



Wisconsin Health Care Association

Wisconsin Center for Assisted Living

December 15, 2015

Dear WHCA/WiCAL Members:

I am pleased to provide you with our 2nd quarterly ***Email Blast***, providing you with materials from several of our Associate Members. Please take the time to review their materials at your convenience, and save the file for future reference. The file is organized for easy associate member lookup based upon the types of services and/or products they provide. Check it out!

It was after considerations and discussions with Members and Associate Members that we elected to convert from the quarterly mailing to the quarterly ***Email Blast***. It provides for a user-friendly file of Associate Member material for your reference and a lower cost and more efficient transmission method. I want to thank all of our Associate Members who did submit materials for this email. We have seen an almost 50% increase in participation, and hopefully our Associate Members will receive some business from our membership.

The Associate Membership is a valuable part of the WHCA/WiCAL membership and Member facilities are encouraged to consider turning FIRST to our Associate Members for products and services.

Very truly yours,

A handwritten signature in black ink, reading "Thomas P. Moore".

Thomas P. Moore
Executive Director

Elite "Gold Package" Participants

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At Reinhart, we serve as strategic partners with our health care clients. We make it our business to understand your business, and this equips us to offer practical, real-world solutions that help you resolve challenges, seize opportunities and meet your strategic goals.

Our assisted living and long-term care attorneys have served as CEOs of health facilities and have held high-ranking positions with the Wisconsin Department of Health Services and the Wisconsin Office of the Commissioner of Insurance. This uniquely equips us to provide insight and guidance on the complex business and legal relationships that bind residents, assisted living and housing providers, nursing homes, regulators and third-party payers.

Reinhart attorneys actively representing assisted living and long-term care service providers include:

Robert J. Heath, Chair
(Milwaukee)

Jarod L. Ferch
(Madison)

Heather L. Fields
(Milwaukee)

Karla Hutton Pinkerton
(Madison)

Timothy J. Kamke
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John A. Kramp
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(Madison)

Burton A. Wagner
(Madison)

Reinhart
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In addition to our full team of experienced attorneys, we have designated a core group of key contacts who can assist at a moment's notice. You can reach these attorneys via our main number: 800-553-6215, and through the direct extensions and emails listed below. We look forward to discussing your assisted living and long-term care legal needs, and providing creative, cost-effective and lasting solutions.

For additional information on our team and our full suite of legal services, please visit: www.reinhartlaw.com.



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Robert J. Heath

Rob Heath is a shareholder in Reinhart's Health Care Practice and chair of the Firm's Long-Term Care Facilities, Assisted Living and Senior Housing Practice Group. His practice stresses general corporate and transactional representation of health care providers, with a special emphasis on legal issues as they affect long-term and post-acute care providers including nursing homes, assisted living facilities and all types of senior housing. Rob's practice encompasses health care acquisitions and mergers, joint ventures, managed care law and health care-related administrative law matters.

Rob is a frequent presenter on corporate and regulatory matters affecting health care providers. In addition, he has been extensively involved in the financing and construction of retirement communities and alternative living facilities for older adults.

Robert J. Lightfoot II

Bob Lightfoot is a shareholder in Reinhart's Health Care Practice specializing in long-term care, assisted living, and senior housing matters. He has extensive experience representing assisted living and skilled nursing facilities on regulatory and operational issues including survey and certification, licensure, audits, regulatory compliance, risk management, HIPAA compliance, contracts and transactional matters involving the buying and selling of facilities. Bob represents providers on numerous matters before wide range of State and Federal agencies. He also represents health care and other licensed professionals in licensing matters before the Wisconsin Department of Safety and Professional Services.

Bob is a frequent presenter and writer on health care facility regulation, operations and issues affecting health care professionals, and is a contributor to the Wisconsin Assisted Living Association Newsletter. Bob is also a licensed Registered Nurse with ten years of clinical experience, most of which was spent in nursing practice at Vanderbilt University Medical Center.



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John A. Kramp

John Kramp is an attorney in Reinhart's Health Care Practice where he advises a wide range of health care organizations and facilities, including nursing homes, assisted living facilities, independent senior living communities, behavioral health care providers, home health agencies, personal care agencies, hospitals, physician practices, non-profit organizations and related industry groups. John regularly counsels clients in connection with transactional matters including mergers and acquisitions, commercial contracts and regulatory compliance. He also commonly advises clients in connection with survey and certification, licensure and privacy issues.

He often presents on health care issues and plays an active role in sharing his legal and industry-related knowledge, having co-authored several health care law client alerts and articles.



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Complete EMR & AR/Billing system tailored to and controlled by YOU, so that the system responds to your higher standards of care for all levels of service, and is linked to Microsoft Dynamics® or QuickBooks® Financial Systems.



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Maine Veterans' Home

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Care Continuum

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- Care Assist Flow Sheets
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Administration

- HL7 / CCHIT / HHS
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- Alarms
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Plus so much more!

American Data Presents:

ECS - Electronic Chart and Financial System

American Data's Electronic Chart System (ECS) has been providing EMR/EHR and financial solutions to long-term care providers for over 30 years. With over 600 clients today, our employee-owned and controlled company has the most flexible and comprehensive system on the market. Our integrated software solution streamlines patient care while providing real-time documentation and increasing reimbursement.

Flexible

American Data believes that the software should fit to you – never the other way around. Customization is really about delivering you an EMR system that can reflect your facility's daily workflow. It is about providing you with a product that will eventually reduce costs, increase caregiver's time spent with patients, and be flexible enough to have a long shelf life.

Not only is flexibility important, but you must also consider to what extent the system can be customized as well as the amount of time and energy you must put in to do so. Information on screens in ECS can be customized down to what appears, how it appears, where it appears, and even who it appears to. Modifications are user-friendly and can be done by authorized personnel at each facility. It requires no IT/programming background. In this way the facility can change their system as their needs dictate.

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EHR interoperability enables better workflows and reduced ambiguity, and allows data transfer among EHR systems and health care stakeholders. Ultimately, an interoperable environment improves the delivery of health care by making the right data available at the right time to the right people.

