

CASESTUDY

Avery Manor uses Biodes Balance System to attract Medicare Referrals to its New Orthopedic Rehabilitation Program

Avery Manor



BIODEX
Biodes Medical Systems, Inc.

20 Ramsey Road, Shirley, New York, 11967-4704, Tel: 800-224-6339 (Int'l 631-924-9000), Fax: 631-924-9338, Email: info@biodes.com, www.biodes.com

Copyright © 2013



Avery Manor is a 142-bed, Joint Commission-accredited skilled nursing facility focused on providing short-term rehabilitation, including a specialized orthopedic program. Located in Needham, MA, Avery has a 3,800-square foot fitness center with state-of-the-art equipment for physical, occupational and respiratory therapy services offered 7 days a week.



Resident gets balance therapy on the Biodes Balance System

Q: How is Avery Manor enhancing its services to meet the needs of its residents and short-term rehab patients?

Erica Hambley, OTRL Rehabilitation Manager: I've been employed by Kindred for almost four years, and was appointed rehabilitation manager in May 2007.

Over the past two years, we've significantly expanded our rehab services. When I arrived, we had one full-time physical therapist and two full-time occupational therapists. Now we have four physical therapists, four occupational therapists, a physical therapy assistant, and two occupational therapy assistants and two speech therapists. And we expect our capabilities will continue to grow.

Q: What percentage of your patients are long-term vs. short-term rehab?

Hambley: About 75-80% of our caseload is short-term rehab and 20- 25% of our caseload is our long-term residents.

Q: What are some of the major diagnoses of your patients?

Hambley: Many of our patients have different pulmonary diagnoses, such as pneumonia and COPD exacerbation. We have four patients right now who are recovering from a stroke. Many of our patients have suffered falls at home or in the community, and they come here for strengthening and balance training, so they can safely return to the community.

Recently, we have focused on development of an orthopedic program, so we're working to have that be our niche. We'll continue to see our current range of patients, but we're also going to develop a true specialization in orthopedic rehab.

Q: Where do most of your short-term referrals come from?

Hambley: Our two biggest referral sources are Beth Israel Deaconess Hospital-Needham and Newton-Wellesley Hospital.

We have liaisons out in the field who, you know they're searching for patients who are at these hospitals and are in need of rehab, and then the case managers from the hospitals communicate with them mostly in order to get us referrals and admissions.

Q: What is the typical rehab length of stay here at Avery Manor?

Hambley: Our average length of stay is close to four weeks, probably 28 to 35 days. However, we also have people who are here less than five days, and some a lot longer. We have one patient who's been here a year and a half working on returning to the community. It's been a long road for her, but she's making progress toward her goal.

Q: What is the source of reimbursement for your rehab patients?

Hambley: Among our short-term patients, probably 80% or more are Medicare.

In our follow-up, we can use the printouts from the Balance System to show objective results - in effect, "you referred Mrs. Jones to us, the family accepted our offer, and the patient has done very well, and here's the outcome."

Q: How did you come to select the Biodex Balance System for Avery Manor?

Hambley: We've targeted orthopedics rehab as our new focus, and so, over the past four months, we've been researching and contacting different companies to come out and do demonstrations for us. We've been evaluating equipment we believe will give us a competitive edge over other facilities, and would be most useful in our population.

Q: What medical oversight do you have for your rehabilitation operations at Avery?

Hambley: Recently, Avery Manor signed Dr. Sean Rockett, an orthopedic surgeon who practices at MetroWest Newton-Wellesley, to direct our new orthopedics rehab focus. Dr. Rockett is an assistant clinical professor at Tufts University School of Medicine, specializing in shoulder, hip and knee disorders. He comes to Avery both to monitor his own patients and to evaluate long-term patients who might have some osteoarthritis that our nurses may believe may be limiting their physical ability. He also is available to evaluate our short-term rehab residents who came in with a non-orthopedic diagnosis, but who, upon exercising, we discover may have an orthopedic condition that's a barrier to increased independence or decreased pain.

In addition to his medical services, he educates our staff and management about different orthopedic conditions and the latest advances in joint replacements. In June, he'll be speaking at a community meeting on the subject of "what's new in knee and hip replacement."

Dr. Rockett keeps Avery Manor reservations brochures in his office. His patients often call us ahead of time to say, "we're going into surgery on this date, we expect on this day we're going to be discharged from the hospital and need to stay somewhere" for however long, so we can reserve a bed for them.

Q: Has Dr. Rockett evaluated the Balance System?

Hambley: Yes – shortly after it was installed, he got on it for a demonstration.

We like to demonstrate the Balance System. Recently we had visitors from our corporate office in Louisville. One of our vice presidents got on the Balance System and challenged the other executives with him to run through the evaluation and rehabilitation protocols. Clearly, they were having a lot of fun with it, but more than that, it was very helpful for them to see for themselves the capabilities of the systems they get asked to authorize. It answers the question, "Why does she think she needs this?"

Q: What are you currently doing to encourage the referral of prospective rehab patients to Avery Manor?

