

THE POST

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A quarterly newsletter for the staff and friends of Post Acute Medical



A message from our President and CEO

Many of you have asked me about the recent closing of PAM Specialty Hospital of Corpus Christi South, so I thought I would take this opportunity to address your questions about this and other closures. This was a difficult, but necessary decision for our company. Changes in the regulatory environment, that I have shared in past issues of *The Post*, basically forced our hand. Both the types of patients that long-term acute care hospitals (LTACHs) can care for and the reimbursement we can expect have changed drastically.

The reality is that Post Acute Medical is not alone in feeling the impact of these changes. Many hospital companies have been similarly affected, often due to the strength or size of the referring acute care hospital, community demographics, market competition and, in some cases, a perceived bias toward freestanding hospitals versus hospitals within hospitals.

As a result of the above, the industry has seen roughly 30% of all LTACHs close since the regulations took effect, including hospitals owned by our close competitors.

For us, the decision to close any hospital, including Corpus Christi, is made even harder by the resulting loss of jobs. We are proud, however, that we continued to employ all staff and pay them through the 60-day notice period required by the WARN Act. We also offered impacted employees the opportunity to move throughout the company, where possible.

It is important to understand that despite the closing, Post Acute Medical continues to stand on firm ground. Our diversified operations, including those under the umbrella of Traverse Health System, will ensure our continued growth and strengthen the company in the face of continuing market changes, including another



round of reimbursement cuts that will go into effect in October.

While the possibility exists that more hospitals will close as a result of the impending changes, we continue to look for ways to minimize the impact, such as exploring alternative uses for the LTACH beds. We also are working closely with other post-acute providers to influence the development of legislation that would reverse some of the changes to reimbursement that CMS has made.

Although it is difficult to foresee the long-term impact to the industry, we are committed to helping shape a positive outcome for everyone involved and ensuring we continue to provide high quality care and an outstanding patient experience.

A handwritten signature in blue ink that reads "Anthony F. Misitano".

Anthony Misitano
President & CEO

Resource CEOs ensure stability during transitions

Knowing that the loss of a hospital CEO, whether planned or unexpected, can create a sense of uncertainty for staff members, Post Acute Medical (PAM) created the role of resource CEO as a way to maintain continuity during these transitions. With two resource CEOs on board since last fall, that expectation has proven accurate.

“When the CEO transitioned out of the building, to have the resource CEO in place really brought a sense of stability to the building,” explains Gregory Lessard, who was recently promoted to CEO of PAM Specialty Hospital of Texarkana. “The staff and leadership team knew we had a change but having the home office invest this resource in our building to keep the status quo going had a very positive impact.”

Working with Lessard and his staff at different times throughout his transition were Dale Mulder and Jim Cohick. While both are new resource CEOs, only Cohick is new to PAM. Mulder had been CEO of PAM Rehabilitation Hospital of Clear Lake before transitioning to resource CEO for the Texas market in September 2018. Although his intention had been to retire after 51 years in hospital operations, he accepted the new challenge and hasn’t looked back.

“As a resource CEO in Texarkana, I spent a lot of my time preparing Greg to be CEO and working with department directors to process the work they do,” he explains, adding that he didn’t expect to enjoy it as much as he does. “They are tapping into my experience and history. I love this kind of work – just diving in and following it from beginning to end to make sure it is the way it needs to be.”

Cohick also brings a great deal of executive leadership experience to PAM that he gained as CEO for a long-term acute care hospital and multiple pediatric specialty hospitals both in the United States and abroad. It was stepping into those unfamiliar environments and cultures that has helped him understand the best way to approach each new assignment.

“My background overseas involved the convergence of a lot of different personalities and different cultures. I needed to understand quickly what was important to people, especially when coming in at a poignant time,” he says. “Here I have the advantage of working with our divisional presidents and coming alongside them to assure everybody

that we are going forward, to give as much information as we can and to give confidence and calmness a chance to prevail.”

For Lessard, who served as director of case management, house supervisor and chief nursing officer before transitioning to CEO, the biggest benefit of the resource CEOs is working with them side by side.

“From an educational standpoint, having someone with their experience in the building to work closely with and bounce ideas off of was a real confidence booster,” he says. “To witness their interactions, how they carry themselves, how they approach meetings, all the things they gained over the years, is so much easier learned in person than over the phone.”

For Mulder, the job has made it possible for him to take a step back and look at a particular hospital’s operations with an outsider’s view.

“It is left to me to assess the situation, determine what needs done and get it done, all while working with the division president’s support,” he says. “I have a pretty good idea how the work should flow, how the different services are related to each other and what the results are of what they do. When I leave a particular hospital, I want it to be in a much better position to function profitably than it ever has in the past.”

