

Inpatient Rehab Unit Clarification & Update:

There is a difference between a **SNF** and an **Acute Rehab Center**.

For those of you who have referred to the Inpatient Rehab Unit (UNIT) previously or will in the future...just a note about the CMS Rules and Regulation that The Unit is bound to adhere to as Conditions of Participation for Medicare.

Our patients require more therapy & more acute medical care than a patient who requires skilled care.

These CMS rules require that 60% of our patients come from 12 specific diagnoses (listed below) and 40% of our patient population can have a wide array of disabling conditions. We track this number constantly, so please, feel free to refer any patients and we will let you know what our monthly statistic is at any particular time and if the patient is appropriate.

Not unlike an Acute care stay, co morbid conditions that are being treated will need to be documented so our coding/billing can be accurate. Examples may be neuropathy, CHF, previously diagnosed CVA or Parkinson's etc...Please make sure these conditions are noted when you make your referral.

Every patient who is admitted to the unit must meet the seven criteria listed below. We also must consider the 12 specific diagnoses.

Please know that our rehab unit has tremendous outcomes. We are among the top in the nation when it comes to not only improving our patients abilities but to also getting them home (80%). The information below is for your consideration.

Our goal is to be able to meet your & your patients' needs. Let us know what we can do to assist. We are glad to discuss any patient any time. Our number is 325-947-6980.

The 12 diagnosis that make up the 60% are:

1. Stroke
2. Spinal cord injury
3. Congenital deformity
4. Amputation
5. Major multiple trauma, fractures in two or more placed
6. Hip Fractures
7. Brain injury
8. Newly diagnosed Neurological disorders, like MS, Parkinson's, Guillen Barre
9. Burns
10. Active-Polyarticular RA, Psoriatic arthritis, and Seronegative arthropathies.
11. Systemic vasculidities with joint inflammation that decreases functional ability.

12. Severe or advanced osteoarthritis. Must involve two or more joints, with joint deformity and substantial loss of ROM, atrophy of muscle and significant functional impairment.
13. Knee or hip replacement if at least one of three specific conditions are met:
 - a. Patient had bilateral hip or knee replacements.
 - b. Patient is morbidly obese with BMI of 50 on admission.
 - c. Patient is 85 or older.

*Caveat for 10, 11, and 12 above, must include at least 3 weeks minimum duration with failure of outpatient therapy regime.

Seven criteria for admission to rehab:

1. Patient requires close medical management and monitoring.
2. Patient requires 24 hour a day Rehabilitation Nursing.
3. Need for care from Multiple Disciplines, PT, OT and Speech.
4. Patient can tolerate, or requires intense therapy (3 hours per day for a minimum of 5 or 7 days per week)
5. Patient has a coordinated interdisciplinary plan of care.
6. Patient has realistic goals (that is their goal is not to go to a nursing home for example).
7. Patient can make significant progress, realistically, towards goal achievement.