

Rehab: Bridging the Gap Between Hospital and Home

Here is the scenario. You or a loved one is in the hospital after a fall, pneumonia or even an elective surgery. A discharge planner, care coordinator, or other medical professional walks into the hospital room and confirms your worst fear, that you shouldn't go directly home but to "rehab" instead. A whole host of questions, worries and fears well up in you until you are overwhelmed.

As a physical therapist with over 12 years of experience, I have seen this scenario play out thousands of times and have addressed my clients' and their families' questions countless times. Here are the top 5 questions asked and my answers:

1. Why do I need a "rehab" instead of going home?

People need rehabilitation stays when they need daily services such as physical therapy, occupational therapy, and speech therapy or when they need special nursing services such as intravenous (IV) drugs or respiratory care. Generally, these services or combination of services are needed for at least 5 days a week, may be needed several times a day, and the client does not have the ability to transport themselves or be transported back and forth from home to the hospital or clinic.

There are two types of rehabilitation units. The first is a SNF or skilled nursing facility. These units can use a variety of terms to describe themselves. Skilled nursing units, subacute units, swing beds, and transitional care units are just a few of the names used. However, they all generally fall under the same federal regulations. They may be freestanding, have nursing homes attached, or be located in acute hospitals. Area SNF's include Weiser Care Center, Presbyterian Community Care Center, and Sunbridge Care Center

The second type of rehabilitation unit is a rehabilitation hospital. Rehabilitation hospitals (Idaho Elks is an example) have rehabilitation services and are full hospitals with radiology departments, respiratory services etc. They follow a separate set of regulations than SNF's. (more on this later)

2. Will my insurance pay for this?

Medicare will pay for SNF level care after you have been admitted for three consecutive nights in a hospital, a physician will certify that you need SNF care, and you require daily skilled services. The first 20 days of your stay are paid 100% (after deductibles) and the next 80 days are paid at 80% for a total of 100 days. Of course, you need to continue to need skilled services and when you do not require skilled services Medicare payment stops. Since rehabilitation hospitals are hospitals, they do not require a three day stay. However, they have other requirements. For example, the patient must need the services of a rehab hospital and must be able to tolerate three hours of therapy per day.

If you have insurance other than traditional Medicare then you need to check their requirements. Many insurances require pre-authorization of inpatient rehabilitation or require that you go to "in network" rehab facilities.

If you have a Medicare replacement insurance, you must be a little more careful. I have had patients who have asked if their insurance paid for rehabilitation and were told that “it pays just like Medicare”. What they found out later however, is that the insurance did pay for the same things as Medicare (therapy, nursing etc) BUT only at facilities that they had a contract with and that their stay had to be pre-authorized.

3. What is the difference between a rehab hospital and SNF?

The quality of therapy services or nursing services really depends on the abilities of the individual practitioner providing the service. The requirements for therapists and nurses who practice in SNF’s are no different than the requirements for practicing in rehabilitation hospitals.

Skilled nursing facilities have the flexibility to provide the amount of therapy or nursing service that a person can tolerate. Since the more services they provide, the more they get paid, skilled nursing facilities try to give clients as much therapy as the client can tolerate. However, if a patient doesn’t feel well for a couple of days, the therapy can be reduced without fear that the patient won’t continue to qualify for services. Rehab hospitals generally require patients to consistently tolerate three hours of therapy or the rehabilitation hospital runs the risk of being denied payment.

Since the therapy and nursing services are the same, the real difference between a rehab hospital and a skilled nursing facility is the hospital services that a rehabilitation hospital can provide. The rehabilitation hospital is the best place for patients who have both severe medical needs (such as ventilator care, or management for seizures) AND severe rehabilitation needs.

4. How do I choose the best place for me?

The best advice I have for people is to go to the place that will provide you the best rehabilitation or nursing services. That’s the reason that you are going to a rehab in the first place. Once you have found the places that have the best therapy and/or nursing, then make your decision based on the quality of the room, perks (like satellite TV) etc.

Here are some suggestions to judge the quality of the rehabilitation:

Ask to talk with the therapists that will be seeing you or your loved one. This can be a good way of finding out the care that is really going on in a building. If there are no therapists in the building on a weekday at 2 pm a red flag should go up.

How much therapy would they generally plan to do with a patient like yourself or loved one? One hour to two hours per day **per therapy** is what I would expect for most patients.

Do they provide therapy on weekends? If you are admitted to the facility on a Friday (as most people are discharged from the hospital at the end of the week) will you be seen in therapy on Saturday?

Will a licensed therapist provide all the therapy or will therapy be provided by an aide?

How do they make the transition from the rehabilitation unit to home as easy as possible? Do they provide a home evaluation and equipment recommendations prior to discharge?

5. How long do I have to stay at the rehab?

You have the right to leave a rehabilitation facility any time you want. Studies show that the more intensive therapy you have, the shorter your recovery time and the lower the likelihood of complications. My best advice is to stay in rehab as long as you qualify for it.

About the Author:

Glenn Dodge has been a physical therapist for over 12 years. He received his Doctorate in Physical Therapy from Rocky Mountain University in Provo, Utah. He has managed rehabilitation facilities in Idaho, Oregon and Utah. He is now the owner of Ontario Physical Therapy in Ontario, Or. This article and others can be seen on his website OntarioPT.com.