, and other alternative inputs.



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AH Example - Cont'd

- Through extensive clinical trials of various computer systems and software, it was found that a laptop computer with forearm and wrist supports was the most effective means for him to enter data into the computer.

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Function of the Equipment

- Describe each feature or item.
- Relate these back to user's disabilities.
- Reviewers dispute components.
- Use chart or grid.

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JP Example

- A powered wheelchair is necessary in JP's case as he does not have the strength to propel a manual wheelchair. He needs an independent means of getting around in his home and community.

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AH Example

- A laptop computer with forearm and wrist supports is needed as he is unable to write, due to his decreased strength and upper extremity range of motion. He needs an efficient mode of computer access to assist with academic inclusion.

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Chart Example 1

INTERVENTION and SPECIFICATION	JUSTIFICATION
<ul style="list-style-type: none">• Seat - Sized to fit (name brand / type / means of attachment / base / angle)	<ul style="list-style-type: none">• Provide an appropriate base of support and pelvic positioning.• Provide appropriate pressure distribution over weightbearing surface of the buttocks to reduce the potential for skin breakdown.

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Chart Example 2

INTERVENTION and SPECIFICATION	JUSTIFICATION
<ul style="list-style-type: none">• Arm Support - full length / desk length / height adjustable / single posted / double posted / flip-up / removable / arm pad type / arm troughs / lap tray / mounting hardware	<ul style="list-style-type: none">• Provide appropriate arm support and additional trunk stability through weight bearing in the upper extremities.

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Chart Example 3

INTERVENTION and SPECIFICATION	JUSTIFICATION
<ul style="list-style-type: none">• Back Support – Sized to fit add-on (name brand / type / means of attachment / base / angle), adjustable tension back upholstery, standard sling upholstery, lateral supports (swing-away / fixed / size / location).	<ul style="list-style-type: none">• Provide appropriate trunk support and spinal alignment to reduce the potential for orthopedic deformity.

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Alternatives

- Describe other equipment alternatives that exist.
- Discuss why they won't work or won't address the client's problem or issue.
 - Function or features
 - Cost
 - Complexity
 - Compatibility

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JP Example

- Without a power wheelchair, JP will continue to need around the clock attendants. Without the recommended seating system the power wheelchair would be of no use to JP and abandoned.

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JP Example - Cont'd

- He would then be forced to remain in bed where he is at greater risk of developing pressure sores, further orthopedic deformities, and depression.

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AH Example

- Without the laptop computer, AH will have no means to produce written text and he will have difficulty engaging in an academic inclusion program, and therefore will be forced into an ungraded instruction program.

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Pictures and Videos

- Enhance justification.
- Help to describe the intervention.
- Help to illustrate need for non-clinician reviewers or funders.
 - Provide a picture of before and after.

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Other Issues

- Length of letter.
- Author of document.

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Letters that are too long don't get read as thoroughly. Use only as many words as are necessary. Use bullets to communicate information concisely. Use summary paragraphs. Be clear on who has written the documents and what their credentials and experience are.

The Process

- Time consuming
- Not reimbursable
- Ethical responsibility of clinicians

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The process of documentation can be time consuming. Find ways to automate the data collection process using software of text databases or templates. Get information technology working on your side!

Collect and enter data one time and reuse it in multiple formats: intake records, file documentation, letters of justification, periodic rechecks, etc.

Put your liberal arts education to work! Write good letters.

Strategies

- Find out ahead of time what information the case reviewer wants/needs
- If possible, have the reviewer present during client evaluation
 - Physically present
 - Via teleconference
- Dictation systems
- Intelligent database / automatic reporting

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Conclusion

- The most important part of the process... if you are not committed to this phase don't start!
- Be thorough yet concise!
- Denial is just part of the process... Always appeal!!!!

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Review Questions

- What is the purpose of a letter of justification?
- Who is ethically responsible for the accuracy or truth of information reported in a letter of justification?
- Describe how an automated data entry system can decrease time used in documentation.

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