Deborah Kerr, Director of Admissions: Like many facilities, we have our liaisons in several area hospitals, trying to identify prospective rehab candidates and to work with discharge planners to gain referrals. I keep our liaisons updated on what's new at Avery, what the bed availability is in regards to rehab rooms, long-term care, Alzheimer's, and precautionary availability. At Avery, we try and continue to do a lot for our community like sponsoring senior dinners and educational events.

When we have a chance, I try and meet with case managers, social workers, therapist and other hospital staff to educate them on Avery Manor and all the rehab has to offer. I will bring in a slide show and large pictures that show off our bright and beautiful fitness center, the BIODEX Balance system, our other state of the art rehab equipment, as well as the spacious bed rooms and lounge areas. And when anyone for the hospital is available, I invite them to Avery to have a snack and tour of our facility.

A few of our referring hospitals generate their referrals through a variety of e-discharges. By sending e-discharges, it has helped the hospitals cut back on the traffic on their units, as well as the number of people who are viewing a patient's medical records, which is HIPAA concern throughout the country. The e-discharge is in the form of a multi-tabbed document that enables facilities to see the patient's history, medication notes, nursing notes etc. In response, we can make a "clinical bid" on the patient – we can accept, we can clinically accept but note we don't have a bed right away, we can deny, or we can request more information. By receiving the e-discharge information, I am then allowed to call and speak with the families of the patient so I can introduce them to Avery, educate them about their loved one's insurance and rehab, as well as invite them in to tour Avery. The hospital discharge planner will let the family know which facilities have made a bed offer, and then they all can make their decision of which facility to go to.

Our stroke patient Jorge Aviles is an example of how the system can work. While he was still in acute care at Spaulding Hospital in Boston, his family toured many places, including ours. I met with his wife and son, and listened carefully - his wife knew all the details of his medical history so well she could have written his case-offering document! I kept in touch with the family and was looking out for his name via 4-Next (the Faulkner Hospitals e-discharge system). And so, when I got the referral that he was ready, we were able to clinically approve immediately.

Q: How are you responding to the new limitations on referral solicitation?

Kerr: We do a very good job in communicating back to case managers the outcome of their referral and our efforts. In our follow-up, we can use the printouts from the Balance System to show objective results – in effect, “you referred Mrs. Jones to us, the family accepted our offer, and the patient has done very well, and here’s the outcome.”

In discharge planning, we want the case managers to like us, but we want to impress on them that we get great outcomes. We want to make sure they know that I’m here to make their job easier. But most importantly, we want them to know that their patients received the best care.

We’ve had case managers come and actually see their patients work out. When they come, we always show them the Balance System. That machine has “wow factor.” We also demonstrate it for families of prospective patients when they’re touring.

Avery Manor & Kindred Healthcare

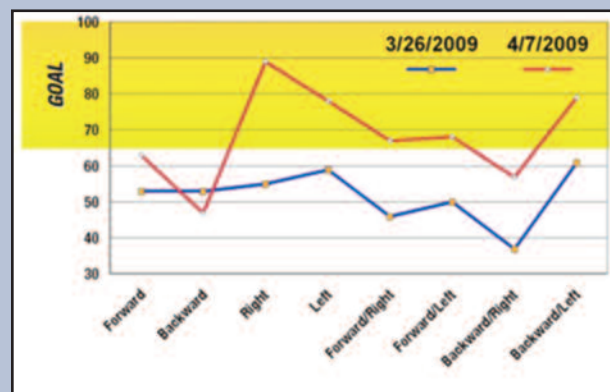
Avery Manor is an affiliate of Kindred Healthcare, Inc. (NYSE:KND), the largest post-acute provider in the U.S. Through its subsidiaries, Kindred provides healthcare services in 655 locations, including 82 long-term acute care hospitals, 228 skilled nursing centers and 345 non-affiliated facilities served by Kindred’s contract rehabilitation services business, Peoplefirst.

Kindred was named by Fortune magazine as the “most admired company” in that publication’s 2009 category of “Health Care: Medical Facilities.” Kindred was ranked first in people management, use of corporate assets, social responsibility, and financial soundness.

Case Report:

63 year old stroke patient shows rapid improvement in balance after two weeks of Balance System therapy

Stroke patient Jorge Aviles came to Avery Manor from Mexico City following a major stroke that severely impacted his balance. Avery Manor therapists, using the Biodex Balance System, significantly enhanced Mr. Aviles’ performance on his “Limits of Stability” test. Equally impressive: He cut the time to perform the test from 76 seconds to 56 seconds.



For more information on Biodex Physical Medicine & Rehabilitation equipment, please contact:

Don Gronachan
Director, Physical Medicine Sales
(631) 924-9000, x2275
Email: dgronachan@biodex.com

BIODEX

Biodex Medical Systems, Inc.

20 Ramsey Road, Shirley, New York, 11967-4704, Tel: 800-224-6339 (Int'l 631-924-9000), Fax: 631-924-9338, Email: info@biodex.com, www.biodex.com