



### **Covered Benefit: Rehabilitation Therapy Services**

CMP Published: Yes <sup>1</sup> No

CMP Links: [Cardiac Rehab](#)

[Outpatient Rehab Adults](#)

[Pulmonary Rehab](#)

CPG Published<sup>2</sup>: Yes  No

CPG Link: [Chronic Obstructive Pulmonary Disease](#)

Definition: Rehabilitation services include physical, occupational, and speech language therapies rendered in an inpatient or outpatient setting, and cardiac and pulmonary rehabilitation.

Benefit Packages: RItE Care, Substitute Care, Children with Special Health Care Needs, and Rhody Health Partners.

### Coverage Limitations:

- Prior authorization is required for some rehabilitative and therapeutic services.
- Cardiac rehabilitation is limited to up to 12 weeks following hospital discharge, and up to 26 weeks for risk reduction, illness adjustment and therapeutic services. An extension beyond 26 weeks requires additional authorization.

### Exclusions:

Please refer to physical, occupational and speech language therapy CMP for a list of exclusions. Group occupational and speech language therapy is not covered.

Extended Family Planning (EFP) members are not eligible for rehabilitation therapy services, EFP is not a comprehensive benefit package.

Vocational rehab services and therapeutic services that are rendered through the schools are out of plan services.

### Coverage Includes:

- Inpatient Rehabilitation
- Occupational Therapy
- Physical Therapy
- Speech Therapy
- Cardiac Rehabilitation
- Pulmonary Rehabilitation (outpatient)
- Pulmonary Rehab Home

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<sup>1</sup> Clinical Medical Policies for Cardiac Rehabilitation, Physical and Occupational Therapy and Speech Therapy

<sup>2</sup> Clinical Practice Guideline (CPG) for Chronic Obstructive Pulmonary Disease (COPD)



Episodes of care can occur in the following settings which are included in the detailed benefit service category criteria:

Office (POS 11)

Home (POS 12)

Inpatient (POS 21)

Outpatient Hospital (POS 22)

Comprehensive Inpatient Rehabilitation Facility (POS 61)

Comprehensive Outpatient Rehabilitation Facility (POS 62)

Notes:

For physical rehabilitation services delivered in the home, please refer to the Home Health Care benefit coverage summary.

For behavioral health or substance abuse rehabilitation services please refer to Neighborhood's benefit portal or our behavioral health partner.

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