

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET

P.O. BOX 942732

SACRAMENTO, CA 94234-7320

(916) 654-0499

(916) 654-0476 TDD/Relay



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Index: Rehabilitation

To : All County California Children Services (CCS) Programs and State
CCS Regional Offices

Subject: Rehabilitation Facilities Admission Criteria

Introduction

There have been no clearly defined criteria on when admission to a rehabilitation facility is a CCS benefit. There is a need to assist CCS staff in determining which patients who are referred for acute inpatient rehabilitation are eligible for services.

Policy

A. Eligibility Criteria

Acute inpatient rehabilitation care is a benefit of CCS when provided in a CCS-approved rehabilitation center or unit for patients who meet all of the following criteria (1-5):

1. There is presence of a physical disability that has resulted from a CCS-eligible condition. Examples of such disabilities are: atrophy, ataxia, multiple or major joint derangement, amputation, contractures.
2. There is a demonstrated need for an interdisciplinary health care team.
3. The intensity of services needed cannot reasonably be arranged on an outpatient basis. Minimum intensity for inpatient rehabilitation is defined as unduplicated sessions among the therapy types of three or more hours per day, six to seven days per week.
4. These services are to be directed towards restoring one or more of the following functions:
 - a. Self-care skills: drinking, feeding, dressing, hygiene, grooming, bathing, perineal care and/or use of an upper or lower extremity prosthesis or orthosis.

OCT 30 1992


- b. Mobility skills: transfers to and from chair, toilet, tub or shower; upright ambulation; and/or use of wheelchair.
 - c. Bladder control and management: needing assistance in urination and in developing and/or maintaining a bladder program due to lack of bladder control.
 - d. Bowel control and management: needing assistance in excretion and in developing and/or maintaining a bowel program due to lack of bowel control.
 - e. Safety: needing instruction and training in the proper and safe management of self care and/or avoidance of complications such as contractures, decubiti or urinary tract infections resulting from the physical deficit(s).
5. The patient is able to actively participate in the treatment program.

B. Implementation Procedure

1. The initial request for rehabilitation care must be accompanied by the following:
 - a. Sufficient medical information to determine whether the criteria for inpatient care is met.
 - b. A preliminary treatment plan, including rehabilitation goals, a detailed daily treatment schedule for a full week, and an estimate of the length of stay.
2. The medical consultant shall determine whether criteria for admission are met.
3. If the patient requires evaluation, the initial authorization shall not exceed 14 days.
4. Requests for extensions shall include the following:
 - a. Team evaluation report
 - b. Objective measure of progress in each problem area being treated.
 - c. Evidence of the patient's continued ability to participate in the treatment.
 - d. Documented need for the intensive level of care, as defined in A, 1-5 above.

N.L. 29-1092
Page 3
October 7, 1992

5. Authorizations for each extensions shall not exceed 30 days.

Maridee A. Gregory 
Maridee A. Gregory, M.D., Chief
Children's Medical Services Branch

