

Quick Reference: Rehabilitation Services



The DC Department of Health Care Finance (DHCF) is proud to offer District residents comprehensive skilled rehabilitative services (also sometimes called “rehab services”) under their Medicaid coverage.

What services are offered?

- **Speech Therapy:** The assessment and treatment of communication problems and speech disorders, and difficulty swallowing.
- **Occupational Therapy:** Care that focuses on helping you perform daily tasks more easily.
- **Physical Therapy:** Rehabilitative care that focuses on improving movement, mobility, and function.

How does a person get these services?

These therapy services are ordered by a physician when it is discovered that a person has a need for them, such as having an onset of pain, a change in mobility, a change in ability to perform daily tasks, or a change in comprehension, or difficulty swallowing. If not addressed, these health problems can lead to further health issues or falls.

Where can a person get these services?

Rehab services are generally offered at various levels of care, in a variety of environments, to promote independence and a return to prior level of function after traumatic injuries and illnesses.

- **Hospitals (inpatient stay)** – Short-term therapy by one or all disciplines in the hospital to plan a safe discharge home or to another setting.
- **Subacute Rehabilitation** – Inpatient therapy received when a person is not able to safely return home after being hospitalized, but who needs intense specialized services by multiple disciplines. Individuals in subacute therapy generally tolerate two hours or less of therapy five to seven days a week.
- **Acute Comprehensive Rehabilitation Hospital/Center** – Inpatient therapy received when a person is not able to safely return home but can withstand intense specialized services from multiple disciplines for three or more hours of therapy five to seven days a week.
- **Long Term Acute Hospital** – Inpatient therapy received by an individual who needs an extensive or long hospital stay. This may be because of severe illness or injury, including ventilator and coma care support.
- **Home Care** – therapy in the home after being discharged from an inpatient facility and deemed homebound. Can also be ordered without a hospital admission.
- **Outpatient** – rehabilitation received outside of the home, with the person being able to return home to a relatively safe environment.

Who is eligible for rehab services?

Anyone enrolled in a Medicaid plan who demonstrates a change or deficit in their functional mobility, daily activities, or comprehension after an illness, traumatic accident, or history of chronic disease and pain may benefit from rehab services.

For more information about receiving rehabilitation services, you can contact a health care provider to learn more. If you have a physician you see regularly, contact your doctor. If you are enrolled in the Dual Choice program, PACE, or the EPD Waiver program, contact your case manager to learn about how you can get rehab services. You may also call the Department of Health Care Finance (DHCF) Long Term Care Administration at 202-442-9533 for more information.