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# “A Conversation About LTACs” (Long Term Acute Care Hospitals)

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# What are Long Term Acute Care Hospitals?

- Long Term Acute Care Hospitals (LTACs) are healthcare facilities for patients who...
  - Need an extended period of time to recover following their initial hospitalization
  - Require a high degree of advanced care provided by doctors, nurses and other clinicians not provided by rehabilitative or skilled care facilities

# Why are LTACs necessary?

- Patients are being treated for more advanced conditions and undergoing more complex treatments so...
  - Their recovery time is longer depending upon their age, comorbidities and leading procedure(s)
  - Specialized care is required between their initial hospitalization and when they are sent home or to rehabilitation
  - Payers see LTACs as more economical than acute care hospitals for delivering care to extended recovery patients

# What care may an LTAC provide?

- Daily physician evaluation
- Dialysis
- Initial rehabilitation
- Nursing care
- Nutritional therapy
- Ongoing diagnostic/laboratory testing/monitoring
- Pain management
- Post-surgical care/support
- Respiratory therapy
- Wound care

# How long do patients stay in LTACs?

- There is no minimum or maximum length of stay
- It varies depending on the patient and their care needs
- A reasonable range is 18 to 35 days
- Comparatively, average stay at an acute care hospital is 3 to 7 days

# Can't recovery be in an acute care hospital?

- LTACs are primarily focused on continuing the recovery of patients, acute care facilities have a focus on immediate care needs such as...
  - Emergency units
  - Intensive care units (ICUs)
  - Imaging, X-Ray, Radiology
  - Laboratory
  - Pathology
  - Surgical suites
  - Trauma centers

# How many LTACs are there?

- **There are over 400 LTACs in the United States**
  - Many are independent operating facilities (freestanding)
  - Some function as units of acute hospitals (“a hospital within a hospital”)
    - While an LTAC may be located within the structure/property of an acute care hospital facility, their staff, care support and reimbursement is entirely separate from the operations of the acute care facility
- **A moratorium on LTAC construction was put in place by the U.S. government in 2007**
  - The moratorium ended at the end of 2012, a new run of LTAC construction may ensue as the economy improves



# Who are some of the larger LTACs?

- **Acuity Healthcare**
- **AMG Integrated Healthcare Management**
- **Cornerstone Healthcare Group**
- **Dubuis Health System**
- **HealthSouth**
- **Kindred**
- **LHC Group**
- **LifeCare**
- **Select Medical**
- **Vibra**

Many of these companies operate assisted living, long term care and rehabilitation facilities.

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# How is their reimbursement managed?

- To be considered as official LTACs, they go through a certification process –and so do some of their staff, such as physicians
- For LTAC Medicare patients, there are specific LTAC DRGs codes categorized as “LTC-DRGs”
  - These codes accommodate the extended stays of typical LTAC patients
  - Most LTACs accept standard commercial insurance/managed care plan payment from patients as well
- For LTAC physicians
  - They bill under Part B for Medicare patients
  - Commercial insurance/managed care plan

# What is the outlook for LTACs?

- Healthcare professionals including doctors, nurses, pharmacists and therapists will continue to be in high demand within the segment
- LTACs will continue to grow in number as the economy improves, baby boomers age and technology improves
- Their identity and function will be more familiar to consumers and patients as they further penetrate more marketplaces
- The specialized position they have within the continuum of care will increase the scrutiny of their reimbursement practices
- Pharmaceutical and medical device manufacturers/marketers will seek more opportunities in this healthcare segment

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