



# Frequently asked questions about Discharge Planning

The process of Discharge Planning is a comprehensive *determination of needs* for a medically complex patient to transition to home. Without a comprehensive discharge plan, patients with a TBI, SCI, amputations, burns, or other complex medical needs will not receive the necessary funding to ensure that their needs can be met and residential placement avoided.

## When should a family begin discharge planning?

Comprehensive discharge planning should begin as soon as possible after admission.

## How do families determine if they need additional homecare supports and services after discharge?

If a medically complex patient has one or more of following “risk factors,” all community resources and additional funding options should be investigated:

- Patient can’t self-direct their care
- Skilled nursing services required
- Fall Risk
- Ventilator Dependent
- Seizure Disorder
- Tracheotomy or Feeding Tube
- Intermittent Catheterization
- Patient has behavioral problems
- Insufficient Family Support
- Diagnosis of TBI, SCI, Amputee or Burns

## What “living arrangements” are available for a medically complex patient at discharge?

- Home
- Medical Day Programs
- Supportive Living Apartments
- Group Homes
- Neuro-Behavioral Programs
- Nursing Homes

## What strategies are used by insurers to deny payment for homecare benefits?

- Refusing to pay contractually obligated homecare benefits
- Providing incorrect coverage information
- A flawed precertification process
- Requiring duplicative medical reports
- Delay in approving homecare benefits

## Can homecare denials by insurers for rehabilitation, therapies, equipment and nursing care be challenged?

**Yes.** A family or their advocate can successfully pursue internal and external appeal rights for a denial of covered services. A letter from the insurance company will be needed stating the **specific reasons for the denial** of services.

## Are there any strategies to persuade insurers, Medicaid, and Medicare to extend rehabilitation, and pay for specialized equipment, nursing and homecare benefits?

**Yes.**

- Internal Appeals
- Coordination of Benefits
- Blending of Coverages
- Reimbursement to Insurer – Leverage
- External Appeals
- Conversion
- Legislative Advocacy

## Will insurers pay for ramps, home modifications, transportation and nursing care?

Medicaid Waiver programs pay for nursing care, home modifications, and ramps for eligible patients. Medicare Advantage plans may pay for transportation to medical appointments, personal care services and home modifications.

## Will a Medicaid application be approved to pay for home health benefits regardless of assets?

**No.** Individuals must “**spend down**” assets in order to meet the threshold for Medicaid eligibility. Families may want to seek professional guidance as the *spend down process* is very complicated.

## Are there any programs or insurers that pay family members to provide attendant care?

**Yes.** Depending on the state, if you meet the eligibility criteria for Medicaid Waivers (Home and Community Based Services). Private funding programs are available for eligible trauma patients.

## Are there any programs to help pay for accessible housing or mortgage assistance?

**Yes.** Public Housing Authority (Section 8 Rental Certificate Program), Community Development Block Grants, workman’s compensation, U.S.D.A. rural housing loans and some private funding programs provide financial assistance to eligible individuals.

## What “funding sources” may pay for homecare supports and services at discharge?

- Private Insurance
- Medicaid Waiver Programs
- Medicare Advantage Plans
- Assistive Technology Grants
- Low Interest Loans
- Charitable Organizations
- Fund Raising/Donations
- Private Funding Programs

***If you have questions about  
Discharge Planning,  
please call for a free consultation.***

## **Legal Rights**

Of the Seriously Ill  
and Injured:

**A Family Guide**

Joseph L. Romano  
Attorney and Counselor at Law

If you have questions or if you would like to receive a FREE consultation or a copy of Joseph Romano's book "*Legal Rights of the Seriously Ill and Injured: A Family Guide*" in English or Spanish, call 800-331-4134.

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**The Law Office of Joseph L. Romano handles cases in Pennsylvania. For cases outside of Pennsylvania, Joseph Romano works with local attorneys in each state, as applicable.**

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