

Daily Therapy Schedule: Meara, Joan O Meara Disc: ST

Facility: Wingate at Haverhill-2784

Date: 04/11/2013

Start Time	End Time	Scheduled Minutes	Rm	Patient Name	Payor	CPT Codes	Minutes/Units
		45	█ 5x	█	Mang	92526 - Treat oral function	___/___
Planned I/C/G Minutes: 45/0/0							
		30	█	█	MedA	92508 - Group speech therapy 92526 - Treat oral function	___/___ ___/___
Planned I/C/G Minutes: 30/0/0							
COT Review Date: 04/16/2013 RUG Level: V Total Adjusted Minutes: 516							
		30	█	█	MedB	92507 - Speech therapy 92508 - Group speech therapy	___/___ ___/___
Planned I/C/G Minutes: 30/0/0							
		40	█	█	MedA	92507 - Speech therapy 92508 - Group speech therapy 92526 - Treat oral function	___/___ ___/___ ___/___
04/11/2013 5 Day ARD							
Planned I/C/G Minutes: 40/0/0							
COT Review Date: 04/18/2013 RUG Level: U Total Adjusted Minutes: 705 (WARNING: At risk for Change of Therapy OMRA)							
		30	█ 5	█	MedA	92507 - Speech therapy 92508 - Group speech therapy	___/___ ___/___
Planned I/C/G Minutes: 30/0/0							
COT Review Date: 04/17/2013 RUG Level: U Total Adjusted Minutes: 210 (WARNING: At risk for Change of Therapy OMRA)							
		40	█ 5x	█	MedA	92508 - Group speech therapy 92526 - Treat oral function	___/___ ___/___
Planned I/C/G Minutes: 40/0/0							
COT Review Date: 04/12/2013 RUG Level: U Total Adjusted Minutes: 720							
		45	█ 5x	█	Mang	92507 - Speech therapy 92508 - Group speech therapy 92526 - Treat oral function 97110 - Therapeutic exercise	___/___ ___/___ ___/___ ___/___
Planned I/C/G Minutes: 45/0/0							
		40	█ 5	█	MedB	92507 - Speech therapy 92508 - Group speech therapy 92526 - Treat oral function	___/___ ___/___ ___/___
Planned I/C/G Minutes: 40/0/0							
		30	█ 5	█	HMOB	92526 - Treat oral function	___/___
Planned I/C/G Minutes: 30/0/0							

Total Approved Labor Hours: _____

Signature: _____

Date: _____

When total Scheduled Minutes & total Planned minutes do not match, the minutes were modified on the Scheduler screen.

█

19

Daily Therapy Schedule: Meara, Joan O Meara Disc: ST

Facility: Wingate at Haverhill-2784

Date: 04/12/2013

Start Time	End Time	Scheduled Minutes	Rm	Patient Name	Payor	CPT Codes	Minutes/Units
		45	█ 5x	█	Mang	92526 - Treat oral function	___/___
Planned I/C/G Minutes: 45/0/0							
		30	█	█	MedA	92508 - Group speech therapy 92526 - Treat oral function	___/___ ___/___
Planned I/C/G Minutes: 30/0/0							
COT Review Date: 04/16/2013 RUG Level: V Total Adjusted Minutes: 532							
		30	█	█	MedB	92507 - Speech therapy 92508 - Group speech therapy	___/___ ___/___
Planned I/C/G Minutes: 30/0/0							
		30	█ 5x	█	MedA	92508 - Group speech therapy 92526 - Treat oral function	___/___ ___/___
Planned I/C/G Minutes: 30/0/0							
COT Review Date: 04/12/2013 RUG Level: U Total Adjusted Minutes: 726							
		45	█ 5x	█	Mang	92507 - Speech therapy 92508 - Group speech therapy 92526 - Treat oral function 97110 - Therapeutic exercise	___/___ ___/___ ___/___ ___/___
Planned I/C/G Minutes: 45/0/0							
		40	█ 5	█	MedB	92507 - Speech therapy 92508 - Group speech therapy 92526 - Treat oral function	___/___ ___/___ ___/___
Planned I/C/G Minutes: 40/0/0							

Total Approved Labor Hours: _____

Signature: _____

Date: _____

When total Scheduled Minutes & total Planned minutes do not match, the minutes were modified on the Scheduler screen.

█ 21 NO ST
 █ 1 NO ST
 DC █

20