According to Cohick, they are given a baton and must work closely with division presidents, who understand the history and strategic direction, to pass it on.

“I haven’t been asked to come in and change the place in six weeks,” he says. “I bring to bear my perception, but I have to be a leader with regard to what I can do that doesn’t somehow preclude someone new from coming in and hitting the ground running. I view my time as trying to create a bridge that allows the next person to be successful.”



Dale Mulder

Jim Cohick



Brittany Misitano named associate general counsel

Brittany Misitano has joined Post Acute Medical as associate general counsel — transactions and operations.

Misitano, who previously served PAM as a legal department intern, graduated from Widener University Commonwealth Law School in December and passed the bar exam in February. She points to her three-month experience in 2017 as a White House intern for the Office of Cabinet Affairs as a defining point in her education.

“The biggest lesson I learned was gaining the ability to think on my feet,” says Misitano, who says the internship pushed her outside of her comfort zone. “I had the chance to speak with former White House counsel Don McGahn. I also had a chance to brief the attorney



Brittany Misitano

general. It was nerve wracking, but after that, I’m not afraid to do anything.”

Although Misitano has worked for PAM previously, she anticipates gaining a great deal of industry knowledge as a full-time member of the legal team.

“I’m looking forward to learning from the entire executive team,” she says. “I’m excited to see every aspects of the business, not just legal.”

In addition to her law degree, Misitano earned a bachelor’s degree in broadcast journalism with a minor in health policy and administration from Penn State University. During the summer of 2017, she clerked for Judge Anne E. Covey of the Commonwealth Court of Pennsylvania.

Leading the Way: Troy Lee, CEO

Recognized by Post Acute Medical (PAM) leadership for his commitment to get the job done, Troy Lee has found success on his road to hospital leadership.

In April 2017, Lee joined the staff of PAM Rehabilitation Hospital of Tulsa as the patient assessment coordinator. Just one month after the hospital opened, it represented a challenging environment even for long-term employees, according to Jerry Elenbaas, division president.

“Turnover is not uncommon during the start-up phase,” he says, explaining that it is a time of high tension, high stress and high pressure. “Troy not only stuck it out through all of that but was able to help our building on all fronts. Although long hours are common to the job, he also spent a lot of time training staff at a time when we had loads of nursing turnover.”

It was while he was in that role that Lee realized he might have a long-term future with the company.

“I discovered that Post Acute Medical had a culture that promoted professional and career growth,” he says. “Then they provided opportunities as they arose for me to advance professionally.”

Just four months later, he took on the role of director of rehabilitation services for the hospital, where he spent a lot of time managing staff in a department that had not been tightly managed before, according to Elenbaas.



Troy Lee

“What Troy exemplifies in a large way is commitment,” he says. “He is not afraid to work long hours. He exemplifies the kind of employee the core of our business is built on — they are not afraid of putting in the time to get things done and to take on some risk.”

One year later, Lee transferred to PAM Specialty Hospital of Lufkin as director of operations, where he worked with the host hospital managing their inpatient rehabilitation unit.

“At that point, I identified that my ultimate goal was to bring my skills and knowledge to the role of CEO,” he

explains. “There were several people that took me under their wings and helped me continue to develop my skillset and knowledge, which then allowed me to be a viable candidate for CEO of Round Rock.”

Just six months later, Lee accepted the role of CEO for PAM Rehabilitation Hospital of Round Rock, having demonstrated a willingness to do what is necessary to be successful.

“Whether moving, jumping into an adverse situation or picking up dual roles, Troy has put in the time to get the job done. He is not afraid to dedicate his time, energy and thoughts,” Elenbaas says. “He did everything we asked, and we rewarded him with the role of CEO because of that commitment.”



Understanding the hospital admissions department

Often referred to as the air-traffic controllers of patient referrals, hospital admissions staff are responsible for communicating with the outside world, so the inside world is fully prepared for every patient's arrival.

"All of our work is done behind the scenes in collaboration with clinical navigators who see the patients out in the field," explains Kari Croom, Post Acute Medical's (PAM) corporate director of admissions, adding that PAM hospitals, whether inpatient rehabilitation or long-term acute care, have either a hospital-specific or centralized admissions office. "The biggest misconception of what we do is that people tend to equate us with registration, when, in fact, our admissions offices are much more detail oriented. We are involved with referral tracking, end-of-month reports and doing everything necessary to obtain insurance prior authorization."

One of the key differences that many people don't realize is that, in PAM hospitals, there is no emergency room where patients present to the hospital for admission.

"Everything comes from a referral," she says. "Part

of admissions is understanding the criteria for LTACH and rehab and making sure we are in compliance."

Changing criteria on the LTACH side has greatly changed the role of the admissions department, according to Croom.

