MICHIGAN MEDICINE
UNIVERSITY OF MICHIGAN

Transitional Care Management

Physical Medicine & Rehabilitation

Leaving the hospital doesn't have to mean leaving **your care team**

Thank you for choosing Michigan Medicine for your care. Your access to the world-class clinical team in the Department of Physical Medicine & Rehabilitation doesn't end when you're discharged. The Transitional Care Management Program can provide you with continued specialized care during your transition home. They can also help schedule follow up appointments and referrals to ensure you get back to your best function.

What we provide:

- A clinical team member will contact you within 2 days of discharge to check on your progress and help schedule your transitional care clinic visit within 2 weeks.
- The clinical team will continue your specialized clinical care and coordinate your care during the month after your discharge

Your role is to:

- Commit to scheduling and attending post-discharge appointments at the Burlington Building location
- Maintain timely and regular communication with your care team - please tell us how you are doing, can we answer any questions?

Transitional Care Management Services are covered by all insurance plans. Coinsurance/deductibles may apply based on your insurance plan.

Please refer to your discharge instructions if you have any time sensitive issues.

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