


Navigating Medical Policy Collections

To easily navigate within each file review these steps and the sample at right:

- 1 Each PDF file begins with an overview of all the policies within that category by name, policy number, and date of last revision.
- 2 Policy names and numbers are linked to the page where each policy begins.
- 3 On each subsequent page, you will see a heading at the top of the page, “[policy type] Policies, Continued”; click on this header on any page to automatically return to the overview on the first page where you can select a different policy to review.



SelectHealth Medical Policies

Administrative Policies

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ACUTE INPATIENT REHABILITATION

Policy # 443

Implementation Date: 6/28/10

Review Dates: 9/15/11, 7/18/13, 6/11/15, 6/16/16, 6/15/17, 6/21/18, 11/15/18, 12/16/19

Revision Dates: 11/25/13, 12/20/18

Disclaimer

1. Policies are subject to change without notice.
2. Policies outline coverage determinations for SelectHealth Commercial, SelectHealth Advantage (Medicare/CMS), and SelectHealth Community Care (Medicaid) plans. Refer to the “Policy” section for more information.

Description

Inpatient rehabilitation facilities (IRF) and units have many characteristics that differentiate them from other levels of care, such as acute hospitals, skilled nursing facilities (SNFs), long-term acute care (LTAC) facilities and home care programs. These facilities are licensed as hospitals or rehabilitation hospitals, depending on state law, and are subject to state health department rules and regulations. They provide medical, rehabilitation nursing, rehabilitation therapies and many other services on an intensive basis.

To qualify as rehabilitation hospitals and units the facilities must provide 24-hour, 7-day-a-week availability of physicians and nurses with specialized training or experience in medical rehabilitation. These include physiatrists, or other physicians with extensive experience in inpatient rehabilitation care, and nurses with training and certification in rehabilitation nursing (CRRN). Therapists include registered or licensed practitioners in physical therapy, occupational therapy, speech/language pathology, therapeutic recreation, and respiratory therapy. Psychologists, social workers, vocational counselors, prosthetists and orthotists, and dieticians or nutritional counselors must also be available. The number of staff members has to be sufficient to provide each patient with at least 3 hours of therapy usually 5 of 7 days a week and meet the rehabilitation medicine and rehabilitation nursing needs of the patients.

Medical, surgical, and mental health specialists must be readily available to provide consultations and to obtain access to hospital services necessary for the diagnosis and treatment of the co-morbidities that frequently complicate the course of a patient’s stay. Rehabilitation physicians, nurses, therapists and other professional staff members communicate and coordinate care as a group at least weekly to discuss the patient’s progress and establish goals and time frames, conduct discharge planning, and function daily as an onsite interdisciplinary team of rehabilitation specialists.

Physicians are required to conduct face-to-face visits with the patient at least 3 days per week throughout the patient’s stay in the IRF to assess the patient both medically and functionally, as well as to modify the course of treatment as needed to maximize the patient’s capacity to benefit from the rehabilitation process.

Commercial Plan Policy (Preauthorization Required)

SelectHealth covers acute inpatient rehabilitation for patients meeting specific criteria.

(Included Conditions are followed by Criteria for both Adult and Pediatric Populations)

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