

Outline

NAVIGATING LOWER EXTREMITY ARTHROPLASTY AND COMPLEX CARE

KNEE ARTHROPLASTY: WHY NOT ALL TOTAL KNEES ARE SURGICALLY BALANCED

- Manage extensor mechanism complication
- Manage the stiff knee
- Etiology of post-op extension and flexion deficits
- Unicompartmental knee arthroplasty (UKA) outcomes
- Long fixation components for valgus stress knee replacements
- Muscle activation patterns during walking and associations with TKA tibial implant migration
- CPM (Continuous Passive Motion) and implications under bundled payments
- Use of cryoneurolysis in multimodal pain management protocol
- Psychological comorbidity factors associated with non-compliance
- Restriction for return to sport

HIP ARTHROPLASTY: HOW TO AVOID DEFICITS AFTER THA

- Direct anterior approach's effect on readmission rates
- Reversible thalamic atrophy
- Avoid hip instability and limb length discrepancy
- Gait asymmetry
- Spinal instrumentation and impact on hip dislocation
 - THA patients with fixed spinopelvic alignment from standing to sitting at higher risk
 - Lumbar fusion involving the sacrum increases dislocation risk 8-fold
- Effects of piriformis tendon repair failure
- Electromyographic analysis implications
 - Effects on gluteus medius and gluteus maximus
- Restriction for return to sport

EVERYTHING YOU NEED TO KNOW ABOUT BUNDLE PAYMENTS

- Breaking down Bundled Payments for Care Improvement initiative (BPCI) and Comprehensive Care for Joint Replacement (CCJR)
- Breaking down Medicare's role in value-based reimbursement
 - Is your area of the country in the selected Metropolitan Statistical Areas outlined by Medicare?
 - How your regional location affects the cost variation in Medicare spending for total joint replacements?
- Impact on post-acute care practice settings

POTENTIAL PAYOFF FROM BUNDLING

- How to case cost analysis in bundled payments
 - What's the relationship of implant cost to total surgical case cost?
- Latest on performance benchmarking
- Why hospital quality scores matter
- How to create orthopedic physician report cards
- What is allowed by Medicare in gain-sharing with hospitals
- Minimize narcotic use with patients
- The latest news in how CMS will pay for post-acute rehab services
- The role of tele-rehab in total joint cases

KEYS TO IMPROVE PATIENT OUTCOMES

- Tools used in risk stratifying patients prior to surgery
- Quality tools and templates
- What outcome reporting does Medicare require
- The American Joint Replacement Registry data to improve outcomes
- How to influence hospitals into collaborating and gain-sharing
- Medicare waivers under the bundled payment programs
- Beneficiary rights

Target Audience

Physical Therapists • Physical Therapist Assistants • Occupational Therapists
Occupational Therapy Assistants • Rehab Managers • Case Managers
Nursing Home Administrators • Skilled Nursing Facility Administrators
Home Health Agency Administrators and Managers • Rehab Nurses

Live Seminar and Webcast Schedule

(Times listed in Central)

- 7:30 Registration/Morning Coffee & Tea
- 8:00 Program begins
- 11:50-1:00 Lunch (on your own)
- 4:00 Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon). Actual lunch and break start times are at the discretion of the speaker. A more detailed schedule is available upon request.

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Joint Replacement + Bundled Payments

What Every Therapist & Nurse Needs to Know for Optimal Treatment and Reimbursement

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- Better manage post-op squeaks, clicks, and clunks for THA and TKA without opioids
- Limit readmissions by risk stratifying patients pre-operatively
- Improve patient safety and outcomes while reducing the post-acute care episode
- Latest surgical trends in THA and TKA and where the future is headed
- How to ensure your home health agency, inpatient rehab facility, skilled nursing facility, or outpatient rehab clinic is reimbursed in the bundled payments

Tinley Park, IL
Wednesday
September 18, 2019

Madison, WI
Friday
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Arlington Heights, IL
Thursday
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Joint Replacement

+ Bundled Payments

What Every Therapist & Nurse Needs to Know for Optimal Treatment and Reimbursement

The challenges you face with patients undergoing outpatient total joint arthroplasty are steadily growing, especially in the era of Medicare’s bundled payments initiatives.

Ever evolving surgical techniques mean not every LE arthroplasty can be treated the same. There’s less time in the hospital, so you must be diligent to recognize and manage comorbidity dangers. You’re pushed to find opioid-sparing approaches for your patients. Add to this Medicare’s new bundle payment model and you might find yourself overwhelmed, stressed, and ready to make a job change.

Don’t let the new Medicare value-based paradigm get the best of you and your practice. Learn the best strategies for optimizing the episode of care by improving patient safety and outcomes. Better recognize and manage high-risk patients, avoiding readmission or a lapse in his or her recovery. Find creative ways to stay within your budget under the 90 days allotted to your care. Learn all the ins and outs on how you and your facility can overcome the challenges and experience the reward from bundled payments.

Take your care and ultimately your facility to the next level in this timely seminar. **Sign up today to position yourself to succeed in the era of bundled payment initiatives for the total joint episode of care!**

Speaker

MARK HUSLIG, PT, MHA, is the administrative director for Mercy Central Region of Therapy Services. Mercy Health system ranks among the top five in Truven Health Analytics and is a medical destination site for total joint arthroplasty. Mr. Huslig has more than 30 years of experience in the management of occupational, physical, and speech therapy, and is a certified ASTYM provider. He is an expert in Medicare and Medicaid regulations, specifically on issues related to payment reform initiatives. Mr. Huslig has successfully integrated at-risk payment methodologies contracting into rehabilitative services. He is a member of the American Physical Therapy Association and section member for Health and Policy, Orthopedics and Private Practice, along with serving as adjunct faculty for Missouri State University’s Occupational Therapy Program.

Speaker Disclosures:
Financial: Mark Huslig is an adjunct faculty member at the Missouri State University. He has an employment relationship with Mercy Hospital. Mr. Huslig receives a speaking honorarium from PESI, Inc.
Non-financial: Mark Huslig has no relevant non-financial relationship to disclose.

Objectives

- Examine how to transition to outpatient total joint replacements and the economics, protocols, and payment challenges you face.
- Classify the impact of technology in total LE joint arthroplasties on how you treat your patient.
- Design a plan of care in the face of comorbidity dangers to avoid readmission or lapse in recovery time.
- Analyze the restrictions for return to sports in hip and knee arthroplasty.
- Classify how reimbursement works for total joint arthroplasty under bundled payment initiatives.
- Utilize ways to avoid hip instability and limb length discrepancy after total hip arthroplasty.
- Apply new strategies for managing problematic stiff knee replacement.



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If your profession is not listed, please contact your licensing board to determine your continuing education requirements and check for reciprocal approval. For other credit inquiries not specified below, or questions on home study credit availability, please contact cepesi@pesi.com or 800-844-8260 before the event.

Materials that are included in this course may include interventions and modalities that are beyond the authorized practice of mental health professionals. As a licensed professional, you are responsible for reviewing the scope of practice, including activities that are defined in law as beyond the boundaries of practice in accordance with and in compliance with your profession’s standards.

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WISCONSIN PHYSICAL THERAPISTS & PHYSICAL THERAPIST ASSISTANTS: This course has been submitted to the Wisconsin Physical Therapy Association. Credit is pending.

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NURSES/NURSE PRACTITIONER/CLINICAL NURSE SPECIALISTS: PESI, Inc. is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation. Nurses in full attendance will earn 6.3 contact hours. Partial contact hours will be awarded for partial attendance.

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