G510 (Rev. 219; Issued: 04-12-24; Effective: 04-12-24; Implementation: 04-12-24)

§484.55 Condition of participation: Comprehensive assessment of patients.

Each patient must receive, and an HHA must provide, a patient-specific, comprehensive assessment. For Medicare beneficiaries, the HHA must verify the patient's eligibility for the Medicare home health benefit including homebound status, both at the time of the initial assessment visit and at the time of the comprehensive assessment.

Interpretive Guidelines §484.55

A comprehensive assessment of the patient, in which patient needs are identified, is a crucial step in the establishment of a plan of care. In addition, a comprehensive assessment identifies patient progress toward desired outcomes or goals of the care plan.

The manner and degree of noncompliance identified in relation to the standard level tags for §484.55 may result in substantial noncompliance with this CoP, requiring citation at the condition level.