

Discharge Planning Frequently Asked Questions

How are my post-hospital needs determined?

Your post-hospital needs are determined by the type of surgery you have and your progress in physical therapy after surgery.

Will my insurance company pay for my post-hospital care?

It is recommended that you contact your insurance company to confirm benefits prior to surgery. **Having the benefit does not guarantee insurance approval for services. Approval is determined by the medical director of your insurance company after your surgery.**

Will I be able to go to inpatient rehab after surgery?

Specific criteria must be met in order for inpatient rehab to be approved by your insurance. Typically, single joint replacements and spinal surgeries are not approved/accepted for Acute Rehab, however, some insurances may approve Subacute Rehab.

What is the difference between Acute Rehab and Subacute Rehab?

Acute Rehab provides 2—3 hours of intensive physical therapy a day and is provided in an acute rehab unit of a general hospital or rehab hospital. Subacute Rehab provides 1—1.5 hours of therapy per day and is generally provided in a rehab unit of a skilled nursing facility.

What kind of services can I receive at home?

Home care services may include Physical Therapy, RN visits, Lab Work and/or Home Health Aide, all of which must be approved by your insurance company. Please note that the Physical Therapist may be your first contact at home.

How many hours of Home Health Aide services can I get per day?

Most insurance companies do not cover Home Health Aide services, and you may have to pay privately for them. Your case manager will assist you with these arrangements.

How will I get the equipment I need when I go home?

Most equipment that you may need upon discharge can be arranged through the hospital. Your case manager will assist with the criteria to determine if your insurance will authorize and cover any equipment.

What kind of transportation will I need when I am ready to leave the hospital?

Your case manager will assist you in arranging the safest, most appropriate method of transportation when you leave the hospital. Insurance does not necessarily cover transportation by either ambulance or ambulette. Your case manager will discuss this with you and advise you of any cost to you in advance.

What is the hospital discharge time?

It is 11AM; please arrange your transportation needs accordingly.