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USA Cloud-Based Hosting (Optional)

Strategic Elements

- Focus on your core business; leave the rest to someone else.

Architectural Elements

- Simple, abstract environment for development.

Economic Elements

- Eliminate CAPEX expenses.
- Elastic Resource Capacity.

American Data's ECS is designed to work as either a server-based, or cloud-based software system. American Data has provided an optional data center for clients who prefer not to invest in servers to run ECS in their own facilities.

Unlike most LTC software companies, who contract this service out, American Data's data center (and all storage of data) is located within American Data's Campus.

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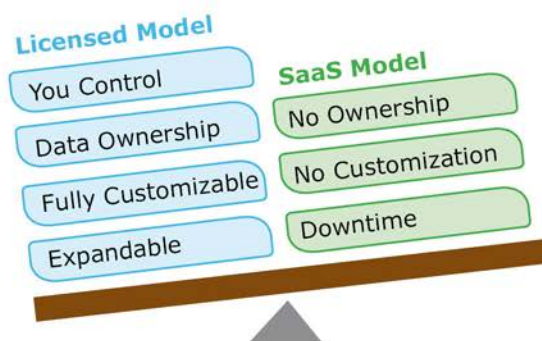
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SLAs for support response	SLAs for support & availability
Control timings of upgrades	Limited control of upgrade timing



“any software that is ‘core’ or ‘mission-critical’ to your prospects should stay licensed”

Benefits of Licensed Software Over SaaS

We would like to share a few of the differences between American Data’s ECS and Software as a Service (SaaS) systems that we feel are significant in these challenging times for the LTC industry.

Would your facility continue to use the MDS if it didn’t have to? In most cases when asked this question the response would be some variety of: “is this a trick question”. For some facilities their negative response might be a question of the cost of the program to the facility. However, it is our belief that in a good facility where care is focused on the patient rather than the law, the negative response is based on the program being of little value to patient care. In these facilities, the MDS program could be causing the facility to come DOWN to the minimal standard of the MDS if they have an EMR that is focused on law compliance rather than the patient.

What does it mean for an EMR be focused on the patient? An EMR is a documentation and communication tool. In quality nursing homes, assessments are not a quarterly event to feed a document that would not even be done if not required. Assessments and the communication of such are a daily occurrence. Communication is more than knowing the patients latest vital signs, it is knowing and monitoring everything that is going on with the individual patient on a daily basis so interventions if necessary can be initiated immediately. The whole picture needs to be at the fingertips of responsible nurses on a daily basis.

EMR systems where the same screen presentations and the interaction of screens is the same in one facility as they are in the next will cause both facilities (and all that are running the same inflexible software) to follow the procedures set up by the vendor and these procedures will be focused on what is common to all LTC facilities; i.e. the minimal standards of the law. For example: being able to design YOUR own report that best meets YOUR standards of care (far above the minimal standards) might be possible but only with the permission and possibly fees (to discourage your request) of the software vendor. Being able to control your EMR is controlling your facility, the care you provide, and your future.

In a SaaS environment, the facility can be at the mercy of the vendor since they do not have a license to use the software but rather are just “renting” access to the system. Like owning a home versus renting an apartment where there are things that require the landlord’s permission to do to the property in a rental environment. And should the “renter ever want to leave the environment” there may

be consequences in order to “take with you” the items you acquired while being in the environment.

And finally there is the question of having control over where your EMR and financial records are stored. The option of having one’s own server is attractive because it is the ultimate in having control. However, in recent years the cost and configuration challenges of having one’s own server has been increasing. With American Data’s new direct secured access to a server (wherever located) without the need for connection licenses, the option of self-hosting is again available without the high cost and complexities. However, ECS clients also have the option of having their own server located in one of the largest data centers in the country...the Microsoft CLOUD (Azure) where again the facility has total control of how much cost, how much power, and for what duration.

We offer so much more than our license and flexibility. Here are just a few more differences between ECS and SaaS systems:

- ✓ ADL charting can be captured with less time spent in ECS due to your ability to record the number of times a task was performed, thus increasing reimbursement.
- ✓ You can have multiple screens open at the same time in ECS so you do not have to constantly waste time navigating between screens.
- ✓ Special Assessments can be completed with the flexible library of choice answers we offer. Say more than “yes” or “no.” With ECS, the facility controls this library so your caregivers can offer context when completing assessments.
- ✓ Every word written into the clinical record is integrated with the overall resident history with ECS.
- ✓ American Data’s support team is made up of trained Nursing Home Administrators, Nurses, and Accountants. They know the industry inside and out and are dedicated to making operations run smoothly for each facility.
- ✓ American Data is an American company, which means all medical records created by our system are stored in the United States.



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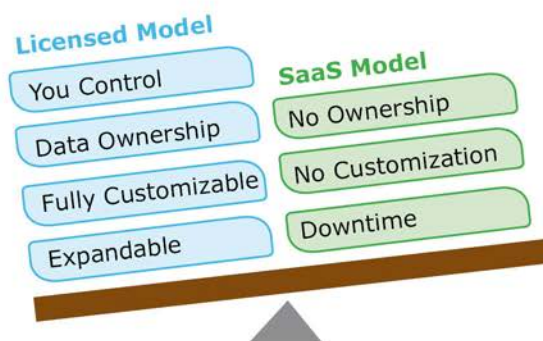
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Licensed Model	SaaS Model
Right to Physical Custody	Remotely Accessed Service
Customizations Discretionary	Customizations Limited
Infrastructure & Data Security Control	No direct Security Control
Data Ownership & Custody Control	No direct data, custody, data ownership must be clearly defined in T's and C's
SLAs for support response	SLAs for support & availability
Control timings of upgrades	Limited control of upgrade timing



“any software that is ‘core’ or ‘mission-critical’ to your prospects should stay licensed”

Benefits of Licensed Software Over SaaS

We would like to share a few of the differences between American Data's ECS and Software as a Service (SaaS) systems that we feel are significant in these challenging times for the LTC industry.

