

LTAC Program Overview

This document outlines the process for utilization review, and quality monitoring for facilities that submit a provider agreement to HFS for participation in the Long Term Acute Care Hospital Quality Improvement Transfer Program. Five distinct processes are involved in the LTAC hospital transfer program:

- ▶ Utilization Review
- ▶ Submission of a LTAC Hospital Participation Agreement
- ▶ Readiness Review
- ▶ Patient assessment tool
- ▶ Semi-annual Compliance Monitoring

Utilization Review

As stated in HFS Informational Notice of September 23, 2010 **all** admissions to LTAC hospitals on or after October 1, 2010 will be subject to mandatory concurrent review through its quality improvement organization, eQHealth Solutions. The purpose of utilization review is to determine whether the services rendered were reasonable and medically necessary for the diagnosis and treatment. The utilization review process is discussed in detail within the Long Term Acute Care Provider Manual available on our website il.eqhs.org

LTAC Hospital Participation Agreement

Upon submission of a completed LTAC Hospital Participation Agreement, HFS will notify eQHealth. At this time a provider toolkit containing the LTAC utilization review manual and program requirements will be forwarded.

On the initial contact with the prospective LTAC hospital eQHealth will:

- ▶ Verify the 60 day staffing requirements. For providers applying for participation on October 1st, staffing must have been in place on August 1st.
- ▶ Schedule the readiness review, for providers that meet the staffing requirements. If staffing has not been in place for the full period, the readiness review cannot be scheduled.

Readiness Review:

Conducted onsite, over one business day, the readiness review is an opportunity for prospective enrollees in the Long Term Acute Care Hospital Quality Improvement Transfer Program to introduce key personnel, discuss quality and external reporting procedures. eQHealth will provide a Patient Care Assessment Tool and review the program's specifications and requirements. During the readiness review, our team will review the Web portal process and examine supporting documentation to verify compliance with the following staffing and facility measures:

- ▶ Licensed to operate in Illinois as an LTAC hospital
- ▶ Case management staffing of 0.5 FTE per 15 patients admitted
- ▶ Onsite physician coverage that is 24 hours, 7 days a week
- ▶ Onsite respiratory therapy coverage that is 24 hours, 7 days a week
- ▶ Patient satisfaction survey

Quality reporting is a significant component of the legislation. Providers will be requested to supply baseline outcome data for fiscal years 2007 through 2009 and the methodology used for calculation. This information is being collected to help establish trends and benchmarks required by the legislation and to utilize current methodology in order to reduce the burden upon the LTAC. The information collected will assist in the standardization of this process. The quality measures are:

- ▶ Central line infection
- ▶ Stage 3 and greater pressure ulcers
- ▶ Falls with and without injuries
- ▶ Catheter related urinary tract infections
- ▶ Ventilator associated pneumonia (VAP)
- ▶ MRSA
- ▶ Vancomycin resistant enterococcus (VRE)
- ▶ *C. difficile*
- ▶ Ventilator weaning rates
- ▶ Patients requiring wound care
- ▶ Patient satisfaction rates
- ▶ Unplanned transfers to short term acute care hospitals
- ▶ Medication errors
- ▶ Readmission rates
- ▶ Mortality rates

The quality measures include those outlined in the Act and those designated by HFS. Each LTAC hospital will provide baseline information on these indicators at the time of Initial Readiness Review. A subset of these measures will be provided for the ongoing Semi-Annual Compliance monitoring reviews to be held every six months.

Templates to assist providers in data reporting can be found on eQHealth's Web portal at <https://ilwebapps.eqhs.org/uploads/ltac>. Upon completion of the readiness review, an exit interview and a general discussion of the findings will take place. Submission of a detailed account of the readiness review will be submitted to HFS.

Semi-annual Compliance Monitoring

Conducted onsite, over two business days, the compliance monitoring is an opportunity for LTAC hospitals enrolled in the Long Term Acute Care Hospital Quality Improvement Transfer Program to demonstrate continued compliance with the program's specifications and requirements. Similar in scope to the readiness review, LTAC hospitals can submit data corresponding to the staffing and facility information through a secured Web portal <https://ilwebapps.eqhs.org/uploads/ltac> in advance of the onsite review.

In addition, to verifying the quality outcomes and benchmark data submitted through the secured Web portal, the eQHealth team will conduct a medical record review with the corresponding patient care assessment tool. Upon completion of the compliance review, an exit interview and a general discussion of the findings will take place. Submission of a detailed account of the review findings will be submitted to HFS.

Patient Care Assessment Tool

As stipulated in the Long Term Acute Care Hospital Quality Improvement Transfer Program, LTAC hospitals are required to complete a patient assessment tool for each patient for which an enhanced payment is requested. This patient assessment tool must be completed within seven days of discharge and can be submitted electronically to eQHealth. *At this time completion of the patient assessment tool is not required.*