






LTACHs vs. SNFs:

DISTINCT CARE SETTINGS

While long-term acute care hospitals (LTACHs) and skilled nursing facilities (SNFs) are often misunderstood as offering the same level of care, the unique expertise and resources available at LTACHs allow them to improve outcomes and provide efficient care for medically complex patients. Below are 5 key differences between LTACH and SNF settings that impact patient outcomes.

LTACHs		SNFs
On-site physician visits at least once per day; sub-specialists available on location	 Physicians	On-site physician visits at least once every 30 days for the first 90 days; sub-specialists seen off-site
Approximately 1-6 patients per nurse; ratios lower in critical care units. High-acuity care provided by BLS- and ACLS-certified nurses with advanced critical care training.	 Nursing	Approximately 10-40 patients per nurse
24/7 respiratory therapy in-house in every location	 Respiratory Therapy	Limited respiratory therapy in select locations
On-site services such as telemetry, radiology, pharmacy, lab, and dialysis	 Services	Radiology, pharmacy, lab, and dialysis services accessible, but not on-site
CMS-compliant infection prevention standards with hospital-level air ventilation systems and negative pressure isolation rooms	 Infection Prevention	Residential-level air ventilation systems

HOW KINDRED HOSPITALS CAN HELP

Kindred Hospitals, now the nation's largest provider of LTACH care, has provided quality long-term acute care for 30 years.

Learn more about how Kindred Hospitals improve outcomes for medically complex patients at [kindredmanagedcare.com](https://www.kindredmanagedcare.com).