Would your facility continue to use the MDS if it didn't have to? In most cases when asked this question the response would be some variety of: “is this a trick question”. For some facilities their negative response might be a question of the cost of the program to the facility. However, it is our belief that in a good facility where care is focused on the patient rather than the law, the negative response is based on the program being of little value to patient care. In these facilities, the MDS program could be causing the facility to come DOWN to the minimal standard of the MDS if they have an EMR that is focused on law compliance rather than the patient.

What does it mean for an EMR be focused on the patient? An EMR is a documentation and communication tool. In quality nursing homes, assessments are not a quarterly event to feed a document that would not even be done if not required. Assessments and the communication of such are a daily occurrence. Communication is more than knowing the patients latest vital signs, it is knowing and monitoring everything that is going on with the individual patient on a daily basis so interventions if necessary can be initiated immediately. The whole picture needs to be at the fingertips of responsible nurses on a daily basis.

EMR systems where the same screen presentations and the interaction of screens is the same in one facility as they are in the next will cause both facilities (and all that are running the same inflexible software) to follow the procedures set up by the vendor and these procedures will be focused on what is common to all LTC facilities; i.e. the minimal standards of the law. For example: being able to design YOUR own report that best meets YOUR standards of care (far above the minimal standards) might be possible but only with the permission and possibly fees (to discourage your request) of the software vendor. Being able to control your EMR is controlling your facility, the care you provide, and your future.

In a SaaS environment, the facility can be at the mercy of the vendor since they do not have a license to use the software but rather are just “renting” access to the system. Like owning a home versus renting an apartment where there are things that require the landlord's permission to do to the property in a rental environment. And should the “renter ever want to leave the environment” there may

be consequences in order to “take with you” the items you acquired while being in the environment.

And finally there is the question of having control over where your EMR and financial records are stored. The option of having one's own server is attractive because it is the ultimate in having control. However, in recent years the cost and configuration challenges of having one's own server has been increasing. With American Data's new direct secured access to a server (wherever located) without the need for connection licenses, the option of self-hosting is again available without the high cost and complexities. However, ECS clients also have the option of having their own server located in one of the largest data centers in the country...the Microsoft CLOUD (Azure) where again the facility has total control of how much cost, how much power, and for what duration.

We offer so much more than our license and flexibility. Here are just a few more differences between ECS and SaaS systems:

- ✓ ADL charting can be captured with less time spent in ECS due to your ability to record the number of times a task was performed, thus increasing reimbursement.
- ✓ You can have multiple screens open at the same time in ECS so you do not have to constantly waste time navigating between screens.
- ✓ Special Assessments can be completed with the flexible library of choice answers we offer. Say more than “yes” or “no.” With ECS, the facility controls this library so your caregivers can offer context when completing assessments.
- ✓ Every word written into the clinical record is integrated with the overall resident history with ECS.
- ✓ American Data's support team is made up of trained Nursing Home Administrators, Nurses, and Accountants. They know the industry inside and out and are dedicated to making operations run smoothly for each facility.
- ✓ American Data is an American company, which means all medical records created by our system are stored in the United States.

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Contact us for more information about our recent market activity:

Ray Giannini

First Vice President / Director

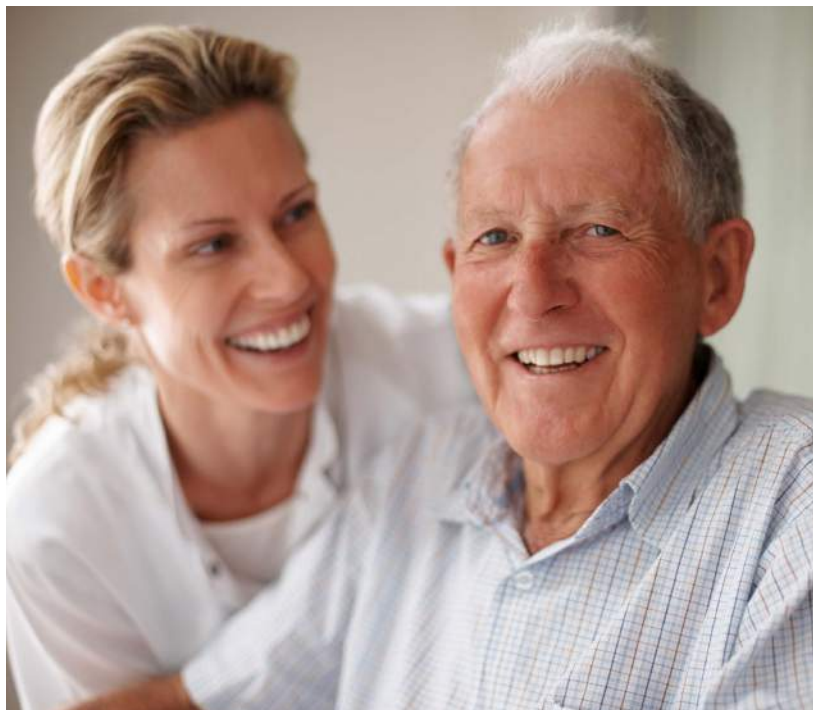
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To effect positive change in the quality, efficiency and effectiveness of health care.

MetaStar is a quality improvement organization based in Madison, Wisconsin, dedicated to ensuring the healthiest lives possible. We believe all health care should be safe, effective, patient-centered, timely, and equitable. We are guided by the promise of how good health care can be.

www.metastar.com

Our work

We improve health care for patients and residents, and provide technical assistance to health care providers.



Part of MetaStar's work includes collaborating with nursing homes in Wisconsin to assist with quality improvement practices. MetaStar's nursing home team includes two project specialists.

For more information about our work in nursing home quality improvement, please contact:
Liz Dominguez or Emily Nelson
608-274-1940

MetaStar represents Wisconsin in the Lake Superior Quality Innovation Network.



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ICD-10 CODING AUDITS

BE ICD-10 STRONG!

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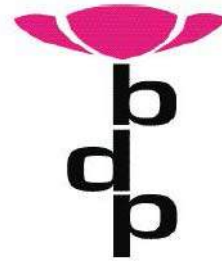
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- Capturing codes for Section I of the MDS
- Action plan tips for coding instruction

Contact Pathway Health to ensure your organization remains ICD-10 strong!

