Home Health Certification and Plan of Care

Order ID: 1150/21857

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
1C87MA3WG32	09/05/2026	From: 09/05/2026 To: 11/03/2026	29872	217058

6. Patient's Name and Address

Marvin Best
7437 Oakcrest Lane,
Clarksviille, MD 21029-
301-518-1844

7. Provider's Name, Address and Telephone Number

HomeCentris Healthcare LLC
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
410-321-8448
1487113239

8. DOB 04/19/1937 **9.Sex** Male

11. ICD	Principal Diagnosis	Date
E11.65	Type 2 diabetes mellitus with hyperglycemia	09/05/26

13. ICD	Other Pertinent Diagnoses	Date
S76.111D	Strain of right quadriceps muscle fascia and tendon subs	09/05/26
S76.211D	Strain of adductor musc/fasc/tend right thigh subs	09/05/26
I13.0	Hyp hrt & chr kdny dis w hrt fail and stg 1-4/unsp chr kdny	09/05/26
I50.9	Heart failure unspecified	09/05/26
E11.22	Type 2 diabetes mellitus w diabetic chronic kidney disease	09/05/26
N18.32	Chronic kidney disease stage 3b	09/05/26
I48.20	Chronic atrial fibrillation unspecified	09/05/26
E78.5	Hyperlipidemia unspecified	09/05/26
N40.0	Benign prostatic hyperplasia without lower urinry tract symp	09/05/26
H04.129	Dry eye syndrome of unspecified lacrimal gland	09/05/26
M62.569	Muscle wasting and atrophy NEC unsp lower leg	09/05/26
H51.0	Palsy (spasm) of conjugate gaze	09/05/26
E11.51	Type 2 diabetes w diabetic peripheral angiopath w/o gangrene	09/05/26
I70.201	Unsp athscl native arteries of extremities right leg	09/05/26
I25.10	Athscl heart disease of native coronary artery w/o ang pctrs	09/05/26
N28.1	Cyst of kidney acquired	09/05/26
R13.10	Dysphagia unspecified	09/05/26
K21.9	Gastro-esophageal reflux disease without esophagitis	09/05/26
E04.2	Nontoxic multinodular goiter	09/05/26
E11.40	Type 2 diabetes mellitus with diabetic neuropathy unsp	09/05/26
M35.3	Polymyalgia rheumatica	09/05/26
F17.200	Nicotine dependence unspecified uncomplicated	09/05/26
J45.909	Unspecified asthma uncomplicated	09/05/26
H90.3	Sensorineural hearing loss bilateral	09/05/26
E55.9	Vitamin D deficiency unspecified	09/05/26
K57.90	Dvrtclos of intest part unsp w/o perf or abscess w/o bleed	09/05/26
M47.817	Spondyls w/o myelopathy or radiculopathy lumbosacr region	09/05/26
M47.816	Spondylosis w/o myelopathy or radiculopathy lumbar region	09/05/26
M85.80	Oth disrd of bone density and structure unspecified site	09/05/26