"A key element of admissions is accuracy," she says, adding that they must follow up with referring hospitals to ensure patients are registered and treated under the appropriate level of care. "We are there to ensure that all patient demographic information is entered correctly, so we are reimbursed accurately."

As a result, it is a fast-paced, stressful environment for staff members.

"Multi-tasking is huge, making the old analogy of the spinning plate very appropriate," Croom says. "This is not a job where you start and finish a referral and move on to the next. It is a lot of back and forth and knowing where you are in the process."

Despite that, Croom says that turnover in the department is not high.

"I've been in my role since 2014, and I have the majority of the same folks here," she says. "I value each and every member of the PAM admissions team."



Open house featuring EksoGT draws key referral sources

An April open house featuring the first robotic exoskeleton to be FDA cleared for use with stroke and spinal cord injury patients, proved to be the big draw Warm Springs Rehabilitation Hospital of San Antonio expected.

The afternoon event attracted physicians, case managers, social workers and therapists who were interested to learn how the EksoGT™ might benefit their patients, according to Misty Campbell, director of rehabilitation.

“We had quite a few people come and experience our multiple presentations and patient case studies,” Campbell says. “Dr. Mark Fredrickson, who is medical director of our program, spoke about the history of spinal cord injuries and some of the new things happening in the field, including the EksoGT.”

Campbell shared the history of the wearable robotic exoskeleton with those in attendance and explained how it is used now, as compared to when it was first developed. Once she was done, one of the hospital’s three therapists, who are certified to use the device, demonstrated its use with a patient.

“The therapist had the patient walk without the device, walk with the device and then walk again without the device so everyone could see the difference it makes in a patient’s gait,” Campbell says, adding that SmartAssist™ software makes it possible to adjust settings based on a patient’s weaknesses and tailor each individual rehab session. “The cutting-edge technology helps the patient get back on his or her feet sooner to re-learn correct step patterns, weight shifting and posture.”

Hospital helps prepare future clinicians

Understanding the importance of giving back to the industry by helping to educate future clinicians, PAM Specialty Hospital of Texarkana now hosts two student-focused programs.

After spending a year in development, Rosalyn Henry, DPT, director of rehabilitation services, rolled out a clinical education program for physical, occupational and speech therapy students in January of this year.

Because Texarkana is not located near any physical therapy schools, Henry says the hospital provides an opportunity for students who are having a hard time finding a placement near their college.

“Some universities can’t always accommodate all their students,” she explains, adding that her current student is from California. “Also, a lot of hospitals are getting away from hosting students due to the liability, distractions and other reasons, making it hard for students to complete coursework.”

Although the program is in its infancy, she has had three students since its start.

“They learn great stuff in school and practice on each other. Here they get to do transfers and interventions on actual patients, who have actual pathologies and need treatment,” she



From left are Rosalyn Henry, DPT, director of rehabilitation services; Alex Martinez, student physical therapist; LaKisha James, rehabilitation technician; Kyle Duncan, student physical therapist assistant; Ashley Jester, certified occupational therapy assistant; and Lori Malone, physical therapist assistant.

says. “The goal is to have guidance in the beginning portions, but to make them as autonomous as possible by the end of their rotation. It is an opportunity to help cultivate the future and let them get confident with their skills and knowledge.”

Due to the hospital’s small size, she is limited to no more than two students at a time.

“It is a balancing act,” she says. “We want the students, but I need to make sure my full-time therapists are able to get their hours for the week.”

Henry believes the program is a great recruitment tool since most student therapists are unfamiliar with the long-term acute care hospital (LTACH) environment.

“A lot of therapists aren’t aware of

what an LTACH can do or they have a misconception of what can be done to get our patients well,” she says. “My experience as a student changed my mindset from sports medicine. It is what made me an acute care and LTACH therapist.”

Also learning about the role LTACH hospitals play in the continuum of care are nursing students who participate in the hospital’s preceptor program.

“Most of the students didn’t realize how sick our patients are. They thought we were a step above a nursing home,” says Amy Roberts, RN, chief nursing officer. “When they see the therapy, medications and all we do to get our patients back to their base line, they are impressed.”

Roberts rebooted the preceptor program this year after a three-year hiatus as a way to invest in the future of nursing. Coordinated with the local community college, the program brings students to the PAM hospital where they are assigned to a nurse who they follow throughout the day.

“We do a lot of procedures on the floor. The students can start IVs, put down NG tubes, insert or remove catheters — things they don’t always get to do in a hospital,” says Roberts. “Students interested in critical care areas are excited about that and the continuum of care that happens after the ICU.”