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Iveta Carpenter



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(608) 253-2100
Fax 253-2729

Iveta Carpenter of Baraboo just completed her Bachelor of Arts degree with a major in accounting, and a perfect 4.0 GPA, from Lakeland College.

“Lakeland is proud to call Iveta one of our accounting alumni. It is very rare for an accounting student to graduate from Lakeland College with a perfect 4.0 GPA. Lakeland College’s accounting program was recently named one of the nation’s 25 best online bachelor’s degree earning programs by Accounting.com, and Iveta will make us proud in her future professional endeavors,” said Brett Killion, CPA and Assistant Professor of Accounting at Lakeland College.

We at Poppy CPA are proud of Iveta! Iveta accomplished her perfect grade point average in her Bachelor’s degree all the while she was working full-time and raising a family. Her second child was born last year during tax season and she kept up with all of her client work, never missing a deadline.

When dealing with Medicaid, Medicare and taxes, you are best served by those who have accomplished the exceptional, because we know how to get things done favorably in the face of today’s challenges!



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Wipfli brings together the best of both worlds—the resources of a large firm and the commitment to personal service found in smaller firms. We have 175 partners, more than 1,400 associates, 33 offices, and over 50,000 firm clients. Wipfli is ranked No. 20 in the top 100 public accounting firms and is properly licensed for public practice as a certified public accounting firm. Since our firm's founding in 1930, it has been our mission to be the firm of choice in the markets we serve. Today, Wipfli is fulfilling its mission and serving health care clients throughout the nation from our offices in Minnesota, Wisconsin, Washington, Idaho, Montana, Pennsylvania, and Illinois.



To fulfill the needs of our diverse client base, Wipfli has grown into a multidiscipline professional services firm. Services include a wide range of financial and operational consulting services, and the firm has created specialized industry and business unit practices including:

Industry Groups

- Health Care
- Nonprofit and Governmental
- Manufacturing and Distribution
- Financial Institutions
- Construction and Real Estate

Business Unit Practices

- Audit and Accounting
- Tax
- Information Technology
- Human Resources
- Retirement Plan Services

Our Health Care Services

Wipfli's health care industry group has deep experience in the market. We have over 1,700 health care clients, including hospitals, nursing homes, assisted living organizations, and physician practices in 48 states and 100 health care professionals, including 17 partners. Our industry-focused approach means that we are continually refining our understanding of emerging health care industry issues, leading practices, and developing trends to provide well-informed and practical advice for clients in the health care industry.

We have deep industry knowledge in the senior living industry, and Wipfli senior living professionals includes CPAs, licensed nursing home administrators, RNs, senior living market analysts, and nursing home billing specialists. These professionals serve nursing home clients in Wisconsin, Minnesota, Michigan, Washington, Idaho, and Oregon as well as throughout the rest of the nation. As a result, we are familiar with the unique nursing home reimbursement and operational environments in the states, in which your facility operates as well as throughout the rest of the nation.

Wipfli sponsors regional conferences on issues that are important to health care providers. In addition, we lead training and educational sessions and present webinars for industry groups at both the regional and national levels, at state and national senior living associations, the American Institute of Certified Public Accountants, Health Care Financial Management Association, National Rural Health Association, and the National CPA Health Care Advisors Association. Through our active involvement in state, regional, and national associations, we provide education and training to thousands of senior living leaders and professionals annually on a wide variety of topics.

In addition, our health care professionals and the firm maintain memberships in a variety of professional associations including the American Institute of Certified Public Accountants, state societies and institutes of certified public accountants, Healthcare Financial Management Association, state hospital and nursing home associations, the National CPA Health Care Advisors Association, Medical Group Management Association, National Rural Health Association, National Association of Rural Health Clinics, and other health care associations.

We provide value-added observations and recommendations related to accounting processes, practices, and internal controls as part of our audit process. In addition, Wipfli's health care and senior living experts are available as an extension to your internal teams as you grow and enhance your financial performance. Following are just a few examples of the value-added services available to the facility through Wipfli's comprehensive industry-focused experts.

- **Tax Services.** Wipfli has invested tremendous resources in building a team of experienced, creative tax specialists. We believe we have assembled a group of individuals with unsurpassed tax talent who live and work in the area. These individuals include former Big Four partners, seasoned senior managers, experienced National Tax veterans, former revenue agents, and tax attorneys.
- **Audit Services.** We pride ourselves on utilizing deep industry expertise to provide value-added, efficient, and affordable audit services to our health care clients. Our auditors are industry specialists who understand the unique needs and challenges of senior living organizations. We also understand the importance of staff consistency on engagements. These factors result in highly satisfied audit clients who build long-term relationships with our staff.
- **Accounting and Small Business.** Recruiting, retaining, and educating a comprehensive internal staff for accounting, human resources, information technology needs of a small business can be challenging and cost-prohibitive. Wipfli's has a complete team of professionals who are available to add resources to our client's existing capabilities or to serve as an affordable and cost-effective outsourcing solution.
- **Clinical and Operational.** Our team includes clinical and operational experts led by a nationally recognized leader in the nursing home profession. This clinical and operational team of experts provide a diverse set of services ranging from ICD-10 training, MDS coding analysis, mock surveys for regulatory compliance, and staffing and operations assessments.
- **Market Analysis.** Wipfli's senior living market analysis and strategic planning team assists senior living organizations in adapting their services to the changing landscape. This team conducts comprehensive strategic planning engagements, nursing home bed need analysis, and assisted living, independent living, and home health market assessments.
- **Reimbursement.** Our reimbursement experts complete and/or review Medicare and Medicaid cost reports for accuracy and optimization based on the reimbursement environment within each state.
- **Risk Advisory.** Our risk advisory team helps our health care clients ensure the confidentiality, integrity, and availability of protected health information (PHI), including the electronic devices and systems that are used with this information under the Health Insurance Portability and Accountability Act (HIPAA) and by utilizing HITRUST Common Security Framework (CSF) in executing comprehensive security assessments.
- **Information Technology.** Our information technology analysts help clients maximize their information technology investments through network development and support services, conducting information technology environment audits, and helping with software selection and project management for major system implementations.
- **Benchmarking.** Through our proprietary database of nursing home Medicare cost reports, which includes all nursing homes in the nation, we can provide a benchmarking analysis for each facility. This analysis will compare key revenue and cost indicators to state, regional, and national benchmarks.



d/b/a of Gordian Medical Inc.



