

Date: 06/24/11

Initial Report

Account:

Contact:

Reference #:

Patient:

ID#/Group:

History: This is a 57 year old female who fell at the airport and fractured the distal tibia and fibula on 4/29/11. Prior to this fall, she was treated one week earlier for an infection of the toe. She fell while ambulating in a post operative boot. She was taken to Gulf Coast Medical Center where she underwent an open reduction internal fixation of the fracture on 4/29/11 as an outpatient status. Following surgery she was admitted as an inpatient on 4/30/11 and discharged to home on 5/1/11. The patient returned to Wisconsin and was admitted to Franciscan Skemp Healthcare from 5/3-7/11 with confusion, delirium and anemia due to dehydration. Upon discharge to home, home care services were ordered through Black River Falls Memorial Homecare. A skilled nursing visit on 5/9/11 was done. Seven home PT visits were recommended from 5/9-6/2, and three home OT visits from 5/12-27/11. Before these services were complete, the patient was readmitted to the Gundersen Lutheran Medical Center with osteomyelitis of the right leg on 5/24/11. She underwent surgery on 5/25/11 for a surgical debridement and removal of hardware, placement of an external fixator device and placement of a Wound VAC. She returned to surgery on 5/27 and 5/29/11 for debridement of the wound. On 6/3/11, she underwent a muscle flap wound closure. Following this surgery, she was on strict bedrest until 6/10/11 when therapy began to work with her on transferring from the bed to a chair. The graft had taken 100%. The patient was discharged to home on 6/13/11.

Home care services were arranged through Black River Falls Memorial Homecare beginning 6/13/11. Skilled nursing visits were provided 6/13, 6/14, 6/15, 6/17 and then 3 times per week (M-W-F) to perform the complicated dressing change to the leg. On Mondays, the PICC line dressing is changed; on Wednesdays, lab work is drawn.

Home IV antibiotics and supplies are being provided by Chartwell. The patient is receiving Cefepime 2gm IV push twice daily, with a tentative stop date on 7/10/11. The patient's son has been instructed in the administration of the IV push medication.

Currently the patient is non-weight bearing on the right leg; she needs to keep the leg elevated at the hip level at all times, even when transferring. She has an external fixator device on the lower right leg. On the thigh of the right leg is a transparent dressing that covers the donor site for the tissue that was grafted to the lower leg. She requires the assistance of one person to transfer. When she is in the wheelchair, she can move the chair independently. In addition, she has a small pressure ulcer (stage I) on the left

Achilles tendon and a reddened left heel which is monitored by the home care nurse. The patient is diabetic and checks her blood sugars four times per day.

DME was rented from Apria from 6/13/11-7/12/11 with a review at that time. A hospital bed with trapeze and a wheelchair with elevating leg rests were ordered.

Case Management Intervention:

- This file was opened on 5/2/11 when a call was received to notify of admission to Gulf Coast Medical Center on 5/2/11.
- Gulf Coast Medical Center was contacted and the stay was reviewed and recommended.
- Franciscan Skemp Healthcare was contacted for the hospitalization on 5/3/11 and the stay was reviewed and recommended.
- Case management assisted with home care arrangements with Black River Falls Memorial Homecare. Homecare services were monitored and recommended.
- Hospitalization at Gundersen Lutheran was reviewed and recommended. This writer worked extensively with the discharge planner to arrange home IV therapy and nursing with an expected discharge over Memorial Day weekend. The care plan was changed to perform a muscle graft on 6/3/11 and the discharge was cancelled. This writer later assisted with homecare and home IV therapy in preparation for discharge on 6/13/11. This writer referred the discharge planner to in-network providers, Chartwell and Apria.
- This writer contacted the patient to introduce case management services. The patient complained about services from both Chartwell and the home care agency. This writer then contacted Chartwell and the home health agency to discuss and rectify the problems. Later the patient stated that the problems were resolved to her satisfaction.
- Discussed and monitored ongoing services with the home care agency and Chartwell.

Case Management Recommendations:

- Inpatient hospitalization at Gulf Coast Medical Center from 4/30/11 to 5/1/11 was medically appropriate.
- Inpatient hospitalization at Franciscan Skemp Healthcare from 5/3-7/11 was medically appropriate.
- Home care services from Black River Falls Memorial Homecare were medically appropriate: 1 skilled nursing visit on 5/9/11; 7 PT visits from 5/9-5/23/11; 3 OT visits from 5/12-5/23/11.
- Inpatient hospitalization at Gundersen Lutheran Medical Center from 5/24-6/13/11 was medically appropriate.
- Home care services from Black River Falls Memorial Homecare: 6/13, 6/14, 6/15, 6/17 and then 3 times per week on M-W-F are medically appropriate with an update due on 6/27/11.
- IV Cefepime and supplies are being provided by Chartwell from 6/13/11. There is a tentative stop date of 7/10/11. A per diem rate is charged through the network contract along with the cost of the medication. On 6/13/11, 17 doses of Cefepime and supplies were delivered; on 6/21, 14 doses of Cefepime and supplies were delivered.
- DME rented from Apria is medically appropriate for one month beginning 6/13/11. Network prices:
hospital bed \$84.28/month
trapeze \$12/month
wheelchair \$34.90/month

elevating leg rests \$16.98/month

- This case should be investigated for subrogation. The patient fell at the airport; it is unknown if she will pursue legal action when her medical condition is stable.
- This file will remain open to case management services to assist as able.

Thank you for this referral. Please contact the undersigned with any questions.

Nurse Case Manager RN-BC, CCM

(Cost savings on next page.)

SAMPLE

Date: 06/27/2011

Cost Savings Report

Account:
Reference #:
Patient:
Subscriber #:
ID#/Group:
Event:
Date Range: 06/24/11 - 06/27/11

Category	Amount	Type	Details
Direct	\$ 17,322.00	Conserved IP days	conserved 3 inpatient hospital days when home health services visited on 6/3,14, and 15. Estimated rate is \$5774
Direct	\$ 930.00	Conserved physician's visit	3 acute care MD visits, estimated charge \$310/visit
Direct	\$ 900.00	Vendor change	Rerouted referral for IV infusion from Apria (out of network for IV infusion) to Chartwell (in-network.) Estimated savings \$75/day from 6/13-6/24/11 (12 days)
Expense	\$ 474.00		3 home nursing visits in lieu of 3 days of hospitalization; estimated \$158/visit

Total Direct Amount:	\$ 19,152.00
Direct Expenses(-):	\$ 474.00
Admin Auth(-):	\$ 0.00
Total direct savings for this period:	\$ 18,678.00
Total direct savings for this event to date:	\$ 18,678.00

Indirect Savings:	\$ 0.00
Total indirect savings for this event to date:	\$ 0.00