ATI Advisory Study Reaffirms Value of LTACHs for Critically Complex Patients

– ATI Advisorv

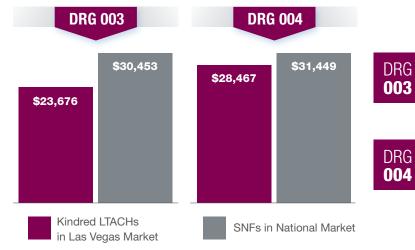
Medically complex patients often require one or more post-acute care (PAC) providers along a recovery journey that can span a number of weeks. To maximize efficiency and effectiveness, payers and managed care organizations must properly align levels of care with medical necessity.

A recent ATI Advisory (ATI) study reaffirmed that LTACHs can "meaningfully participate and contribute to success in value-based models" by providing specialized care to critically complex patients.

Key Takeaway 1: LTACHs Provide Efficient Pulmonary Care

Certain ventilator associated STACH DRGs, such as 003 and 004, are particularly well-suited for the highly specialized respiratory care provided at LTAC hospitals.

> Overall Unadjusted Average Medicare Spending (Within 90-day Episode) After Discharge from Initial Discharge Location by Care Setting and High Volume LTACH DRGs, CY 2019



>96 hours or principal diagnosis except face, mouth and neck without major 0.R. procedure.

Source: ATI analysis of 100% Medicare FFS claims, CY 2019

ECMO or Tracheostomy with mechanical ventilation

>96 hours or principal diagnosis except face,

mouth and neck with major O.R. procedure.

Tracheostomy with mechanical ventilation

Spending was about 10-20% lower

for beneficiaries discharged to a Kindred LTACH in Las Vegas than for beneficiaries discharged to a SNF.



Patients who transitioned from the hospital to an LTACH also discharged to home 20 days **sooner** than those who transitioned to a SNF.





Comprehensive Rehabilitation

Unique Capabilities of LTACHs That Aid in Complex Care and Recovery



Dailv **Physician Oversight**



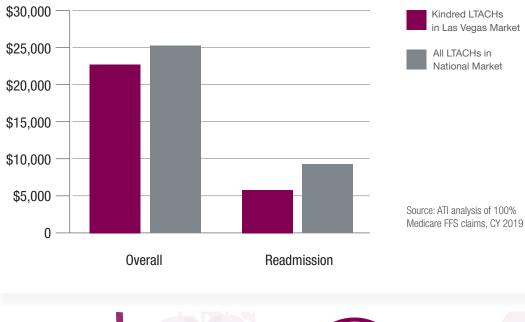
Interdisciplinary **Teams of ICU-Level Clinicians**

Expertise in Ventilator Liberation

Key Takeaway 2: Kindred Hospital Care Can Reduce Spending

Kindred LTAC hospitals effectively managed patient needs during the initial LTAC hospital stay, likely reducing disruption to patients and improving patients' overall care experience during their post-LTAC hospital period. – ATI Advisory

Unadjusted Average Spending After Discharge from Initial LTACH Stay for All Conditions, CY 2019



10% decrease in overall spending 17% decrease in readmission spending Kindred Hospitals have provided quality care for 30 years, and continue to introduce initiatives that improve care, such as:



Pursuit of disease-specific certifications from The Joint Commission in Sepsis and Respiratory Failure in all hospitals



Early Mobility Programs that incorporate mobilization as early as is safe, even for patients on ventilators



AfterCare Program in which specialty trained RNs follow up with patients post-discharge



Kindred Hospitals partner with health plans to provide the highest quality of care, improve patient outcomes, and lower costs for their sickest and most vulnerable patient population.

Visit kindredmanagedcare.com to request a conversation about how Kindred Hospitals' level of service can help manage your critically complex patients.

Reference:

https://atiadvisory.com/long-term-acute-care-ltac-hospitals-as-part-of-the-value-based-solution-a-case-study-of-ltac-hospitals-in-las-vegas/