To provide the best wound care solutions for each facility... one resident at a time.

AMERICAN MEDICAL TECHNOLOGIES, AMT, is the leading independent provider of wound care solutions for Long Term Care facilities in the United States. We have been providing quality wound care programs since 1994 and currently service residents in over 4,600 facilities nationwide. Our wound care program is designed to help your facility and staff in four key ways:

- + Enhance the quality of resident care.
- + Increase educational resources available to your staff.
- + Reduce wound care related costs for your facility.
- + Assist with mandatory CMS documentation.

AMT is a member of the National Pressure Ulcer Advisory Panel, NPUAP, in addition to many other state and national organizations. We are a fully accredited and Participating Durable Medical Equipment, Prosthetic, Orthotic and Supplies Medicare Part-B Supplier. As part of our commitment to excellence in Nursing Home Care, AMT has long been an active champion of the Advancing Excellence in America's Nursing Homes campaign.

Education

All good clinical care starts with proper education and training. By partnering with AMT, staff is trained to meet the CMS DME POS supplier standards.

- + Provide clinical, regulatory and documentation education to facility staff related to wound care products.
- + Provide ongoing education tailored to each facility's needs.
- + Offer education to ensure proper product utilization.
- + Trusted education advisor for each facility.
- + Tele-education program provides on demand education and access to wound care literature and standards of care.

Clinical Expertise

Nationally, wound issues in long term care facilities are one of the most cited deficiencies by state surveyors. Our licensed Clinical Specialists work closely with your staff.

- + Monitor proper utilization and compliance with wound care products.
- + Licensed healthcare providers with expertise in wound care.
- + Decrease the risk of state infractions.
- + Less paperwork for your staff means more time for resident care.
- + More than 2,000 collective years of clinical experience you can trust.
- + Proprietary tracking software provides essential Medicare documentation.
- + Tablets provide live support for your wound care product needs.

Wound Care Products

AMT is able to access a wide array of products to meet the specific needs of residents.

- + Work with most major manufacturers.
- + Ensure appropriate use of dressings over a 30 day period.
- + Supply Medicare approved dressings.
- + Bill the resident's insurance directly through: Medicare Part B, Medicaid, HMO's and other primary payers.
- + AMT accepts full assignment for wound care products provided.
- + Verify insurance prior to providing products to your residents.

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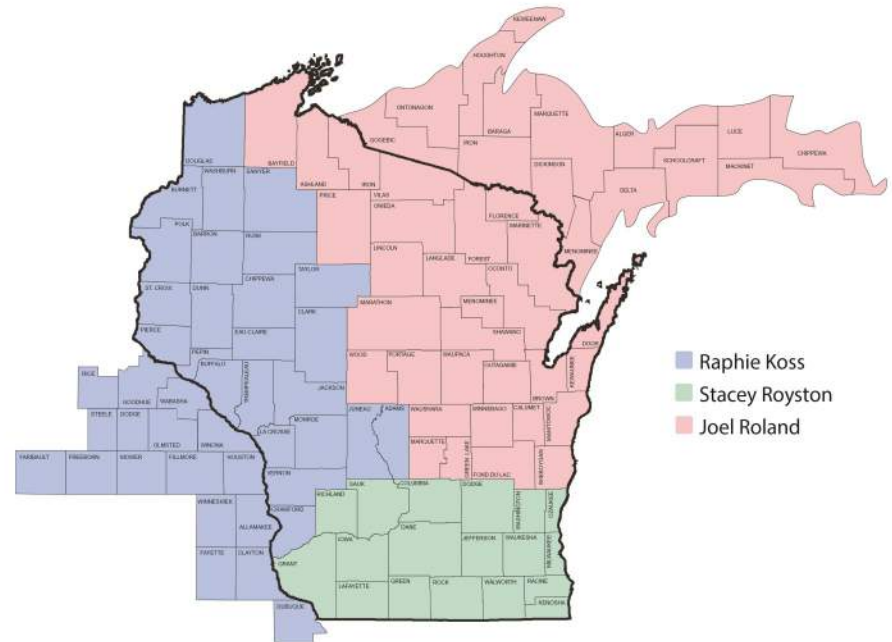
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Best for your residents, best for your community

At VITAS Innovative Hospice Care®, we understand the challenges assisted living communities face with end-of-life issues. Your residents want to age in their homes, surrounded by the people, the things and the routines they know. As they near the end of life, the need to be comfortable and at home is even more important.

As one of the nation's oldest and largest hospice providers, VITAS has the expertise, the staff and the specialized services that make that possible. Our goal is to bring quality of life to the end of life. For our assisted living partners, that means helping their residents stay out of emergency rooms, hospitals and nursing homes.

The expertise to keep residents at home

Intensive Comfort Care®. When a resident's medical crisis would ordinarily require hospitalization, VITAS caregivers are available to complement assisted living staff by providing short-term, intensive medical management through our Intensive Comfort Care® (Continuous Care) program. Provided up to 24 hours per day and delivered by a nurse with support from a hospice aide, this hands-on management can make the difference between a resident remaining in his or her home and being sent to the emergency room for treatment.

- **VITAS Telecare 24/7 support.** Our Telecare service provides immediate telephone access to a clinical expert who can assess the situation and provide medical advice. Nearly 122,000 after-hours calls are handled by VITAS clinicians each month.¹
- **Consistent and ongoing clinical care.** On average, five or more visits per week by a member of the VITAS care team (which includes a hospice physician, nurse, social worker, hospice aide, chaplain and team volunteer) provide extra support for residents and their families. This high volume of visits is often instrumental in averting medical crises.



- **Effective pain management.** As a palliative care pioneer, VITAS has developed effective pain management protocols that are customized for the individual resident—which is critical in an assisted living setting. In addition to addressing physical and medical issues, our multidimensional approach addresses spiritual and emotional needs as well.