10. Medications: Dose/Frequency/Route (N)ew (C)hanged

AMLODIPINE 5 MG / 1 Tablet by mouth in the morning for HTN Hold for SBP< 110
ARTIFICIAL TEARS Ophthalmic Solution 1-0.3 % / Instill 2 drop in both eyes two times a day for dry eyes
BUMETANIDE 2 mg 2 MG / 1 Tablet by mouth in the morning for CHF
ELIQUIS 2.5 MG / 1 Tablet by mouth every morning and at bedtime for DVT Prophylaxis
Ferrous Sulfate - Ferrous Sulfate: Folic Acid 325 mg (65 mg iron) / 1 Tablet by mouth in the morning for IRON DEFECIENCY TAKE WITH FOOD
FINASTERIDE 5 MG / 1 Tablet by mouth at bedtime for BPH
Metamucil - Senna 4 in 1 Fiber Oral Packet / Give 1 packet by mouth in the morning for CONSTIPATION Mix with 8oz liquid.
Nitrostat - Nitroglycerin 0.4 MG / 1 Tablet sublingually every 5 minutes as needed for CHEST PAIN MAY REPEAT X 3 DOSES: NOTIFY MD IF NOT RESOLVED AND SEND TO ER BLOOD PRESSURE AND PULSE TO BE TAKEN BEFORE EACH DOSE
Potassium Chloride - Potassium Chloride 20meq ER 20 MEQ / 1 Tablet by mouth in the morning for HYPOKALEMIA
ROSUVASTATIN CALCIUM 5 mg 5 MG / 1 Tablet by mouth at bedtime for HLD
SENNA-DOCUSATE SODIUM 8.6-50 MG Tablet / Give 2 tablet by mouth twice a day for CONSTIPATION
Tamsulosin Hydrochloride - Tamsulosin Hydrochloride 0.4 MG Capsule / Give 2 capsule by mouth at bedtime for BPH 2 Caps= 0.8mg
Tylenol Es 500 Mg - Acetaminophen 0 Give 2 tablet by mouth every 8 hours for PAIN
Vitamin D3 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 1,250 mcg (50,000 unit) / 1 Capsule by mouth in the morning every Sat for vitamin d deficiency. for 8 Weeks give q weekly.
Vitamin B-12 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 1,000 MCG / 1 Tablet sublingual in the morning for VITAMIN B DEFICIENCY
DAPAGLIFLOZIN 5 MG Tablet; 1 TAB by mouth at bedtime for DM
Novolog - Insulin Aspart Recombinant Inject 8 unit subcutaneously before meals for DIABETES Give addition to any needed SSC subcutaneous before meal Inject 8 unit subcutaneously before meals for DIABETES Give addition to any needed SSC. Inject as per sliding scale: if 150 - 199 = 1 UNIT; 200 - 249 = 3 UNITS; 250 - 299 = 5 UNITS; 300 - 349 = 7 UNITS; 350 - 350 = 8 UNITS - 350 NOTIFY MD, for Type 2 DM Give in addition to scheduled 8 units of insulin AC

14. DME and Supplies:

cane, wheelchair, diabetic supplies, walker

15. Safety Measures:

wheelchair precautions, standard precautions, fall precautions, diabetic precautions, bleeding precautions, ambulates with device, walker precautions, smoke detectors , medication safety, ambulates with assistance, transfer with assist, supervision at all times, sharps precautions, anticoagulant precautions, activity supervision

16. Nutrition:

cardiac diet,

17. Allergies:

augmentin

18.A. Functional Limitations

Endurance, Ambulation, Hearing

18.B. Activities Permitted

Wheelchair, Up As Tolerated, Cane, Exercises Prescribed, Walker

19. Mental & Pyschosocial Status: COGNITION: 1. Requires prompting (cuing, repetition, reminders) only under stressful or unfamiliar conditions., ANXIETY: 1. In new or complex situations only, SOCIAL ISOLATION: 0. Never, BEHAVIORAL ISSUES: 7. None of the above behaviors demonstrated, HISTORY OF DEPRESSION: No

20. Prognosis: fair

22. A Rehabilitation Potential:

SELF-CARE: 2. Needed Some Help - Patient needed partial assistance from another person to complete any activities., MOBILITY: 2. Needed Some Help - Patient needed partial assistance from another person to complete any activities.

22.B.Discharge Plans

SN and PT: family/caregiver will be responsible for managing treatment OT: pat

23. Signature and Date of Verbal SOC Where Applicable:

Electronically Signed by Messick, Charles RN on 09/05/2026

25. Date HHA Received Signed POT

24. Physician's Name and Address

David Leichtling
5450 Knoll North Dr
Columbia, MD 41045
PHONE: 4109644607 FAX: 14107408658 NPI: 1831126572

26. I certify/recertify that this patient is confined to his/her home and needs intermittent skilled nursing care, physical therapy and/or speech therapy or continues to need occupational therapy. The patient is under my care, and I have authorized the services on this plan of care and will periodically review the plan.

F2F date : 08/31/2026

27. Attending Physician's Signature and Date Signed : Date of physician last face-to-face

28. Anyone who misrepresents, falsifies, or conceals essential information required for payment of Federal funds may be subject to fine, imprisonment, or civil penalty under applicable Federal laws.

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6. Patient's Name and Address	7. Provider's Name, Address and Telephone Number
Marvin Best 7437 Oakcrest Lane, Clarksviille, MD 21029- 301-518-1844	HomeCentris Healthcare LLC 10 Crossroads Drive, Suite 102 Owings Mills, MD 21117-8284 410-321-8448 1487113239

Homebound status:

Due to diagnosis of Type 2 diabetes mellitus with hyperglycemia, the patient is experiencing decreased endurance and mobility, increasing the likelihood of falls. To safely leave their home, the patient needs assistance from another person and an assistive mobility device

Clinical Condition Requiring Homecare:

The patient is an 89-year-old male referred to skilled home health services following a recent mechanical fall and subsequent subacute rehabilitation stay. His medical history is significant for chronic kidney disease, insulin-dependent type 2 diabetes mellitus, essential hypertension, chronic atrial fibrillation on Eliquis, hyperlipidemia, congestive heart failure, peripheral arterial disease, and muscle weakness. On 8/11/2026, he was hospitalized after falling at home while attempting to get out of bed and landing on his right hip. MRI demonstrated a right adductor/quadriceps muscle tear with an associated intramuscular hematoma. Orthopedics recommended conservative management with thigh compression and serial hemoglobin/hematocrit monitoring; hemoglobin remained stable, and Eliquis was resumed. He was subsequently discharged to a skilled nursing facility for rehabilitation and is now home with his spouse, who has dementia, with family providing assistance with all ADLs and IADLs. The patient is alert and oriented 3, hard of hearing with bilateral hearing aids, and denies pain at the time of the visit, although he reports right thigh/hip discomfort with end-range movement. He presents with bilateral lower-extremity weakness, greater on the right, impaired dynamic balance, gait instability, occasional dizziness/off-balance sensation, decreased standing tolerance, and difficulty with bed mobility, transfers, toileting, bathing, and safe household ambulation. He currently requires a rolling walker for mobility and is at increased risk for falls. Blood glucose was 260 mg/dL, and the patient uses a Dexcom continuous glucose monitor. He denied shortness of breath, and lung sounds were clear throughout; appetite was fair and last bowel movement was reported the previous day. +1 bilateral lower-extremity edema was noted, with reddened and flaky skin but no open areas. Medication reconciliation and education regarding medication safety, walker use, fall and anticoagulation precautions, activity pacing, and lower-extremity skin care were provided, with the granddaughter assisting with medication management and pharmacy needs. Recent arterial Doppler demonstrated moderate-to-severe arterial occlusive disease in the right lower extremity, and vascular consultation was requested. The patient continues to demonstrate significant deficits in strength, balance, gait, functional mobility, and ADL performance and would benefit from skilled nursing, physical therapy, and occupational therapy to address these impairments, promote safety, improve independence with ADLs and functional mobility, reduce fall risk, and facilitate return toward his prior level of function.
<o:p></o:p> Date of Order<o:p></o:p> 09/05/2026<o:p></o:p> Physician Face-to-Face Date: 08/31/2026<o:p></o:p> Clinical Condition Requiring Home Care per Certifying Physician: SN-disease management PT-eval & treat OT-eval & treat DX: Type 2 diabetes mellitus with hyperglycemia<o:p></o:p> Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home<o:p></o:p>   1 - SOC - SN Notes: <o:p></o:p> PT Eval Notes:<o:p></o:p> OT Eval Notes:<o:p></o:p> Physician: Leichtling, David

SN Careplans

SN frequency Auth npr WK1: 1 (09/05/26-09/05/26),Auth npr WK2: 1 (09/06/26-09/12/26),Auth npr WK3: 2 (09/13/26-09/19/26),Auth npr WK4: 1 (09/20/26-09/26/26),Auth npr WK5: 1 (09/27/26-10/03/26),Auth npr WK6: 1 (10/04/26-10/10/26),Auth npr WK7: 1 (10/11/26-10/17/26),Auth npr WK8: 1 (10/18/26-10/24/26),Auth npr WK9: 1 (10/25/26-10/31/26)

PARAMETERS FOR PHYSICIAN NOTIFICATION: temperature < 95 > 100.5, heart rate < 50 > 110, respiratory rate < 8 > 22, blood pressure systolic < 90 > 169, blood pressure diastolic < 60 > 90, O2 saturation < 88 > 100, pain < 0 > 5

CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance

HOSPITALIZATION RISKS: 1. History of falls (2 or more falls - or any fall with an injury - in the past 12 months), 7. Currently taking 5 or more medications, 8. Currently reports exhaustion, 9. Other risk(s) not listed in 1- 8

SN Goals

PATIENT-STATED GOAL: TO BE ABLE TO GET AROUND BETTER WITH A DIFFERENT WALKER

GOALS
patient/caregiver recalls
* how to keep home safe for hearing-impaired including installing special fire-detector/CO2 alarms
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* strategies to minimize fatigue and exhaustion including work simplification
* energy conservation
* lifestyle changes
* diet

Signature of Physician:

Date

Optional Name/Signature of Nurse/Therapist:

Electronically Signed by Messick, Charles RN

Date

09/05/2026

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STANDING ORDERS: infection control: hygiene, proper hand washing; advance directive: plan if patient is unable to make healthcare decisions ; fall precautions: wear sensible shoes, remove home hazards, living space adequately lit, assistive devices prn; emergency preparedness: plan for prn evacuation, resumption of home health visits; Assess the patient's incision on post op day 7 and the nurse or physical therapist will remove aquacel dressing leaving OTA; if incision is draining educate pt/pcg on cleaning with normal saline and covering with dry gauze daily and as needed.
Assess/Instruct Pt/Pcg: Ice to ____ x 20 minutes each hour while awake. If cold machine ordered apply 20 minutes on and 20 minutes off for 3-4 times a day.
Assess/Instruct all body systems/vital signs/complications, Blood Pressure; systolic is greater than 169 mm Hg or less than 90 mm Hg; diastolic is greater than 100 mm Hg or less than 55 mm Hg, Clinician to assess comorbidities and report changes in condition to the patient's physician, Pain Rating is greater than 6 on 0-10 scale, Pulse is greater than 110 or less than 50, Respirations are greater than 22 or less than 8, SPO2: is less than 90 % at rest /with exertion, Temperature is greater than 100.5 F or less than 95.0 F, Pain Rating is greater than 6 on 0-10 scale
Implement Fall Prevention Program, Instruct and educate the patient/PCG on wearing compression stockings for the next 4 weeks per discharge instructions.
Instruct the pt/PCG on using the incentive spirometer 10 times every 2 hour while awake.
Provide education content at patient's level of health literacy.
Assess/Instruct Pt/Pcg: Safety measures to prevent injury.
Assess: Musculoskeletal status.
Teach Pt/Pcg to maintain appropriate wt bearing status as ordered by MD, total joint replacement precautions as applicable, Safe stair climbing skills, Safe, effective use of adaptive/assist device
Assess/Instruct Pt/Pcg: Pain management measures; assess pain level, pain medication, rest, body alignment, ROM, meditation, massage.
Pt/Pcg educated in pain management techniques including positioning and relaxation techniques
Instruct Pt/Pcg: Medication actions, uses, frequency, dose, side effects, interactions of all new/change meds, Provide medication education,.
Assess/Instruct Pt/Pcg: Safety measures to prevent injury, Therapeutic Exercise, Transfer Training
Monitor surgical wound for s/s of infection, educate on s/s of concern and infection prevention to promote wound healing.

; Skin Preservation: Measures to prevent skin breakdown; pressure relief, incontinence care, nutrition, hydration ; Pain: Pain management measures; pain medication, rest, body alignment, ROM, meditation, massage ; Medications: Medication actions, uses, frequency, dose, interactions of all new/change meds
Advance Directive:Living Will

09/06/2026 Problems : M1033 - Exhaustion
M1400 - Dyspnea
M2020 - Oral Med Management
dependent edema
balance deficit
muscle weakness
limited range of motion
swelling of affected area
limited strength
limited endurance
discolored patches of skin
rough/scaly/cracked skin
abnormal BS < 70/140 > mg/dL
B0200 - Hearing Deficit
meal preparation

PROCEDURES: cough/deep breathing exercises, glucose testing via monitor: PT USES DEXACOM FOR AC/HS MONITORING

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage respiratory condition including diet changes and regular exercise strategies to control shortness of breath home remedies to keep lungs healthy, related medication(s) purpose, schedule, * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule, * how to keep home safe for hearing-impaired including installing special fire-detector/CO2 alarms, related medication(s) purpose, schedule, patient self-administers medications as prescribed, related medication(s) purpose, schedule, meal preparation is available to patient for all meals

* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* lifestyle modifications to manage respiratory condition including
* diet changes and regular exercise
* strategies to control shortness of breath
* home remedies to keep lungs healthy
* recalls related medication(s) purpose, schedule

patient self-administers medications as prescribed
* recalls related medication(s) purpose, schedule

meal preparation is available to patient for all meals

PT Careplans

PT frequency Auth npr WK2: 1 (09/06/26-09/12/26),Auth npr WK3: 1 (09/13/26-09/19/26),Auth npr WK4: 1 (09/20/26-09/26/26),Auth npr WK5: 1 (09/27/26-10/03/26)

09/11/2026 Problems : GG0170D1 - Sit to Stand
GG0170F1 - Toilet Transfer
GG0170G1 - Car Transfer
GG0170I1 - Walk 10 Feet
GG0170J1 - Walk 50 ft with 2 Turns
GG0170K1 - Walk 150 Feet
GG0170L1 - Walk 10 ft on Uneven Surface
GG0170M1 - 1 - Step (curb)
GG0170N1 - 4 Steps
GG0170O1 - 12 Steps

