

LONG TERM ACUTE CARE HOSPITAL (LTACH)

What service(s) will be provided by this level of care?

- Respiratory Care
- Physical Therapy
- Occupational Therapy/Speech Therapy
- Dietitian Services
- Complex Wound Management
- Medication Management/Antibiotic Stewardship
- Case Management Services
- Medical Care (daily visits by MDs/Nurse Practitioners)
- Nursing care (ratios based on patient care needs)
- 24-hour “Code Blue” coverage

How is this level of care different from being in the hospital?

- Long-Term Acute Care Hospitals (LTACHs) serve a critical role by treating the most acutely ill patients who are stable but need extended time to recover in a hospital setting.
- The average length of stay for an LTACH patient is typically 25-30 days.
- Services provided at LTACHs meet the same criteria for patient safety, quality metrics, and clinical outcomes as traditional acute care Hospitals (i.e. Emory Hospitals).

How does the referral process work? Does this level of care require a physician order?

- Your physician has to write an order to be evaluated for LTACH
- Potential patients are referred by Case Managers or Physicians at Short Term Acute Care Hospital
- Our Clinical Liaisons (RTs or RNs) assigned to various hospitals throughout Metro-Atlanta market follow-up with patient referral
- Admissions Coordinator works with Clinical Liaisons to verify medical insurance coverage for LTACH care
- Clinical Liaisons: Evaluate each patient for potential admission to LTACH, educate families, set-up tours, provide insurance verification information to admissions team, work with family to obtain consent prior to admission
- Once consent is obtained and the referring MD/hospital has signed off, transport to the LTACH occurs

How long will I need to stay at this level of care?

The average length of stay is about 25 days depending on clinical needs.

Will my insurance pay for this level of care? What happens when insurance no longer covers this level of care?

- Every patient referred to an LTACH has a review of benefits to verify their insurance covers LTACH services to minimize any cost to a patient or family.
- From admission, the Case Management team at the LTACH works to ensure a safe discharge plan for all patients to the next level of care.
- If a benefit is predicted to expire or lapse, our Case Management team will notify you and work to facilitate a safe discharge plan.

What should I expect from this level of care?

- The goal of an LTACH is to return a stable, critically ill patient to an optimal state of health. This is done through evidence-based protocols for ventilator weaning, wound care management, physical and occupation therapies, and nursing care.

- The discharge process begins upon admission to prepare a patient and family for discharge to home, rehabilitation hospital, hospice, or a skilled nursing facility.

Who will take care of me?

- Bedside care is provided by registered nurses.
- Certified Nursing Aides provide activities of daily living such as bathing, turning, and assist with mobility.
- Respiratory Therapists will manage all ventilators, oxygen administration, inhaled medication administration, and procedures involving the airway.

How often will I be seen by a physician or healthcare professional?

- Daily rounding by attending MDs performed. Consultants round as indicated by patient condition.

What happens if I have a clinical need that cannot be managed in the LTACH?

- Most medical issues can be managed in the LTACH setting.
- In the unlikely event that there is a need for more advanced clinical services, you will be transferred to a traditional acute care hospital (such as one of the Emory Hospitals).

Who will supervise and coordinate my care once I am at this facility?

- A physician will supervise your care in the LTACH with any consulting physicians following your care (such as pulmonology, cardiology, or nephrology).
- Your LTACH Case Manager will work with the Interdisciplinary Team of MDs and clinical staff to coordinate all areas of your recovery.

What is expected of me at this level of care?

- You and your family are expected to participate, to the best of your ability, in the plan of care.
- You or your family are also expected to participate in the discharge process to find the best option for your needs.