Supporting your residents and staff

- **Comprehensive clinical education.** VITAS offers a variety of educational programs customized for your assisted living community that better prepare staff to care for residents near the end of life. A variety of in-services for clinicians and nonmedical staff are approved for continuing education credits in accordance with state requirements. VITAS provided more than 30,000 CE credits in 2009.^{2*}

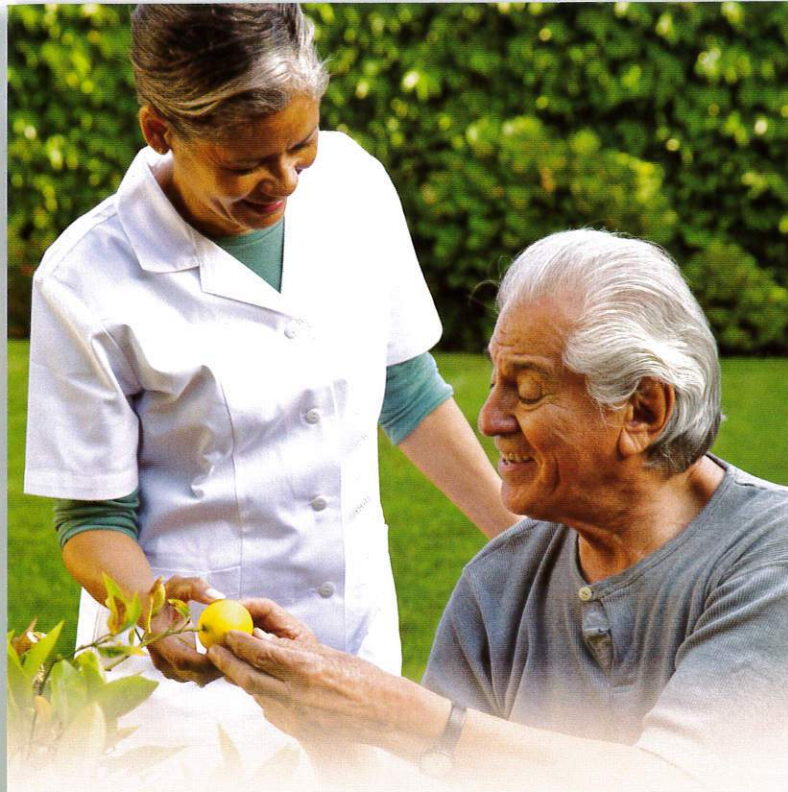
*Does not include CE credits issued in California or Ohio.

¹Some of VITAS' specialized services are only available on a regional basis.

¹Data on file, VITAS. 2010.

²Data on file, VITAS. 2010.

³Data on file, VITAS. Q1 2010 QAPI.



• **Specialized care programs and benefits:**

- Veterans' programs
- Alzheimer's/dementia programs
- COPD program
- Multilingual staff
- Jewish accreditation
- Pet therapy
- Memory Bears
- Music therapy
- Massage therapy
- Personal grooming and pampering
- "Living memorials" to honor a resident's life
- Funeral planning assistance
- Anticipatory grief support during the illness
- Bereavement support groups for 13 months after the death

Check with your local VITAS representative to see what programs are available in your area.[†]

Innovative Hospice Care
VITAS[®]
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 Suite 500
 Wauwatosa, Wisconsin 53226
 Referrals 800.93.VITAS

- **Improved patient satisfaction.** By providing outstanding clinical care and excellent communication with residents and families, VITAS *receives high satisfaction scores* from those we serve.³
 - 96 percent of patients rated the care received through VITAS to be excellent, very good or good.
 - 97 percent of patients and families would recommend VITAS services to others.
 - 97 percent of patients and families felt that the VITAS team kept them informed of the patient's condition.

Selecting a strategic partner

Choosing the right hospice partner is critical. Your hospice care provider should offer:

- Rapid response time; same-day admission seven days per week
- Direct access to clinicians 24 hours per day, seven days per week
- Ability to accept complicated cases
- Continuous care staffing for periods of crisis
- Extra support at the time of death, as well as formal bereavement and support groups
- Specialized service options for assisted living communities, such as staff training and education, and development of customized protocols
- Joint marketing opportunities

We support your residents' desire to remain in their home even as their health declines. The most important step you and your staff can take is to proactively identify those at risk for a medical crisis. VITAS can help by providing HIPAA-compliant case reviews with your team. We are also happy to meet with residents and their families for an information-only discussion of end-of-life care options that can help them explore hospice and palliative care with their physician.

Ask your VITAS representative to share more details about the many benefits we can provide your residents.

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Pathway Health is now performing ICD-10 Coding Audits for post-acute care organizations! These audits help organizations determine opportunities for improvement, while also reviewing the proper ICD-10 codes to use for billing.

Both remote and onsite ICD-10 Coding Audits are affordable, efficient ways to be better informed about education needs, billing practices, and optimization of payments for chronic disease management and short-term rehabilitation. Audits can be completed by

remote access to software or by encrypted delivery of coding/diagnosis listings.

Your Pathway Health ICD-10 Coding Audit will be coordinated by an RHIA (registered health information administrator), who has experience in coding ICD-10, to give feedback on your ICD-10 coding process and provide billing guidance.

**Contact us today to schedule a
Pathway Health ICD-10 Coding Audit.**

Why choose Pathway Health's ICD-10 audit solution?

- Clinical documentation improvement is key for proper reimbursement in ICD-10.
- Clients honing their ICD-10 skills are able to correct miscoding now, so future ICD-10 coding is accurate.
- Most clients admit they are not skilled in ICD-10 coding, so it is difficult for them to find their own areas of concern. Pathway Health provides you with tips and recommendations for success.
- This process will kick start your efforts to clean up your diagnosis lists, as you bill in ICD-10.
- This audit is affordable, and can be completed remotely.
- Process improvement can only begin if you know where your needs are. A Pathway Health ICD-10 Coding Audit provides information on the exact training and education needs for your leaders and line staff.
- Pathway Health's tools and resources help you adhere to official ICD-10 coding guidelines.

Don't miss this opportunity to quickly identify coding improvements!

