

INSTRUCTIONS REGARDING THE USE OF OCCUPATIONAL THERAPY ASSISTANTS UNDER THE NM DEVELOPMENTAL DISABILITIES MEDICAID WAIVER

I. INTRODUCTION AND PURPOSE

The NM Developmental Disabilities Supports Division (DDSD) recognizes the positive contribution of Occupational Therapy Assistants (OTAs) in providing needed healthcare resources for individuals with Intellectual and Developmental Disabilities (I/DD) in NM and supports the use of OTA services to promote effective utilization of Occupational Therapy (OT) resources throughout the state.

The purpose of this document is to provide instructions for the appropriate use of OTAs for the provision of OT services under the NM DD Medicaid Waiver. These instructions are meant as an adjunct to the NM OT Practice Act and the NM DD Medicaid Waiver Standards. It is expected that OTs, OTAs, Therapy Provider Agencies, and Case Managers will understand and follow these instructions when utilizing OTA services under the NM DD Medicaid Waiver.

II. DEFINITION OF TERMS

A. Occupational Therapy Assistant (OTA): The OTA delivers occupational therapy services under the supervision of and in partnership with the OT. OTAs provide services in collaboration with a supervising OT to implement a therapy intervention plan that assists an individual to participate fully in life activities (occupations).

An OTA has earned an Associates Degree from an accredited college or educational program. This generally includes the equivalent of two years of approved coursework and 16 weeks of supervised fieldwork. In NM an OTA may practice with a provisional permit pending certification by the National Board for Certification in OT (NBCOT) for a period not exceeding six months.

B. Certified Occupational Therapy Assistant (COTA): A COTA is an OTA who has passed the NBCOT national board examination and has been certified through NBCOT.

III. LICENSING REQUIREMENTS: OTAs providing DD Waiver Services must have a current and active license issued by the New Mexico Regulation and Licensing Department (NMRLD).

IV. APPLICABLE LAWS AND STANDARDS: OTAs must follow the current DD Waiver Therapy Standards; applicable DDSD Standards and Instructions; the NM OT Licensure Act; and applicable American Occupational Therapy Association (AOTA) Standards, Codes, and practice Guidelines.

V. TASK DELEGATION: OTAs may perform OT procedures and tasks pursuant to a Therapy Intervention Plan written by the supervising OT and as governed by the current NM OT Licensure Act. Application of the NM OT Licensure Act is further governed by the following instructions for task delegation when providing billable services under the DD Waiver in New Mexico.

A. Service Provision: It is the responsibility of the OT to determine when to delegate therapy activities to the OTA. The OT shall take into consideration the level of experience the OTA has with applicable disabilities/conditions and task areas assigned. It is the responsibility of the OTA to demonstrate service competency in performing the OT services assigned and to seek additional supervision when needed to complete tasks safely and effectively.

1. Interdisciplinary Team (IDT) Meetings: The OT is expected to attend the Annual IDT Meeting to assist in developing the Interdisciplinary Service Plan (ISP). The OTA is highly encouraged to attend. The DD Waiver Therapy Standards stipulations must be followed if the meeting must be missed due to illness or schedule conflict. The OT and/or the OTA may attend other scheduled IDT meetings that have direct relevance to OT services at the discretion of the OT.
2. Specialized Appointments: The OT or the OTA are encouraged to attend specialized appointments (SAFE, seating clinics, videofluoroscopy, etc.) that have direct relevance to OT treatment areas. The OT should use professional judgment to determine if the OT or the OTA should attend.
3. Therapy Intervention Plan Implementation: Therapy intervention completed by the OTA with the individual and direct support personnel (DSP) are directed by the OT through the Therapy Intervention Plan. When appropriate, the OT should observe the OTA complete various tasks with the individual to determine that tasks can be completed safely and effectively. The Therapy Intervention Plan must be of sufficient detail to direct the OTA in service provision.
4. Assistive Technology (AT) and Specialized Services: The OT should assure that the OTA has sufficient skills to complete AT and specialized service tasks effectively. The OT should consider recommending more OT hours on the budget to provide AT and specialized services (aspiration risk management, splinting, positioning, sensory dysfunction, etc.) if the OTA's level of expertise would affect the OTA's ability to provide these services or parts of these services safely and effectively.

B. Documentation.

1. The OT must complete the following documentation in accordance with the DD Waiver Standards:
 - a. The Initial Therapy Evaluation Report.

