

North Carolina
State Health Plan
for Teachers and State Employees and
NC Health Choice for Children

www.shpnc.org

Sub-Acute Medical & Rehabilitation Facilities

Policy Number: IN0650

Active policy, not scheduled for routine review.

Definition:

A facility providing a cost-effective alternative to an acute hospital or rehabilitative setting to include the following;

1. Physician and skilled nursing services are available 24 hours a day
2. Rehabilitation therapies such as physical, occupational, and speech are available at least 5 days a week,
3. Laboratory, pharmacy, and radiology services are available 24 hours a day, and
4. The facility must be able to provide services available in the acute care setting such as oxygen, suction, and intravenous therapy.

Coverage:

1. Benefit coverage is available at a negotiable per diem rate at the discretion of the Claims Processor with the approval of the Executive Administrator.
2. The facility must have a negotiated contract agreement with the Claims Processor.
3. If certification is not obtained, coverage will be provided at the outpatient, ancillary rate.

Approval Procedures:

1. Certification is required every 7 days, or less frequently as determined by the Claims Processor.
2. A referral and treatment plan signed and dated by the physician must be submitted to the Medical Review Department.
3. Documentation must include:
 - a. Member ID number
 - b. Patients mailing address
 - c. Medical diagnosis, including the patient's physical and mental status
 - d. Specific statements of long and short-term goals and a reasonable estimate of when the goals will be reached
 - e. Specific rehabilitation therapies to be used in treatment, including frequency and duration
 - f. Specific skilled services required on a continuing, daily basis
4. The provider will be notified of approval requests, and the member and provider will be notified if request is denied.

Limitations and Exclusions:

1. The patient must be in an acute hospital or rehabilitation facility prior to admission.
2. The patient must appear to have rehabilitative potential.

Authority:

G.S. 135-42 (b)

G.S. 108A-70.21(b)

G.S. 135-40.6(2)(b) G.S.135-39.5(18) (statute effective through 06/30/2008 for Predecessor Plan)

G.S. 135-40.1(1a) G.S.135-40.6(2)(f) (statute effective through 06/30/2008 for Predecessor Plan)

G.S. 135-40.7(16) (statute effective through 06/30/2008 for Predecessor Plan)

Complete Review of Policy:

January 1995

March 2005

Revised:

March 2002

December 2008