



Physiatrists: Optimizing and Expediting PAC

By Lauren Evans, LNHA, Director of Operations at Integrated Rehab Consultants

Despite changes in the healthcare landscape, we can be sure of one thing: Payors will always want quality care at a lower cost.

With Medicare essentially stamping “declined” on more and more attempts to discharge post-acute patients to inpatient rehab facility care, skilled nursing facilities have become the preferred setting.



And, here is the best-kept secret: SNFs that incorporate physiatrists (rehabilitation physicians) into treatment planning are uniquely well-suited to care for these patients.

As they move through the care experience, PAC patients' lives are touched by many clinicians, each with a snapshot of a patient's life, but not the entire picture. Enter the physiatrist: A physician who understands a patient's health and activity level before admission, the short-term rehab needed, and the functional goals to be met for discharge. They know patients better than anyone else because they see them (on average) two to three times per week -- something that translates into shorter length of stay, fewer falls, more appropriate pain management, better patient satisfaction and a successful, timely discharge, among other things.

A physiatrist's ultimate goal is to optimize a patient's restoration of physical function and meet their discharge criteria on time.

Performing this care in a SNF makes payors happy too. According to MedPAC, the average stroke patient stay in an IRF costs \$34,196 as opposed to \$8,905 in a SNF.

And then there is re-admission. No one wants to see a patient back in the hospital – most especially providers and payors.

“Because physiatrists interact with patients more frequently, they are more likely to detect any mobility or functional problems that could land them back in the hospital,” explains Steve Gnatz, M.D., Chief Medical Officer, Integrated Rehab Consultants.

The “eyes” of insurers are alert to facilities that are able to provide a safe, shorter length of stay. And when they review a SNF with physiatrists on board, they see a facility able to safely move patients through the PAC process in an appropriate timeframe.

Ryan Fischer, director of Managed Care and Business Development at Tutoresa Senior Living & Healthcare, notes, “With physiatrists as part of our team, we have increased our clinical capabilities, decreased patients' pain levels, and lowered the average length of stay dramatically by facilitating the restoration of function more quickly -- all in an effort to return patients home.”

At one Tutera-run SNF in the Kansas City area, the average Medicare A patient length of stay dropped from 32 to 23 days after it incorporated a physiatrist on its care team. The advantage to a facility that lowers length of stay is the ability to admit more short term rehab patients (with higher therapy needs) over a given period of time. The same facility lowered its hospital readmission rate from 27% to 24%.

The handwriting is on the wall. With the number of people age 65-plus expected to more than double by 2050, much of the medical care for aging adults is going to take place outside of the traditional IRF setting and into SNFs.

According to the Medpac 2015 report to Congress, Medicare expenditures for PAC services doubled from 2000-2010 (\$29 billion to \$58 billion). Contrast this with Medicare expenditures for PAC services from 2010-2013, which were flat (1%).

Engaging physiatrists to coordinate care in SNFs has been proven to reduce costs, reduce length of stay, and elevate the care experience for patients and families alike.

Lauren Evans, LNHA, is the Director of Operations and Business Development at Integrated Rehab Consultants. She has been in the healthcare industry since 2008, formerly serving as Director of Business Development and Nursing Home Administrator at Alden Management and Marketing Specialist at Advocate Healthcare.

The original article published under guest columns on August 10, 2017 can be found at:

<http://www.mcknights.com/guest-columns/physiatrists-optimizing-and-expediting-pac/article/681015/?DCMP=EMC->

[MLT_DailyUpdate_20170811&email_hash=127187C78ED2FD9546703F38660CC7B3&spMailingID=17854864&spUserID=MjMzMDE0Mzk2NAS2&spJobID=1080668708&spReportId=MTA4MDY2ODcwOAS2](http://www.mcknights.com/guest-columns/physiatrists-optimizing-and-expediting-pac/article/681015/?DCMP=EMC-MLT_DailyUpdate_20170811&email_hash=127187C78ED2FD9546703F38660CC7B3&spMailingID=17854864&spUserID=MjMzMDE0Mzk2NAS2&spJobID=1080668708&spReportId=MTA4MDY2ODcwOAS2)