Keep on the Right Path with ICD-10 Coding Audits

A Pathway Health ICD-10 Coding Audit is a comprehensive analysis of your coding process, which includes the claim check review process and coding techniques for ICD-10. Executive summaries and action plans are provided as part of our comprehensive assessments.

Components reviewed include:

- Primary diagnosis
- Admitting diagnosis
- Reason for continued stay
- Medical diagnosis (reason for Medicare)
- Rehab diagnoses
- Psychiatric diagnoses
- Status of tubes (e.g., catheters, colostomies, etc.)
- Encounters vs. status of...
- Z codes
- Late effects
- Therapy treatment codes
- Dementia coding
- Sepsis coding
- External cause codes
- Diabetes codes
- End stage renal disease
- Acute exacerbation of diseases vs. chronic diseases
- Coding for Section I of the MDS

Choose from Three Coding Audits Solutions

1. Remote Coding Audit – Basic

- 12 Diagnosis List Audit, including both short-term and long-term records
- Snapshot analysis of resident health status
- Accuracy in selecting primary, secondary and reason for continued stay diagnoses
- Executive summary, with tips for coding instruction

2. Remote Coding Audit – Advanced

- 18 Diagnosis List Audit, including both short-term and long-term records
- Snapshot analysis of resident health status
- Accuracy in selecting primary, secondary and reason for continued stay diagnoses
- Executive summary, with tips for coding instruction

3. Onsite Coding Audit – Comprehensive

- 12 comprehensive chart reviews, including:
 - History and physical
 - Discharge summary
 - Physician orders
 - Progress notes
 - Consultation reports
 - Diagnosis listings
- Short-term rehabilitation and long-term resident reviews
- Snapshot analysis of resident health status
- Accuracy in selecting primary, secondary and reason for continued stay diagnoses
- Late effects
- Z codes
- Capturing codes for Section I of the MDS
- Action plan tips for coding instruction

Contact Pathway Health to ensure your organization remains ICD-10 strong!

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McKesson Quality One is designed *by clinicians for clinicians* to make quality of care easier to achieve and maintain. Staff can use the platform not only to identify issues, but to refine and reassess processes against metrics until goals have been achieved.

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It's all about **the patient**

One must never get too far away from this fundamental truth. Professional, compassionate care is at the core of everything we do. MJ Care was founded by a Christian Physical Therapist, Mary Van Lare, whose integrity and vision of excellence continues to inspire the company, both through her active leadership and her legacy of service.

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The Best Therapists

It's the therapist who must deliver the best care possible, and we believe quality of care must also be delivered with sincere compassion for the patient.

We recruit and retain the physical, occupational, and speech therapists that everyone wants to have as part of their organization. They stay with us, because this is a therapist-led company, and they appreciate the clear vision, the unsurpassed training, and the smooth-running systems.

Our therapists accept the importance of following billing regulations for reimbursement, and we provide the technological infrastructure and streamlined documentation that helps them to stay on top of these procedures without losing focus on quality of care. They attend to evolving patient needs, and this leads to new programs that result in higher caseloads.

MJ Care Administers Your Therapy Program **To Achieve Excellence**

MJ Care's consultants are expert in relevant disciplines, so they collaborate to provide continuous and comprehensive training and support for therapists. Our staff development and training programs are created by nationally-recognized professionals.

To manage the staff and all daily clinical operations within the department, MJ Care provides an on-site and fully-dedicated Rehab Director. Clinical and operational support is provided by a Regional Director who visits regularly and maintains consistent contact with Nursing and Administration. A Rehab Tech manages the clinic office to assure maximum quality time for therapists to treat patients.

Survey compliance is a top priority, including measurement of physical, psychological and psychosocial functioning of all Medicare and Medicaid patients using the Long-Term Care Minimum Data Set (MDS). All patients are screened for therapy needs. Specially designed programs are used to address the Health Care Financing Administration's 24 Nursing Home Quality Indicators, including therapy programs centered on ADL function, range-of-motion, dining, fall prevention, dementia, and mobility.

Outpatient therapy programs often need targeted marketing campaigns in order to reach their growth potential. MJ Care has extensive experience expanding therapy programs in continuing care communities. We can collaborate with you to plan communication efforts directed to referral sources and residents in the community, as well as residents of your independent and assisted living apartments. Such campaigns may include direct mail, newspaper advertisements, brochures, and special events.



How We Consult With You to **Raise Your Therapy Program to New Levels of Excellence**

Following are some of the ways our consultants apply their seasoned judgment to help your facility achieve its aspirations:

Conduct rehab and Medicare audits to review clinical, documentation, coding, billing and operational issues that may dramatically impact your ability to optimize reimbursement and meet survey requirements.

Work with therapy and restorative nursing to design individualized functional maintenance programs that meet Medicare and Medicaid criteria for skilled nursing services.

Create clinical dementia and restorative nursing programs that capture reimbursable patient treatment accurately and also positively impact your survey process.

Enhance traditional PT, OT, and Speech Therapy programs by adding cognitive treatment that opens up new opportunities to enhance residents' quality of life and creates additional facility revenue sources.

Make recommendations to address the rehab needs of your long-term population through caseload development and appropriate Medicare Part B utilization.

Determine potential increases in the Medicaid case mix index reimbursement for restorative nursing and therapy programs.

Complete an operational review to identify opportunities or threats to the success and stability of your community and create a success plan for the future.



The Story of MJ Care

The story began in 1977 when the founder of MJ Care, Mary Van Lare, Physical Therapist, determined to build a therapy practice based on bringing hope and joy into each treatment, while achieving outstanding patient outcomes. That ideal remains central to the business over three decades later.

MJ Care stands for an exceptionally positive experience every time—one that clients want to tell others about. As a company, recruiting and training remarkable, talented staff who can achieve this result is imperative.

The company has grown rapidly as our professional, caring, and encouraging approach has attracted more and more healthcare providers, who appreciate the difference we make in the lives of their clients. Our customer base continues to grow throughout the Midwest and beyond, as we hold to our simple philosophy, while putting the latest methods and technologies to work.

Today, MJ Care is leading the way in values-driven rehabilitation, school billing services and staffing solutions. Our vision is one of excellence, leadership, and growth, even in times of dynamic change in the healthcare and insurance industries.



