



Information sheet No. 23

Rehabilitation

The aim of medical rehabilitation is either to enable the patient to cope with the challenges of everyday life again or to maintain their current condition.

Rehabilitation services are designed to remove, reduce or prevent impairment of bodily functions so that the onset of a disability or the need for long-term care can be averted.

Various treatment options help to restore the patient's ability to do things.

Who pays the costs?

Anyone with statutory insurance is entitled to claim for medical rehabilitation, as soon as it can be justified from a medical point of view and is necessary. The programme usually lasts 3 weeks and an application can be made to the relevant funding agency every four years. It is possible to submit a claim for this earlier if there is a medical need.

In the case of old-age pensioners, the patient's health insurance company has the primary responsibility to cover this. The doctor's surgery must fill out a form to apply for rehabilitation. If the person is in paid employment, then the pension insurance company is responsible for this. In the case of children and adolescents as well as patients receiving cancer aftercare, health insurance and pension insurance will cover an equal share of the costs. The costs may also be borne by accident insurance, social welfare, integration support and the Federal Employment Agency.

Ein A special case is that the medical service of the health insurer may recommend medical rehabilitation as part of the assessment of the degree of care required.

When do people need medical rehabilitation?

Outpatient treatment options such as occupational therapy or physiotherapy at home have been exhausted or are no longer sufficient.

The legal prerequisites for benefits are present within the context of the need for rehabilitation, rehabilitation capability and rehabilitation prognosis.

Specifically, this means that there is a medical need, the patient is displaying sufficient resilience and motivation and the treatment is sustainable.

Rehabilitation options

In the case of **mobile geriatric rehabilitation**, "the rehabilitation comes into the home", that is, the treatment takes place in the home setting, several times a week. This may be considered for people who, due to dementia, are dependent on the constant presence of a relative or whose living environment is specially adapted to a disability.

With **outpatient rehabilitation** the patients receive the treatments and services they need over several days in an institution near where they live. Driving services are provided depending on the level of need and the institution involved.



If outpatient rehabilitation is not enough, an **inpatient admission** may be considered. The options for inpatient rehabilitation include:

- **Indication-specific rehabilitation**, which is geared towards treating specific impairments such as cardiovascular or orthopaedic diseases
- **Geriatric rehabilitation** for older people, who are in need of nursing care and have a variety of conditions.
- **“Family-oriented rehabilitation”** for children with serious, chronic illnesses and their families
- **Follow-up rehabilitation**, where medical rehabilitation immediately follows hospitalisation.

The principle always applies, outpatient before inpatient and rehabilitation before nursing care.

Wide range of treatments

Medical rehabilitation is a complex service, which involves a variety of treatment options, which aim to increase mobility and mental and physical wellbeing through the learning of useful techniques, with the aid of massages, spas, targeted physiotherapy or occupational therapy.

Breathing exercises and exercises to build up stamina can help to develop more physically resilience.

Advice is also given on changing diet: stopping smoking; learning relaxation methods and much more besides.

Additional charges

Adults pay 10.00 Euros per calendar day to the institution for medical rehabilitation programmes.

Children and young people under the age of 18 do not need to make any additional payments.

Please note that additional charges only need to be paid up to the financial limit (see Information Sheet no. 7).

With follow-up rehabilitation, a maximum of 28 days of additional payments per calendar year will be charged. Additional hospital payments that have already been made will be included in this.

The staff at the care support centre will be happy to advise you.

Free service number 0800 59 500 59

www.pflegestuetzpunkteberlin.de

The responsible body for the care support centres are the state of Berlin and the health and care insurance companies in Berlin