



## MEDICAL CARE FACILITIES *and levels of care*

\_\_\_\_\_ *Facilities **Covered** by Medicare and Most Private Insurance* \_\_\_\_\_

### **Hospital**

Intensive Care Unit – Short term care (usually 1-14 days) for serious medical condition. 24 hour 1/1 – 1/3 RN to patient ratio and care requiring mechanical/surgical intervention. 24 hour RN and MD care.

Medical/Surgical Floor - Short term care (usually 1-14 days) for a condition that requires immediate treatment. 24 hour RN care. Patient may be dependent and require full assist with ADLs (Activities of Daily Living). 1/3 up to 1/8 RN to patient ratio.

### **Long Term Acute Care Facility (LTACH)**

Treatment of patients with serious medical conditions that require acute critical care longer than 1-14 ICU care. The average length of stay in an LTACH is approximately 30 days. The types of patients typically seen in LTACHs include: Prolonged ventilator with weaning - Ongoing dialysis for chronic renal failure - Intensive respiratory care - Multiple IV medications or transfusions - Complex wound care. 1/1 – 1/8 RN to patient ratio. Daily MD or PA care.

### **Skilled Nursing Facility (SNF)**

May be secured or unsecured facility. Must meet requirements for ongoing medical need and show weekly improvement. 24 hour licensed nursing services. 1/10 – 1/20 RN to patient ratio. Resident may be dependent and require total assistance with ADLs. Resident receive medications by RN. 10-30 day MD/PA care.

### **Home Health Agency (HH)**

Home health care agencies offer a wide range of health care services that can be given in a patient's home. If a patient meets certain medical criteria, will cover intermittent skilled nursing care, physical therapy, occupational therapy and speech-language services. A patient must have their orders services. Medicare and private insurance does not pay for 24-hour-a-day care at home, delivered meals, home maker services or help with ALDs.

### **Hospice**

Medicare pays for hospice services. Hospice can be provided to a person in their home or a nursing home. This means a patient can receive specialized visits from a hospice nurse, home health aide, chaplain, social worker, and a volunteer. These services are offered in addition to services provided by a SNF, ALF or ICF. To qualify for hospice two physicians, (the patient's attending physician and the Hospice medical director), must certify the patient is terminally ill with a six-month or less life expectancy if the disease is allowed to take its normal course. Hospice services focus on comfort care and quality of life, not the treatment of the disease.



## **MEDICAL CARE FACILITIES** *and levels of care*

\_\_\_\_\_ *Facilities **NOT Covered** By Medicare and Most Insurance* \_\_\_\_\_

### **Assisted Living Facilities (ALF) Level I and Level II**

Assisted Living Facility Type I - Resident minimal assistance with ADLs, including significant assistance with up to two ADL's. Resident must be mobile and able to evacuate facility. Must have stable medical and mental condition. Resident may receive assistance with medications or have medications administered by a nurse. Resident may receive home health services through individual contract with home health agency. Resident receives daily meals and snacks, 24-hour general monitoring, and may receive limited general nursing care.

Assisted Living Facility Type II – May be secured facility. Resident may receive full assistance with ADLs. Resident may be semi-independent and may require one person assist for transfers or to evacuate the facility. May receive assistance with medication or have medications administered by a nurse. Resident receives general nursing care but usually only 8-10 hours/ day. Receives 24 hour individualized personal and health-related services, 7 days a week. Resident may receive home health services through an individual contract with a home health agency.

### **Independent Living Communities (ILF) of (ILC)**

Resident has full choice and control over all aspects of their life. Must be independent in all aspects of daily living such as bathing, dressing, have bowel/bladder control, be mentally alert, and be able to walk. (with a walker wheel chairs may be used for short periods of time but patient must be ambulatory). Community provides a living environment (three meals a day which the resident must be able to eat without assistance. There is an extra daily charge if resident needs a meal brought to their room. A variety of services are offered depending on the community, with some offering social and recreational activities.

### **In home non-medical care or Home Health Aide**

An aide can provide services that do not require medical training, i.e. planning meals, shopping, running errands, cooking, cleaning, laundry, reminding a patient to take their medications, helping with dressing, showering, toileting and lifting. They cannot give medications to a patient.