

PS-3

GOVERNMENTAL DESIGNATION OF THE REHABILITATION HOSPITALS: 3-YEAR PERFORMANCE REVIEW

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Objectives

- During the first main project period (2020.03~2023.02) of the Rehabilitation Hospital Designation Scheme by the Ministry of Health and Welfare, 26 institutions were designated in 2020 and 19 institutions were designated in 2021, with a total of 45 institutions operating as rehabilitation hospitals (approximately 8,400 beds nationwide as of the third year).
- This study evaluated the operational performance and treatment outcomes of the first round of rehabilitation hospital designation scheme.

Participants and Methods

- 45 institutions participated in the designation system for rehabilitation hospitals, and 38,483 patients received intensive convalescent rehabilitation. 7,742 patients in the first year, 13,026 patients in the second year, 15,351 patients in the third year, and 31,238 patients in total visited rehabilitation hospitals.
- The study will provide a comprehensive overview of the program and the breakdown of total medical expenses.

Results

- The total cost for the project was 748 billion won (approximately \$573.25 million), with 51.5% of the budget dedicated to intensive convalescent rehabilitation and 39.5% going towards hospitalization fees.
- Monthly claims for rehabilitation therapy increased steadily over the three-year period.
- Patients were composed of brain disorders (66.3%), musculoskeletal disorders (21.6%), spinal cord disorders (8.7%), and debility syndromes (3.1%) in the third year, and the proportion of patients with musculoskeletal disorders and debility syndromes that can get active rehabilitation in designated rehabilitation hospitals has been continuously expanding over the project period (12% > 25%).
- The rate of return to home has been improving at 40.6% before participation in the first project, 61.9% in the third year, confirming that the designated rehabilitation hospital scheme is operating in accordance with its purpose through functional recovery.
- However, 21.3% of brain disorders, 19.5% of spinal cord disorders, 10.9% of musculoskeletal disorders, 26.2% of lower limb amputations, and 28.4% of debility syndromes were transferred from rehabilitation hospitals to higher-level hospitals, so it is necessary to prepare a safe rehabilitation delivery system through clear classification of rehabilitation patients in acute medical institutions.