From left are Rosalyn Henry, DPT, director of rehabilitation services; Sibyl Roberson, speech language pathologist; Ashley Jester, certified occupational therapy assistant; Blake Williams, student physical therapist; Lori Malone, physical therapist assistant; and LaKisha James, rehabilitation technician.

Interactive Parkinson's event draws large crowd

PAM Rehabilitation Hospital of Beaumont hosted a packed house during Parkinson's Awareness month for an interactive event that highlighted current treatments for the disease.

The headliner was Dr. Elias Ntsoane, a neurologist and member of the hospital's board, who shared his expertise on the medical management of Parkinson's and what patients and family members can expect.

Participants also enjoyed a joint presentation by Eduardo Moreno, a physical therapist, and Chelsea Lyles, a speech therapist, who are both certified in Lee Silverman Voice Treatment Big and Loud therapy, a specialized program that benefits Parkinson's patients. In addition to video case presentations, several of their patients shared their personal experiences with the Big and Loud program.

In addition to members of three area Parkinson's support groups, current and former patients were on hand to enjoy educational games and door prizes.



Dr. Elias Ntsoane, a neurologist and member of the hospital's board, was one of the featured speakers during PAM Rehabilitation Hospital of Beaumont's recent interactive Parkinson's event that highlighted current treatments for the disease.



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Patient name: _____
Address: _____
Weight: _____
Statistics _____
Diagnosis
Parkinson's
disease



COMPLIANCE CORNER

Nurses' Code of Ethics vs. PAM's Compliance Code of Conduct

In May our hospitals celebrated National Nurses' Week, which is dedicated to acknowledging and honoring nurses for all of their hard work and dedication. This celebratory week kicks off May 6 on National Nurses' Day and ends on May 12, which is Florence Nightingale's birthday.

Nightingale, who lived from 1820 to 1910, is recognized as the founder of modern nursing. She gained prominence during the Crimean War while serving as a manager and trainer of nurses responsible for the care of wounded soldiers. She also gained recognition as "the Lady with the Lamp" because she made rounds of wounded soldiers at night. In recognition of her pioneering work in nursing, the Nightingale Pledge is taken by new nurses at their pinning or graduation ceremonies.

A significant part of the Nightingale Pledge is that the nurse will "adhere to the code of ethics of the nursing profession." The Code of Ethics for Nurses is the statement of the ethical values, obligations, duties and professional ideals of nurses individually and collectively. The code also serves as the profession's non-negotiable ethical standard and is an expression of nursing's own understanding of its commitment to society.

Following are some similarities between the Nurses' Code of Ethics and PAM's Compliance Code of Conduct:

- **Nurses' Code:** The nurse practices with **compassion** and **respect** for the inherent **dignity**, worth and unique attributes of every person.
PAM's Code: The words **respect**, **compassion** and **dignity** are found in our Common Values.
- **Nurses' Code:** The nurse's primary **commitment** is to the **patient**, whether an individual, family, group, **community** or population.
PAM's Code: PAM's Mission states that PAM and its subsidiaries are **committed** to providing high quality **patient** care...to be the most trusted source for post-acute services in every **community** it serves.

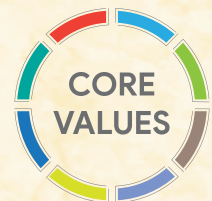
- **Nurses' Code:** The nurse promotes, advocates for and protects the rights, health and safety of the patient. The Interpretive Statements to the Nurses' Code explains that the rights of a patient include the health information associated with the patient. The nurse has a duty to maintain confidentiality of all patient information, both personal and clinical in the work setting and off duty in all venues, including social media or any other means of communication.
PAM's Code: PAM maintains the privacy and confidentiality of all sensitive information, which includes patient information. Improper use or disclosure of confidential information could violate legal and ethical obligations.

- **Nurses' Code:** The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence and continue personal and professional growth.
PAM's Code: PAM is committed to following the highest standards of ethical, honest and fair conduct; PAM expects its employees to act in a manner consistent with these standards.

- **Nurses' Code:** Nurses in all roles must identify and avoid conflicts of interest. Any perceived or actual conflict of interest should be disclosed.
PAM's Code: Employees shall avoid any activity that may involve conflicts of interest. Employees are required to report any actual or potential conflict of interest situation.

The similarities between PAM's Code of Conduct and the Nurses' Code of Ethics show a shared commitment by PAM and its nurses to exhibit the highest level of ethical standards while providing high quality patient care and outstanding customer service.

Thank you to all PAM employees, including our valuable nurses, for your continuing commitment to ethics and compliance.



If you have any other questions or would like additional information, please contact Anmarie Gover, Esq., CCEP, corporate compliance officer, at agover@postacute.com or 717.317.9303. COMPLIANCE HOTLINE: 833.246.1088