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SEPT. 18–21, 2023
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Cost Containment Strategies for General and Advanced Wound Care in LTC/SNF

Cathy Klofft, Provista Council Member, Purchasing Supervisor

Amber Colburn LPN, Infection Preventionist

Pleasant Ridge Manor, Girard, Pa.

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Learning Objectives

- Identify factors that contribute to price increases in long-term care and skilled nursing facilities. (LTC/SNF).
- Explain successful strategies to reduce costs in long-term care and skilled nursing facilities.

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Pleasant Ridge Manor

- 300 Bed SNF (Skilled Nursing Facility) in Northwestern PA
- County Owned
- Previously had 2 facilities 388 beds

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Getting Started

- Our facility was absorbing the entire cost of supplies except for enteral, ostomy, trach products.
- Requests for supplies drew my attention to more possibilities other than “Wound clinic” orders.

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Implementing The Process

- EMR made it easier to submit orders and documentation
- Development of a simple spreadsheet allowed me and my staff to keep track of the active treatments

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Wound Clinic

UNIT	RESIDENT	WOUND LOCATION	MEASUREMENTS	PRODUCT	SIG	COVERED
J	Brown, Mary	rt leg	3 x 3 x .2 2 x 3 x .2	unna boot-1 cohesive bandage-2	q3days	yes
G	Cash, Joe	sacrum	.4 x .2 x .1	calcium alginate	bid & prn	yes
K	Doe, Jane	lt foot	.5 x .3 x .1	Silver Alginate 2x2	qd & prn	yes
A	Miller, Jack	rt 2nd toe		Bordered foam 2x2	qd	no-no doc
G	Ross, Bob	lt shoulder		Bordered foam 4x4	q3d & prn	no-no doc
G	Smith, Roger	sacrum	2.4 x .6 x .2	Silver collagen	qd & prn	yes
C	Turner, Sue	lt ischium		hydrocolloid	shower days	no-prevention
J	West, Adam	rt heel	3.5 x 2.8 x .2	calcium alginate	qd & prn	no-skilled
A	Young, Mary	lt calf	1.3 x 1.1 x .1	xeroform	qod & prn	no-skilled
<u>Notes</u>						

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What is required?

- Face sheet or Admission record with residents' insurance information
- Documentation on the wound including size, stage and drainage assessment

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Things To Watch

- Dr.'s order with desired dressings, frequency and wound location

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Documenting Wound

- Proper wound documentation is essential to insurance coverage

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Appropriate Wound Dressings

- Make sure dressing is appropriate for the wound

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Types of Dressings and Wounds

DRESSING	FREQUENCY	DRAINAGE	THICKNESS / STAGE
ABD Pad	Daily	Mod - Heavy	Full Thickness / Stage 3 or 4
Bordered Gauze	Daily	Any	Any
Calcium Alginate / Silver	Daily	Mod - Heavy	Full Thickness / Stage 3 or 4
Collagen Dressing	Daily (or per manufacturer recommendations)	Minimal - Mod	Full Thickness/Stage 3 or 4 or Stage 2 *Stalled Wound regardless of drainage
Composite	3x / Week	Mod - Heavy	Any
Foam / Bordered Foam	3x / Week	Mod - Heavy	Full Thickness / Stage 3 or 4
Gauze	Up to 3x / Day	Any	Any
Hydrocolloid	3x / Week	Minimal - Mod	Any
Hydrogel Filler (tube)	3 ounce / Month	None - Minimal	Full Thickness / Stage 3 or 4
Hydrogel Gauze / Sheet	Daily	None - Minimal	Full Thickness / Stage 3 or 4
Impregnated Gauze / AMD	Daily	Any	Any
Roll Gauze	Up to 3x / Day	Any	Any
Transparent	3x / Week	Minimal	Partial Thickness / Stage 2

Chart Documentation must support the dressings ordered and the medical records must contain:

- Type of wound
- Debridement
- Wound Thickness: Full or Partial, Stage, Grade
- Supplies ordered
- Indication of whether the dressing is being used as a **primary** or **secondary**
- Signature and date by clinician
- Location of wound
- Wound Measurements: Length, Width and Depth
- Drainage amount
- Frequency of dressing change

* Stalled is a wound that has not progressed toward a healing goal. (Must submit medical documentation to support)

Medicare guidelines provided by medical supplier.

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A Dedicated Wound Clinician

- A dedicated wound clinician can reduce costs by providing assessments and closer supervision of wound treatments.

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The Money Saved is Well Worth the Time Invested

- Once a system is in place it's easy to follow.
- The achieved savings, whether it's in nursing or finance, justifies the additional work hours.

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Lessons Learned

- More than just advanced wound dressings
- Many times, monitored therapies shortened the span of treatments.
- Team approach helped ensure the patients had sufficient supplies

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Key Takeaways

- Many wounds can qualify for Medicare Part B coverage as well as private insurances and partnering with a provider can significantly reduce the amount of products your facility has to supply.
- Urological, Ostomy and Trach supplies can also add to the savings
- Providers should also offer programs for learning opportunities (i.e. in-services on wounds, treatment applications and functions and many others)

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Questions?



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