

## Respiratory Therapist as Cardiopulmonary Disease Managers\*

**\*A disease manager can encompass a case manager or care manager.**

**Prologue:** A disease or care manager is defined as a healthcare provider who helps a patient or client develop a plan that coordinates and integrates the support services that the patient/client needs to optimize the healthcare and psychosocial possible goals and outcomes.<sup>1</sup> Care managers serve as advocates for the patient and promote high-quality care and cost-effective outcomes.

The American Association for Respiratory Care (AARC) promotes respiratory therapists as cardiopulmonary disease or care managers for the value and expertise that a respiratory therapist brings to healthcare teams caring for patients who are experiencing cardiopulmonary diseases. Respiratory therapists are uniquely qualified to serve as cardiopulmonary care managers because of their comprehensive knowledge of cardiopulmonary anatomy, physiology, and pathophysiology and their expertise in the application of respiratory therapeutics and procedures.

As a cardiopulmonary care manager, the respiratory therapist collaborates with various health care providers, including physicians, advanced practice providers, pharmacists, social workers, nurses, home medical equipment providers, and other service providers to facilitate the effective delivery of respiratory care services to meet a patient's complex health needs. This is accomplished through evaluating, assessing, and planning a patient's care as well as supporting their transition across all care venues in partnership with our providers in a safe and timely manner.

The cardiopulmonary care manager is responsible for:

- Providing comprehensive education to the patient/client and caregivers specific to their disease.
- Optimizing therapeutic interventions to align them with treatment goals and transitions from acute-care to post-acute, or home care.
- Evaluating and identifying home respiratory medical equipment that will support the most efficacious and cost-effective clinical outcomes.
- Collaborating with other clinicians and agencies (nursing case management, social work, pharmacies, third-party payers, home medical equipment providers, etc.) to define a safe transition from hospital to primary care provider, post-acute care, or long-term care.
- Providing follow-up in the outpatient setting, directly or through the use of telehealth (remote evaluation technologies)<sup>2</sup>.
- Serving as a clinical expert in payer-based settings for workers' compensation and utilization review.

- Providing evidence-based and comprehensive education to patients and caregiver(s) regarding optimal disease management.
- Providing resources and continuing opportunities for training and education in the post-acute and home care settings related to the use of medications, equipment, and other therapies to enhance their quality of life.

Opportunities to integrate an RT as a cardiopulmonary disease or care managers include providers identifying when a patient may benefit from escalating/de-escalating therapy, provide comprehensive education specific to the disease, device teaching and ensure a follow-up plan, arrange for home durable medical equipment, arrange ongoing support through a home visit program, support referring to a pulmonary rehabilitation facility and/or specialist, and support transitions of care back to the primary provider.

The above opportunities exist in the following areas:

- Emergency department
- Acute care setting
- Ambulatory setting
- Post-acute setting

The American Association for Respiratory Care (AARC) recommends that the requisite qualifications for a respiratory therapist to practice as a cardiopulmonary disease or care manager include:

1. The completion of an accredited respiratory care educational program.
2. Acquiring the Registered Respiratory Therapist (RRT) credential from the National Board for Respiratory Care (NBRC).
3. A state license (where required) to practice as a Respiratory Therapist.
4. A baccalaureate degree in biological, health science, or respiratory therapy.
5. Competent and proficient working experience in a clinical setting.

## References

1. Giardino AP, De Jesus O. Case Management. StatPearls [Internet]. NIH National Library of Medicine. August 22, 2022. <https://www.ncbi.nlm.nih.gov/books/NBK562214/>
2. AARC Position Statement – Telehealth and Respiratory Therapy 2023

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