The Values That Guide MJ Care

The experience gained by MJ Care across generations has earned increasing levels of trust, because everything we do is guided by a special set of values. The way we put these values into practice is what makes MJ Care unique:

Respect – Treating our customers and associates with courtesy, consideration, and appreciation at all times, under all circumstances.

Integrity – A workplace in which the highest standards of ethics and honesty are adhered to at all times and without exception. Doing the right thing even when no one is watching.

Innovation – An atmosphere where new and creative ideas are supported and encouraged by management, associates and staff. An environment where associates are empowered to creatively solve problems and deliver excellent Health Care Services.

Service Excellence – A commitment to providing our customers with the highest caliber of service in all areas of MJ Care's operations.

Quality – Providing services that fulfills the needs of our customers and consistently meets the highest standards of efficiency, effectiveness and compliance.

Education – Providing seminars and continuous education for our associates that fulfills the needs of our clients, associates and consistently meets the highest standards of the industry.



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A System for Every Bathing Need



Advantage™ Seated Bathing System with Rapid Fill™ Reservoir



Advantage™ Bathing System:
Base Model with lock-in chair



Essence™ Spa Side-Entry
Bathing System

Bathing Systems for the Continuum of Care with Cost-Effective, Modular Architectures to Meet Your Needs

- Featuring the Remedy® Germicidal UV water purification system, clinically proven to dramatically lower infection rates
- FDA Class II medical whirlpool system provides true hydrotherapy
- With its modular architecture and competitive prices, Apollo can configure a spa to meet your needs and budget
- Industry leading reliability and clinically impactful feature set provide the highest possible Return on Investment



A Range of Color Panel Options to Complement Any Spa Room Design

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Contact Julie Tindal, Regional Sales Manager, for more information, to schedule an on-site demonstration, or to request a quote

Committed to High-Quality, Exceptional Service, and Continual Innovation

			
Advantage™ with Internal Bathing Chair Outstanding system for "Aging in Place." Accommodates both ambulatory and non-ambulatory residents, and allows you to add features as needed.	Advantage™ with Level Glide™ Transfer System Increases resident comfort and safety and reduces the number of transfers. Integrated scale allows resident weight to be recorded during bath preparation.	Advantage™ with Rapid Fill™ Reservoir Most efficient bathing system available. Provides exceptional bathing efficiency and resident comfort, as well as outstanding return on investment.	Essence™ Spa Side-Entry Bathing System Side entry bathing system that provides a spa-like bathing experience. Perfect for ambulatory and weight bearing residents. Earth-Tone Granite color option also available.

APOLLO BATHING SYSTEM OFFERINGS INCLUDE:

Advantage™ Modular Seated Bathing System

- Remedy® Ultraviolet Water Purifier
- Air Spa
- Whirlpool (FDA Class II medical device for hydrotherapy)
- Level Glide Transfer System
- Digital Weigh Scale
- Rapid Fill Reservoir

Essence™ Spa Side-Entry Bathing System

- Remedy® Ultraviolet Water Purifier
- Air Spa
- Whirlpool (FDA Class II medical device for hydrotherapy)
- Configurable to a variety of installation environments
- Earth-Tone Granite color with Brushed Nickel Fixtures option now available

Only Apollo offers an FDA-Approved Germicidal UV water purification system



Clinically Proven to Reduce:

- UTI's by 50%
- Respiratory Infections by 35%

Contact your Apollo Representative, Julie Tindal, for more information or to schedule a free on-site demonstration.

Julie Tindal, Regional Sales Manager
Cell: 715.410.2555
E-mail: jtindal@apollobath.com



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- ◆ Electronic prescribing and medication administration with bar code verification reduces med errors and improves resident safety.
- ◆ Interface with other software applications facilitates exchange of information.
- ◆ Daily care team charting imports to MDS for optimal RUGS and reimbursement.
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To provide the best wound care solutions for each facility... one resident at a time.

AMERICAN MEDICAL TECHNOLOGIES, AMT, is the leading independent provider of wound care solutions for Long Term Care facilities in the United States. We have been providing quality wound care programs since 1994 and currently service residents in over 4,600 facilities nationwide. Our wound care program is designed to help your facility and staff in four key ways:

- + Enhance the quality of resident care.
- + Increase educational resources available to your staff.
- + Reduce wound care related costs for your facility.
- + Assist with mandatory CMS documentation.

AMT is a member of the National Pressure Ulcer Advisory Panel, NPUAP, in addition to many other state and national organizations. We are a fully accredited and Participating Durable Medical Equipment, Prosthetic, Orthotic and Supplies Medicare Part-B Supplier. As part of our commitment to excellence in Nursing Home Care, AMT has long been an active champion of the Advancing Excellence in America's Nursing Homes campaign.

Education

All good clinical care starts with proper education and training. By partnering with AMT, staff is trained to meet the CMS DME POS supplier standards.

- + Provide clinical, regulatory and documentation education to facility staff related to wound care products.
- + Provide ongoing education tailored to each facility's needs.
- + Offer education to ensure proper product utilization.
- + Trusted education advisor for each facility.
- + Tele-education program provides on demand education and access to wound care literature and standards of care.

Clinical Expertise

Nationally, wound issues in long term care facilities are one of the most cited deficiencies by state surveyors. Our licensed Clinical Specialists work closely with your staff.

- + Monitor proper utilization and compliance with wound care products.
- + Licensed healthcare providers with expertise in wound care.
- + Decrease the risk of state infractions.
- + Less paperwork for your staff means more time for resident care.
- + More than 2,000 collective years of clinical experience you can trust.
- + Proprietary tracking software provides essential Medicare documentation.
- + Tablets provide live support for your wound care product needs.

Wound Care Products

AMT is able to access a wide array of products to meet the specific needs of residents.

- + Work with most major manufacturers.
- + Ensure appropriate use of dressings over a 30 day period.
- + Supply Medicare approved dressings.
- + Bill the resident's insurance directly through: Medicare Part B, Medicaid, HMO's and other primary payers.
- + AMT accepts full assignment for wound care products provided.
- + Verify insurance prior to providing products to your residents.

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