



Frequently Asked Questions

- 1. Is Universal Healthcare a “nursing home” or a “rehabilitation facility”?**
Universal Healthcare provides a wide range of services geared to each stage of a person’s recovery addressing both their physical and emotional needs. Although we are a rehab focused facility, our services range from short-term rehabilitation to long-term care.
- 2. What is SMART rehab?**
SMART rehab (*specialized-multidisciplinary-accelerated-rehabilitative-therapy*) is an innovative therapy program offered at Universal Healthcare. This program consists of an expert staff of physicians, nurses, physical, occupational and speech therapists that work together to design individualized, need-specific care plans for each of our residents.
- 3. If a resident qualifies for therapy services, how often are services provided and how long do sessions last?**
Each resident admitted for rehabilitation is evaluated by our therapy department to develop a plan tailored to meet their specific needs. Physical, Occupational and Speech Therapy services are offered 5-days a week. Therapy sessions generally last from 45 minutes to 1 hour, depending on the resident’s medical condition and level of endurance.
- 4. What types of insurance does Universal Healthcare accept?**
Medicare, Medicaid, Evercare, private pay and many private insurance plans are accepted for various services. Please contact individual facilities for specific information.
- 5. Does Medicare pay for a nursing home?**
Medicare does cover some skilled nursing and rehabilitative care but generally does not cover custodial care (help with activities of daily living such as bathing, dressing and using the bathroom) if that is the only care you need. In most cases, Medicare will pay if there has been a qualifying 3-day hospital stay *and* the subscriber requires skilled nursing or rehabilitation services upon discharge.
- 6. How long does Medicare pay for skilled nursing?**
Medicare can cover up to 100 days of skilled nursing, but 100 days of coverage are not guaranteed. Coverage is not the same for 100 days. For the first 20 days, Medicare pays 100%. For the next 80 days, Medicare pays all but the daily coinsurance amount that is set each year. That co-pay may be covered by the individual’s secondary insurance. If not, it is paid for by their private funds or through medical assistance (Medicaid).
- 7. What are the visiting hours?**
Visiting hours are from 8:00 am until 8:00 pm; however, there are special circumstances where after-hours visiting is allowed.

8. What type of clothing should I bring to wear?

We encourage residents to dress comfortably as they would at home (5-7 outfits). It is a good idea to make sure the clothing is washable and to label clothing with a permanent marker. Shoes with non-slip soles are recommended.

9. How can I find out about my family member?

Due to HIPAA regulations, we will only discuss resident information with the resident's responsible party and / or individuals who have been designated in writing to receive information. Within these guidelines, our nurses are happy to discuss how your loved one is doing. We encourage you to attend our care-plan meetings involving each resident, their family and our professional staff. Resident and family involvement in care plan meetings give us a chance to work together in setting and achieving goals and allow us to provide more personalized services.

10. How is the transfer made from the hospital to Universal Healthcare?

The hospital social worker or case manager will send pertinent medical information for us to review and will check to see if we have a bed available. We will respond to the social worker / case manager and will request any additional information if needed. Once a resident has been accepted for admission, transportation will be arranged by the hospital personnel.

11. What information is needed to admit a resident who is currently in the hospital?

Before a resident can be considered for admission from the hospital or other health care institution we will need the following information:

- Completed transfer form, including orders for the attending physician for the immediate care of the resident
- Completed medical history & physical signed by the physician
- Completed discharge summary signed by the physician
- Copy of current x-ray report and any other pertinent x-ray reports
- Copies of any pertinent laboratory studies
- Copy of the completed and signed FL-2 form and PASARR form(s) as appropriate
- Medicare, Medicaid and Social Security cards as appropriate
- Name, address and phone number of the attending physician who will be responsible for the resident's overall care.

12. What information is needed to admit a resident who is currently at home?

- Completed history and physical signed by the physician (must be completed within 5 days prior to admission)
- Copy of completed and signed FL-2 form and PASARR form(s) as appropriate.
- Copy of current chest x-ray report.
- Name, address, phone number of the attending physician who will be responsible for the residents overall care