- b. Any Targeted Therapy Evaluation Reports such as Home Evaluations, Sensory Dysfunction Evaluations, or Assistive Technology Evaluations.
 - c. The Annual Re-Evaluation Report. Note: The OTA may contribute information related to the status of current OT Goals/Objectives, however, interpretation of data and recommendations must be written and developed by the OT.
 - d. The Budget Development Worksheet for Therapists column of the Therapy Documentation Form (TDF).
 - e. Any additional recommendations that may be included in the Semi-Annual Therapy Progress Report section of the TDF.
 - f. The Therapy Intervention Plan section of the TDF.
 - (i) The OTA may contribute information related to the development of the Therapy Intervention Plan, however, the Therapy Intervention Plan must be written and developed by the OT. Any adjustments or modification of the Therapy Intervention Plan is subject to final approval by the OT. Permanent Therapy Intervention Plan changes must be documented and co-signed by the OTA and the OT.
 - (ii) The Therapy Intervention Plan must be of sufficient detail to outline the therapy tasks that are to be completed by the OTA and therapy tasks that are to be completed by the OT.
 - g. The Discontinuation of Therapy Services Report.
2. The OTA may complete the following documentation (with the exception of any sections related to interpreting and analyzing evaluation data):
- a. The Semi-Annual Therapy Progress Section of the TDF (the OT must complete any specific recommendations that may be included).
 - b. Written Direct Support Instructions (WDSIs). (The OTA should collaborate with the OT as needed on development or modification of WDSIs).
 - c. ISP Action Plan Therapy Strategies.
 - d. Training Rosters.
 - e. Therapy Service Contact Notes.
 - f. Other incidental documentation requests related to the OTAs delegated tasks.
3. The OT must review and co-sign all documentation completed by the OTA with exception of ISP Action Plan Therapy Strategies, training rosters, and minor incidental documentation requests. The OT may co-sign each page of Therapy

Service Contact Notes as opposed to each individual contact note. Electronic Signatures are acceptable.

4. The OT and the OTA should collaborate regarding who will be responsible for the distribution of documentation to team members and to the Therapy Provider Agency. Documentation should be co-signed by the OT before distribution to team members or to the Therapy Provider Agency.

VI. SUPERVISION REQUIREMENTS: OTAs must be supervised in accordance with the current NM OT Licensure Act. It is the responsibility of the OT and the OTA to seek the appropriate quality and frequency of supervision to ensure safe and effective OT service delivery and to collaboratively develop a plan for supervision. Supervision must be documented in accordance with the NM OT Licensure Act.

VII. THERAPY REIMBURSEMENT: Occupational Therapy and Occupational Therapy Assistant reimbursement is governed by the NM DD Medicaid Waiver Standards and applicable Federal and NM state laws and regulations.

A. Related Reimbursement Instructions

1. Both the OT and the OTA may bill for attending the Annual ISP Meeting and the Six-Month IDT Meeting (if applicable).
2. The OT should ask for enough hours on the budget to attend the Annual ISP Meeting, complete billable documentation, complete allowable therapy services not assigned to the OTA, and to complete billable collaboration/consultation with the OTA that is needed to coordinate and implement effective OT services for the individual. The OT must ask for a minimum of 24 units on the budget.
3. Consultation hours noted above may incidentally meet some OTA Supervision Requirements but are not intended to meet all supervision requirements. Time needed for supervision is dependent on the practice level of the OTA, the complexities of the Therapy Intervention Plan, the DD Waiver individual's OT service needs, and the OT/COTA Supervision Plan as applicable.

RESOURCES:

Current DD Waiver Standards and Instructions: <https://nmhealth.org/about/ddsd/>

NMRLD – OT Rules and Regulations – NM OT Licensure Act – Supervision Plans, etc.
http://www.rld.state.nm.us/boards/occupational_therapy.aspx

DDSD Clinical Services Bureau – Therapy Services and Resources:
<https://nmhealth.org/about/ddsd/pgsv/clinical/therapy/>

American Occupational Therapy Association Website: www.aota.org (See especially - “Instructions for Supervision, Roles, and Responsibilities during the Delivery of Occupational Therapy Services”)

New Mexico Occupational Therapy Association Website: www.nmota.org

NBCOT Website: www.nbcot.org