



99106006013000

Kurzzeitpflege für gesetzlich Pflegeversicherte Informationserteilung

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Modul	Sachverhalt
Leistungsschlüssel	99106006013000
Leistungsbezeichnung I	Kurzzeitpflege für gesetzlich Pflegeversicherte Informationserteilung
Leistungsbezeichnung II	Applying for short-term care under long-term care insurance
Typisierung	1 - Bund: Regelung und Vollzug
Quellredaktion	Bund
Freigabestatus Katalog	fachlich freigegeben (gold)
Freigabestatus Bibliothek	unbestimmter Freigabestatus
Begriffe im Kontext	
Leistungstyp	Leistungsobjekt mit Verrichtung
Leistungsgruppierung	
Verrichtungskennung	Informationserteilung (13)
SDG-Informationsbereich	Medizinische Behandlung in einem anderen





Modul	Sachverhalt
	Mitgliedstaat
Lagen Portalverbund	Pflege (1130400)
Einheitlicher Ansprechpartner	Nein
Fachlich freigegeben am	04.11.2024
Fachlich freigegen durch	Federal Ministry of Health (BMG)
Handlungsgrundlage	https://www.gesetze-im-internet.de/sgb_11/_42.html
Teaser	If you are in need of care and are temporarily unable to be cared for at home, you have the option of being cared for in a fully inpatient care facility for a short period of time.
Volltext	If you are temporarily unable to receive care at home, you can be cared for in a fully inpatient care facility for a short period of time. Short-term care is possible, for example • if the person caring for you at home is ill • if your home needs to be adapted to home care through conversion measures • for a transitional period following inpatient hospital treatment of the person in need of care The long-term care insurance fund pays for up to 8 weeks of inpatient short-term care per calendar year. The long-term care insurance fund covers the care-related expenses, including the costs of care and the costs of medical treatment services of up to EUR 1,774 per calendar year. This amount can be increased by up to EUR 1,612 from unused funds for respite care to a total of up to EUR 3,386. (Status: 2024) You can therefore combine the funds for short-term care with funds for respite care that have not yet been used. Respite care takes place at home or is possible in various ways, while short-term care at home is not possible.





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	During short-term care, you will continue to receive half of the pro rata care allowance paid to date. The full care allowance is paid for the first and last day.
	In addition, you can also use the relief amount for costs associated with short-term care, for example to cover the costs of accommodation and meals. Otherwise, the costs for accommodation, meals and any investment costs must be borne by the patient.
	Short-term care is usually provided in an approved facility. You can obtain an overview from your care insurance fund.
	In justified individual cases, those in need of care who are cared for at home are also entitled to short-term care in suitable facilities for the disabled and other suitable facilities if care in a care facility approved by the care insurance funds for short-term care is not possible or does not appear reasonable.
Erforderliche Unterlagen	 Application for short-term care if necessary: Power of attorney, guardian's certificate Medical documents Proof of care insurance and degree of care
	Further documents may be required depending on the care insurance fund. Please contact your care insurance fund for more information.
Voraussetzungen	 You are temporarily unable to be cared for at home. You have care grade 2, 3, 4 or 5. If you are classified as care grade 1, you can use the relief amount of up to 125 euros per month for short-term care. In addition, people without a care grade or with care grade 1 may be entitled to short-term care under the health insurance scheme (§ 39c SGB V).
Kosten	You do not have to pay anything for the application.
	The long-term care insurance fund pays for short-term care services up to the maximum amount per calendar year.





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	You pay for your own accommodation, meals and travel costs for short-term care. If the relief amount has not yet been used up, your own contributions can be reimbursed.
Verfahrensablauf	You can submit the application for short-term care to the long-term care insurance fund informally, for example by telephone, email or post. With many long-term care insurance funds, you can also hand in the application in person at the office or submit it online.
	 Submit the application for short-term care to your care insurance fund. If you are unable to do this yourself, you can authorize someone in writing. The long-term care insurance fund will check your application and inform you of the result. Ask the care insurance fund or a care advice center about suitable facilities for short-term care and the costs involved. The long-term care insurance fund usually settles the costs directly with the facility as part of the long-term care insurance benefits. You must pay your own share of the costs yourself. You may be able to receive reimbursement via the relief amount.
Bearbeitungsdauer	As a rule, processing takes 2 working days. The duration depends on whether all documents are complete and conclusive. It may vary depending on the complexity of the individual case.
Frist	There is no deadline.
weiterführende Informationen	https://www.bundesgesundheitsministerium.de/kurzze itpflege.html https://bundesportal.gkv-spitzenverband.de?ID=36
Hinweise	Regardless of whether you are entitled to short-term care, since July 1, 2024, people in need of long-term care have an independent entitlement to nursing care in approved preventive care or rehabilitation facilities if the caregiver of the person in need of long-term care is also receiving inpatient medical care or rehabilitation services there.

This entitlement exists from care level 1 (in accordance





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	with § 42a SGB XI). If nursing care is not possible in the preventive care or rehabilitation facility, the entitlement can also be exercised in a fully inpatient care facility.
Rechtsbehelf	ObjectionAction before the social court
Kurztext	 Short-term care for people with statutory long-term care insurance Information provided Persons in need of care who are insured under the long-term care insurance scheme are entitled to up to 8 weeks of full inpatient short-term care per calendar year Prerequisites: at least care level 2, basically home care, home care is temporarily not possible or not sufficient, therefore full inpatient care is required temporarily. the long-term care insurance fund covers the costs up to a total amount of EUR 1,774 per calendar year. The benefit amount of up to EUR 1,774 can be increased by up to EUR 1,612 from unused funds for respite care to a total of up to EUR 3,386 per calendar year. (Status: 2024) Application must be submitted to the care insurance fund of the person in need of care before the start of short-term care Costs for accommodation and meals as well as travel and transportation can be reimbursed via the relief amount Half of the (pro rata) care allowance previously received will continue to be paid for up to 8 weeks during short-term care. Information from: Care insurance funds or private insurance, or recognized advice centres, such as care support points Responsible: Long-term care insurance fund or private insurance company that provides compulsory private long-term care insurance
Ansprechpunkt	
Zuständige Stelle	

Formulare





Modul	Sachverhalt
Ursprungsportal	Kurzzeitpflege für gesetzlich Pflegeversicherte Informationserteilung, Kurzzeitpflege für gesetzlich Pflegeversicherte Informationserteilung