TALBOT COUNTY Commission on Aging

Understanding Your Care Options

Understanding Your Care Options: Nursing Home Care, Subacute Rehab, and Acute Rehabilitation

Choosing the right type of care after an illness, injury, surgery, or hospital stay can feel overwhelming. This guide explains the differences between long-term nursing home care, subacute rehabilitation, and acute inpatient rehabilitation in simple terms to help patients and families make informed decisions.

Quick Comparison Guide

Type of Care	Main Purpose	Typical Length of Stay	Therapy Intensity	Common Payment Sources
Long-Term Nursing Home Care	Ongoing daily care and assistance	Months to years	Limited or maintenance therapy	Medicaid, private pay, long-term care insurance
Subacute Rehabilitation	Short-term recovery after illness, injury, or surgery	Days to several weeks	Moderate therapy	Medicare, Medicare Advantage, private insurance
Acute Inpatient Rehabilitation	Intensive rehabilitation to regain independence	Usually 1–3 weeks	Intensive therapy (typically 3 hours/day)	Medicare, Medicare Advantage, private insurance

Long-Term Nursing Home Care

What Is Long-Term Nursing Home Care?

Long-term nursing home care is designed for individuals who need ongoing help with daily activities and medical care over an extended period of time.

This level of care is appropriate for people who may no longer be able to live safely at home due to chronic illness, memory problems, physical limitations, or significant medical needs.

Services Typically Provided

- Assistance with bathing, dressing, eating, and toileting
- Medication management
- Nursing care and monitoring
- Meals and housekeeping
- Social activities and recreation
- Memory care support in some facilities
- Limited therapy services if needed

Who May Need Long-Term Care?

A person may benefit from long-term nursing home care if they:

- Need 24-hour supervision or assistance
- Have advanced dementia or memory impairment
- Have significant physical limitations
- Cannot safely live alone
- Require ongoing nursing care
- Have caregivers who are unable to meet their care needs at home

How Is It Paid For?

Medicaid: Medicaid is the primary payer for long-term nursing home care for individuals who qualify financially.

Private Pay: Many people pay out of pocket until they qualify for Medicaid.

Long-Term Care Insurance: Some long-term care insurance policies may help cover costs.

Medicare: Medicare does NOT usually pay for permanent long-term nursing home care.

Subacute Rehabilitation

What Is Subacute Rehabilitation?

Subacute rehabilitation provides short-term skilled nursing and therapy services after a hospitalization, illness, injury, or surgery.

Subacute rehab is commonly provided in a skilled nursing facility or nursing home setting. The goal is to help patients recover enough to safely return home or move to a lower level of care.

Services Typically Provided

- Physical therapy
- Occupational therapy
- Speech therapy
- Skilled nursing care
- Medication management
- Wound care
- IV medications or medical monitoring

Therapy Expectations

Patients usually participate in therapy 1–2 hours per day depending on their medical condition and endurance.

Who May Benefit from Subacute Rehab?

Subacute rehab may be appropriate for someone who:

- Is not strong enough for intensive rehabilitation
- Needs continued nursing care while recovering
- Is recovering from surgery, infection, illness, stroke, or fracture
- Needs therapy before safely returning home
- Cannot tolerate several hours of therapy daily

Common Reasons for Admission

- Joint replacement surgery
- Pneumonia or severe illness
- Falls and fractures
- General weakness after hospitalization
- Stroke recovery
- Cardiac conditions

How Is It Paid For?

Medicare: Traditional Medicare may cover short-term skilled nursing and rehabilitation services if certain requirements are met.

Coverage usually requires:

- A qualifying hospital stay
- A physician order for skilled care
- Ongoing therapy or nursing needs

Medicare Advantage Plans: Coverage varies by plan and often requires prior authorization.

Private Insurance: Commercial insurance plans may provide coverage depending on benefits.

Medicaid: Medicaid may help cover costs for eligible individuals.

Important to Know

Insurance coverage for subacute rehab is based on medical necessity and progress toward recovery goals.

Acute Inpatient Rehabilitation

What Is Acute Inpatient Rehabilitation?

Acute inpatient rehabilitation, often called “acute rehab” or “inpatient rehab,” is an intensive rehabilitation program for people recovering from serious illness, injury, or disability.

Patients receive coordinated medical care and intensive therapy from a team of rehabilitation specialists.

Therapy Expectations

Patients are expected to participate in:

- Approximately 3 hours of therapy per day
- At least 5 days per week

Therapy may include:

- Physical therapy
- Occupational therapy
- Speech therapy

Who May Benefit from Acute Rehab?

Acute rehab may be appropriate for individuals who:

- Can tolerate intensive daily therapy

- Have rehabilitation goals focused on returning home and improving independence
- Need close medical supervision during rehabilitation
- Have experienced a stroke, spinal cord injury, brain injury, major trauma, amputation, or neurological condition

Common Reasons for Admission

- Stroke
- Brain injury
- Spinal cord injury
- Major orthopedic injuries
- Amputation
- Neurological disorders
- Complex medical recovery with significant functional decline

How Is It Paid For?

Medicare: Medicare may cover inpatient rehabilitation if medical criteria are met.

Medicare Advantage Plans: Coverage often requires prior authorization and approval.

Private Insurance: Coverage depends on the specific insurance plan and medical necessity.

Important to Know

Patients must meet specific medical and therapy criteria to qualify for acute inpatient rehabilitation.

How Do You Decide Which Option Is Right?

The right level of care depends on several factors.

Questions to Consider

How much medical care is needed?

- Does the person need daily nursing care?
- Are there complex medical needs or treatments?

How much therapy can the person tolerate?

- Can they participate in intensive therapy for several hours each day?
- Would a slower-paced rehabilitation program be more appropriate?

What are the goals?

- Returning home independently?
- Improving strength and mobility?
- Long-term support and safety?

Is it safe to return home?

- Is there family support available?
- Can the home environment safely meet the person's needs?

What does insurance cover?

- Different insurance plans have different requirements and coverage rules.
- Prior authorization may be needed. Medicare Advantage plans do not always cover acute rehab.

Who Helps Make These Decisions?

Healthcare professionals can help patients and families determine the safest and most appropriate level of care.

This may include:

- Hospital case managers or discharge planners
- Physicians
- Physical, occupational, and speech therapists
- Social workers
- Insurance representatives

Families are encouraged to ask questions and participate in care planning decisions.

Questions Families May Want to Ask

- What level of care is being recommended and why?
- What are the rehabilitation goals?
- How much therapy will be provided?
- What will insurance cover?
- How long is the expected stay?
- What happens if more care is needed after discharge?
- What support will be needed at home?

Additional Resources

For more information about local nursing homes, rehabilitation services, senior resources, and support programs, contact your local Commission on Aging, hospital case management department, or Maryland Department of Aging resources.

Always discuss medical decisions and placement recommendations with qualified healthcare professionals familiar with the individual's medical condition and needs.