

Eli's Rehab Report

Practice Pointers: Try These 3-Hour Rule Strategies on for Size

Nail this requirement any way you look at it.

Having trouble keeping up with the three-hour rule? Specifically, are you worried about missed therapy, thanks to late-day admits, discharge days, and weekends? Follow our advice below to boost your program, and rest assured when you submit your claims.

Don't Discard Discharge Day

Some providers believe that they can't count the discharge day toward the three-hour rule. This is not true.

"That confusion comes from the fact that you cannot charge for therapy services on the day of discharge," clarifies **Denese Estep, OTR,** senior consultant for DE Consulting LLC in Sherwood, Ark. "But remember, we're in the world of PPS, so we don't get to bill for those services anyway."

Bottom line: And any time you give to that patient during her stay is counted toward the three-hour rule. "It's true that most people on the day of discharge do not get three hours -- on the other hand, there are some facilities that require three hours on the day of discharge, especially the ones that have limited weekend coverage," Estep says.

Don't overlook: The three-hour rule starts counting on the day of admit. Most facilities cannot fit in three hours that day, so be sure to factor that into your patient scheduling.

Say Hello to Weekends

In this day and age of inpatient rehab, you'd be hardpressed not to offer your services on at least one weekend day. This helps fill in gaps when admit and discharge days are working against you.

"We never get three hours on the admit day, so we see patients admitted during that week for three hours on that Saturday. However, we do not count day of discharge as a day," says **Jennifer Weiss, PT,** inpatient rehab coordinator for Ingalls Health System in Harvey, III.

Plan Ahead From All Angles

As soon as your patient's admitted, start mapping out her length of stay, and keep an eye on where the therapy is expected to end (see the previous story for more information on avoiding weekend and Monday discharges.)

Scenario: A patient's length of stay is 12 days, and he has three hours of therapy, five out of seven days in the first week. Do they have to have three hours in the final five days?

A safe bet: "It depends on which five of those seven days he didn't get the therapy," Weiss says. "You should be able to take any seven days and make sure that five of them have three hours each."

Weiss suggests the following solution to the example above (considering her facility offers rehab on Saturdays):

Wednesday: admit (no 3 hrs)

- 1. Thur: 3 hrs
- 2. Fri: 3 hrs



3.	Sat:	3	hrs

4. Sun: off

5. Mon: 3 hrs

6. Tue: 3 hrs

7. Wed: 3 hrs

8. Thur: 3 hrs

9. Fri: 3 hrs

10. Sat: 1/2 day

11. Sun: off (discharge).

"Since we don't count day of discharge, this 12-day stay would be OK," she says. "But if you want to play it really safe, then you should have three hours on that second Saturday as well."

Another way: See if the patient even has a need for intensive rehab as you get toward the end of the stay. You may find that a Friday discharge is more appropriate.