PT Goals

PATIENT-STATED GOAL: Not to go back to hospital

GOALS
Chair to Bed to Chair - 06. Independent

Toilet Transfer - 06. Independent

Sit to Stand - 06. Independent

Car Transfer - 06. Independent

Walk 10 Feet - 06. Independent

Walk 50 ft with 2 Turns - 06. Independent

Signature of Physician:

Date

Optional Name/Signature of Nurse/Therapist:
Electronically Signed by Messick, Charles RN

Date
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GG0170P1 - Picking Up Object
GG0170E1 - Chair to Bed to Chair

PROCEDURES: Medication Review-: Patient verbalized understanding of current prescriptions, dosages, and schedule. No reported issues with adherence, side effects, or confusion at this time., home exercise program: Ankle pumps, quad sets, glute sets, heel slides, partial squats, and seated/standing knee flexion and extension within tolerance. 10-15 reps ea. 1-2 set per day. Emphasis on improving right knee ROM, reducing stiffness, and promoting quadriceps activation. Patient instructed on proper technique, pacing, use of ice after exercises, and safe frequency throughout the day. Patient verbalized understanding and demonstrated good carryover., gait training/stair training, transfers training

TEACH PATIENT/CAREGIVER: Sit to Stand - 06. Independent, Chair to Bed to Chair - 06. Independent, Toilet Transfer - 06. Independent, Car Transfer - 06. Independent, Walk 10 Feet - 06. Independent, Walk 50 ft with 2 Turns - 06. Independent, Walk 150 Feet - 06. Independent, Walk 10 ft on Uneven Surface - 06. Independent, 1 - Step (curb) - 06. Independent, 4 Steps - 06. Independent, 12 Steps - 06. Independent, Picking Up Object - 06. Independent

Walk 150 Feet - 06. Independent

Walk 10 ft on Uneven Surface - 06. Independent

1 - Step (curb) - 06. Independent

4 Steps - 06. Independent

12 Steps - 06. Independent

Picking Up Object - 06. Independent

OT Careplans

OT frequency Auth npr WK2: 1 (09/06/26-09/12/26),Auth npr WK3: 1 (09/13/26-09/19/26),Auth npr WK4: 1 (09/20/26-09/26/26),Auth npr WK5: 1 (09/27/26-10/03/26),Auth npr WK6: 1 (10/04/26-10/10/26),Auth npr WK7: 1 (10/11/26-10/17/26)

09/10/2026 Problems : Pain Effect on Sleep
Pain Interference with ADLs
M1400 - Dyspnea
GG0130B1 - Oral Hygiene
GG0130C1 - Toileting Hygiene
GG0130E1 - Shower/Bathe Self
GG0130G1 - Lower Body Dressing
GG0130H1 - Don/Doff Footwear
GG0130A1 - Eating
GG0130F1 - Upper Body Dressing

PROCEDURES: cough/deep breathing exercises, incentive spirometer, home exercise program: deep breaths, functional ambulation, ADLs, UE strengthening, equipment training, work simplification/energy conservation

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage respiratory condition including diet changes and regular exercise strategies to control shortness of breath home remedies to keep lungs healthy, related medication(s) purpose, schedule, * how to maintain a diary to monitor effective and non-effective pain relief including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain teach relaxation skills and diversional activities, related medication(s) purpose, schedule, Oral Hygiene - 06. Independent, Toileting Hygiene - 06. Independent, Shower/Bathe Self - 04. Supervision or touching assistance, Lower Body Dressing - 06. Independent, Don/Doff Footwear - 06. Independent, Eating - 06. Independent, Upper Body Dressing - 06. Independent

OT Goals

PATIENT-STATED GOAL: Pt return to PLOF;return to PLOF

GOALS
patient/caregiver recalls
* lifestyle modifications to manage respiratory condition including
* diet changes and regular exercise
* strategies to control shortness of breath
* home remedies to keep lungs healthy
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to maintain a diary to monitor effective and non-effective pain relief including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain
* teach relaxation skills and diversional activities
* recalls related medication(s) purpose, schedule

Oral Hygiene - 06. Independent

Toileting Hygiene - 06. Independent

Shower/Bathe Self - 04. Supervision or touching assistance

Lower Body Dressing - 06. Independent

Don/Doff Footwear - 06. Independent

Eating - 06. Independent

Upper Body Dressing - 06. Independent

Signature of Physician:

Date

Optional Name/Signature of Nurse/Therapist:
Electronically Signed by Messick, Charles RN

Date
09/05/2026