

42 CFR 483.45

This section is current through the March 20, 2014 issue of the Federal Register

Code of Federal Regulations > TITLE 42-- PUBLIC HEALTH > CHAPTER IV-- CENTERS FOR MEDICARE & MEDICAID SERVICES, DEPARTMENT OF HEALTH AND HUMAN SERVICES > SUBCHAPTER G-- STANDARDS AND CERTIFICATION > PART 483-- REQUIREMENTS FOR STATES AND LONG TERM CARE FACILITIES > SUBPART B-- REQUIREMENTS FOR LONG TERM CARE FACILITIES

§ 483.45 Specialized rehabilitative services.

- (a) Provision of services. If specialized rehabilitative services such as but not limited to physical therapy, speech-language pathology, occupational therapy, and mental health rehabilitative services for mental illness and intellectual disability, are required in the resident's comprehensive plan of care, the facility must--
- (1) Provide the required services; or
 - (2) Obtain the required services from an outside resource (in accordance with § 483.75(h) of this part) from a provider of specialized rehabilitative services.
- (b) Qualifications. Specialized rehabilitative services must be provided under the written order of a physician by qualified personnel.

Statutory Authority

AUTHORITY NOTE APPLICABLE TO ENTIRE PART:

Secs. 1102, 1128I and 1871 of the Social Security Act ([42 U.S.C. 1302](#), 1320a-7j, and 1395hh).

History

[56 FR 48875, Sept. 26, 1991, as amended at [57 FR 43925](#), Sept. 23, 1992]

Annotations

Case Notes

LexisNexis® Notes

Case Notes Applicable to Entire Part

Public Health & Welfare Law : Social Security : Medicaid : Coverage : General Overview

Public Health & Welfare Law : Social Security : Medicaid : Providers : Payments & Reimbursements :

Real Property Law : Zoning & Land Use : Comprehensive Plans

Case Notes Applicable to Entire Part

[Part Note](#)

Public Health & Welfare Law : Social Security : Medicaid : Coverage : General Overview

[Concourse Rehab. & Nursing Ctr. Inc. v. Whalen, 249 F.3d 136, 2001 U.S. App. LEXIS 8153](#) (2d Cir May 4, 2001).

Overview: *New York State Department of Health's use of an actual improvement standard to estimate the number of Medicaid patients who ought to receive restorative therapy was not arbitrary and capricious.*

- Health Care Financing Administration regulations provide that if specialized rehabilitative services are required in a resident's comprehensive plan of care, the facility must either

provide those services or obtain those services from an outside source. [42 C.F.R. § 483.45\(a\) \(2000\)](#); [42 C.F.R. 483.25 \(2000\)](#); [42 U.S.C.S. § 1395i-3\(h\)](#). It is the cost of such rehabilitative services that the former Boren Amendment required States to "take into account." [42 U.S.C.S. § 1396a\(a\)\(13\)\(A\)\(repealed\)](#). *Go To Headnote*

Public Health & Welfare Law : Social Security : Medicaid : Providers : Payments & Reimbursements :

[Concourse Rehab. & Nursing Ctr. Inc. v. Whalen, 249 F.3d 136, 2001 U.S. App. LEXIS 8153](#) (2d Cir May 4, 2001).

Overview: *New York State Department of Health's use of an actual improvement standard to estimate the number of Medicaid patients who ought to receive restorative therapy was not arbitrary and capricious.*

- Health Care Financing Administration regulations provide that if specialized rehabilitative services are required in a resident's comprehensive plan of care, the facility must either provide those services or obtain those services from an outside source. [42 C.F.R. § 483.45\(a\) \(2000\)](#); [42 C.F.R. 483.25 \(2000\)](#); [42 U.S.C.S. § 1395i-3\(h\)](#). It is the cost of such rehabilitative services that the former Boren Amendment required States to "take into account." [42 U.S.C.S. § 1396a\(a\)\(13\)\(A\)\(repealed\)](#). *Go To Headnote*

Real Property Law : Zoning & Land Use : Comprehensive Plans

[Concourse Rehab. & Nursing Ctr. Inc. v. Whalen, 249 F.3d 136, 2001 U.S. App. LEXIS 8153](#) (2d Cir May 4, 2001).

Overview: *New York State Department of Health's use of an actual improvement standard to estimate the number of Medicaid patients who ought to receive restorative therapy was not arbitrary and capricious.*

- Health Care Financing Administration regulations provide that if specialized rehabilitative services are required in a resident's comprehensive plan of care, the facility must either provide those services or obtain those services from an outside source. [42 C.F.R. § 483.45\(a\) \(2000\)](#); [42 C.F.R. 483.25 \(2000\)](#); [42 U.S.C.S. § 1395i-3\(h\)](#). It is the cost of such rehabilitative services that the former Boren Amendment required States to "take into account." [42 U.S.C.S. § 1396a\(a\)\(13\)\(A\)\(repealed\)](#). *Go To Headnote*

Research References & Practice Aids
--

NOTES APPLICABLE TO ENTIRE CHAPTER:

[PUBLISHER'S NOTE: Nomenclature changes affecting Chapter IV appear at [45 FR 53806](#), Aug. 13, 1980; [50 FR 12741](#), Mar. 29, 1985; [50 FR 33034](#), Aug. 16, 1985; [51 FR 41338](#), Nov. 14, 1986; [53 FR 6634](#), Mar. 2, 1988; [53 FR 47201](#), Nov. 22, 1988; [56 FR 8852](#), Mar. 1, 1991; [66 FR 39450, 39452](#), July 31, 2001; [67 FR 36539, 36540](#), May 24, 2002; [77 FR 29002, 29028](#), May 16, 2012.]

LEXISNEXIS' CODE OF FEDERAL REGULATIONS

Copyright © 2014, by Matthew Bender & Company, a member of the LexisNexis Group. All rights reserved.