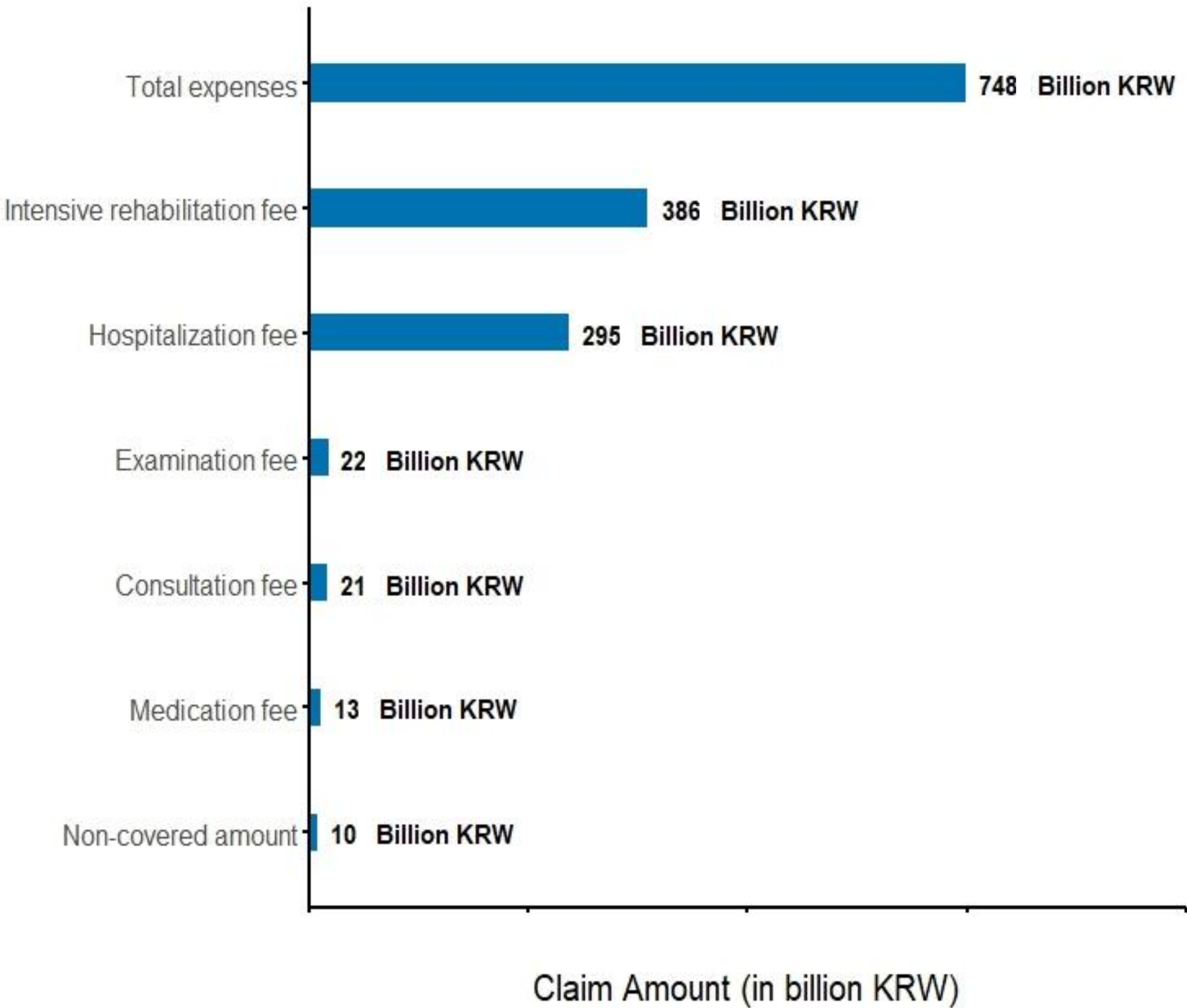


Figure 1. Percentage of disease groups

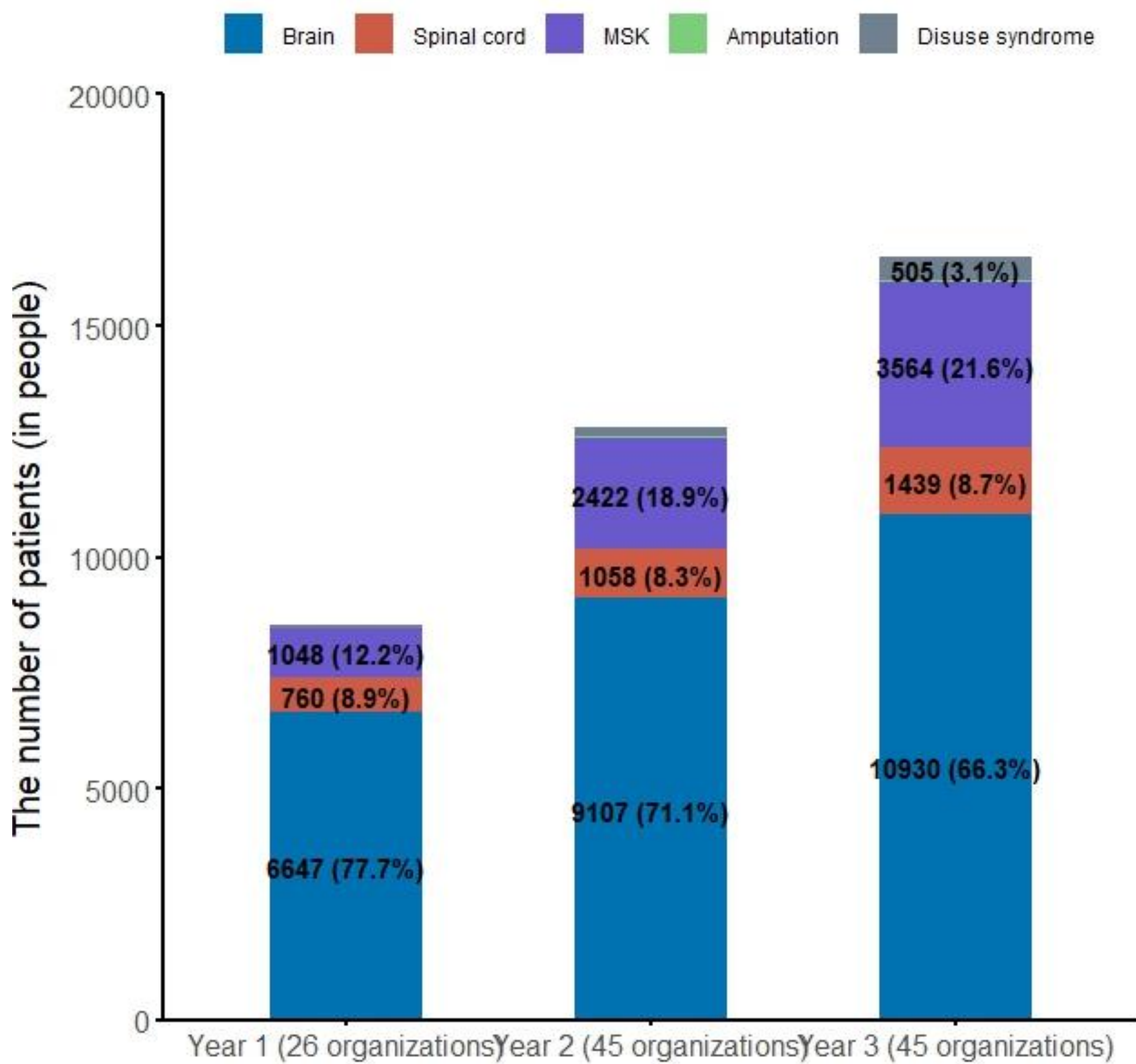


Figure 2. Rehabilitation facility total expenses

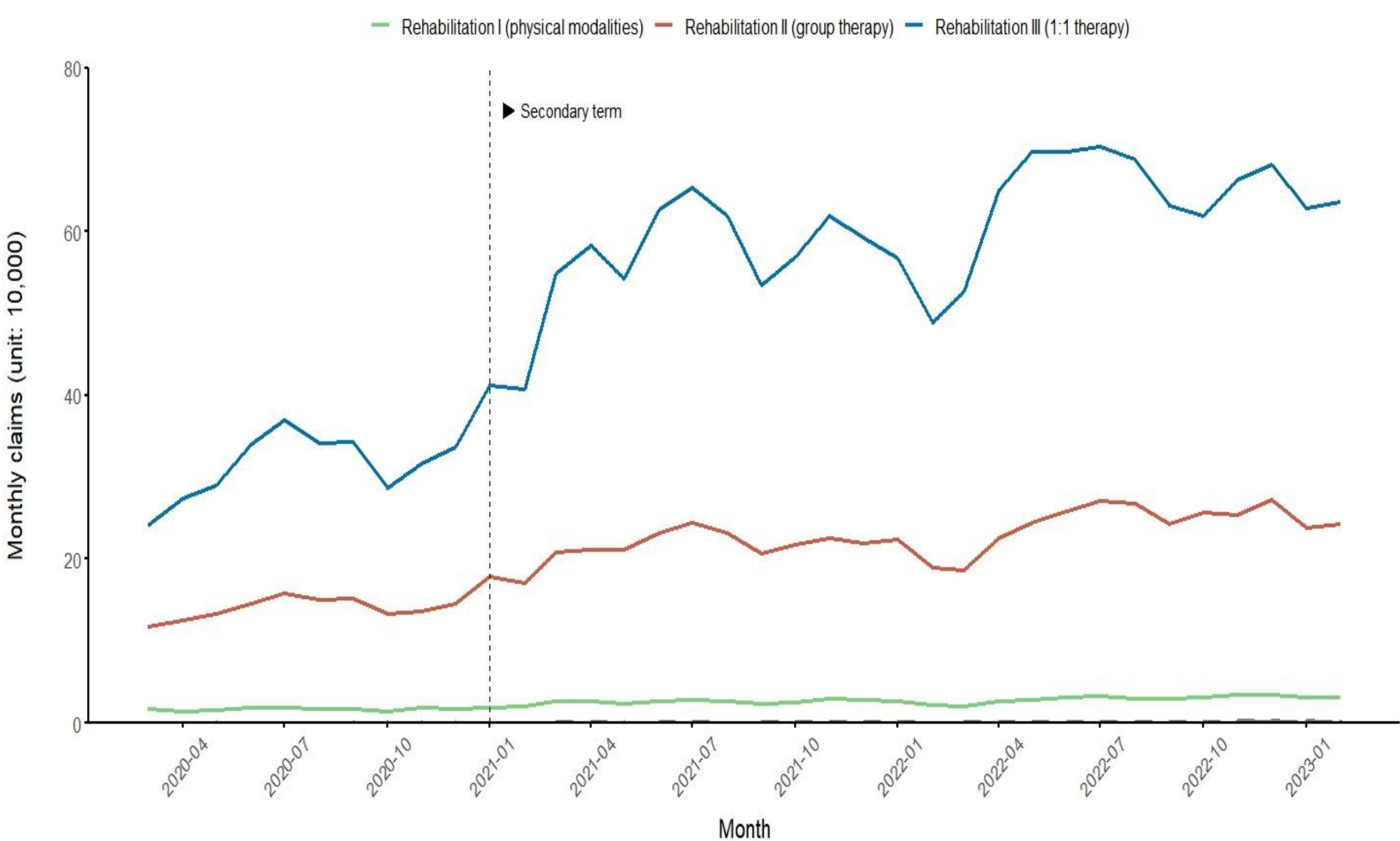


Figure 3. The Number of Monthly Claims for Rehabilitation

Conclusions

- The newly implemented rehabilitation facilitation scheme has proven to be an effective incentive for medical institutions to provide 1:1 intensive convalescent rehabilitation with rational allocation of rehabilitation resources according to disease groups.