Post Acute Medical Rehabilitation Hospital of Georgetown



Georgetown, Delaware Sussex County

Presentation to the Delaware Health Resources Board

December 12, 2019



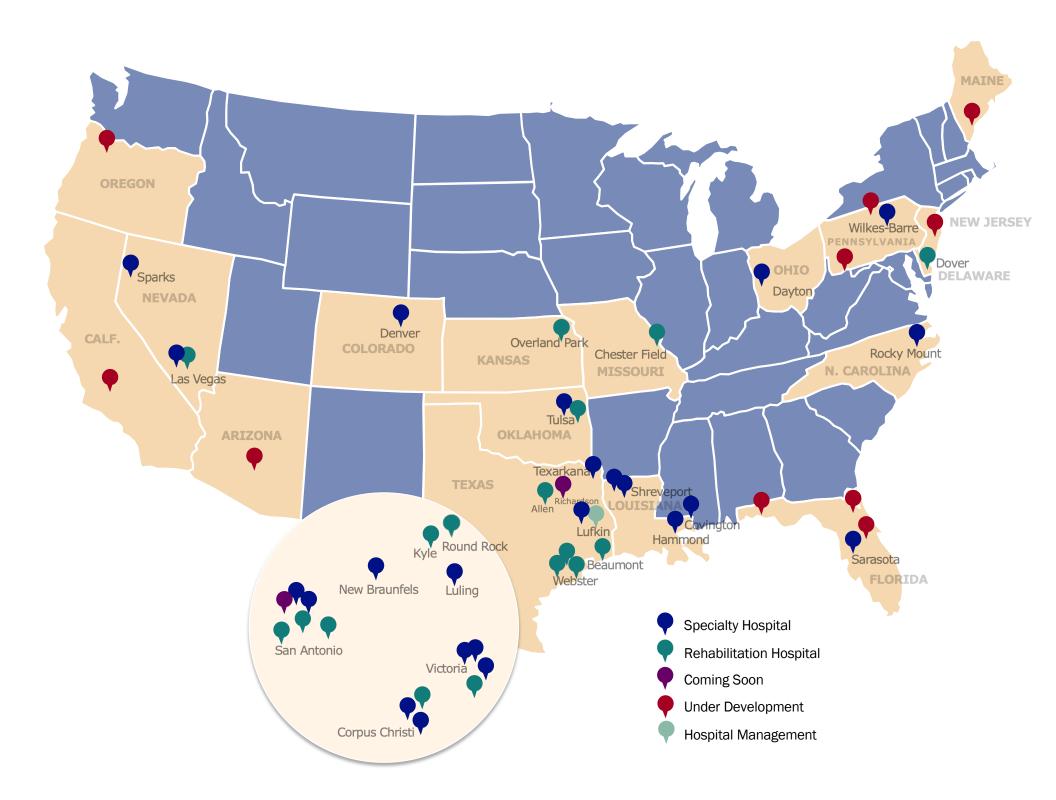
Agenda

- Overview of Post Acute Medical and Proposed Project
- CPR Review Criteria and Need for Proposed Project
- Additional Benefits to Delaware



Post Acute Medical

- Since inception, Post Acute Medical (PAM) has focused on providing high-quality post-acute care to long-term and rehabilitation hospitals in the U.S.
- Owns and operates 42 hospitals and 22 outpatient clinics
- Executive team collectively possesses over a century of experience running successful LTACHs, start-up IRFs, and outpatient clinics
- Corporate headquarters in Enola, PA
- Over 8,000 employees
- 700 patients served to date in PAM-Dover, which opened February, 2019





Proposal Overview

- 34-bed inpatient rehab hospital and outpatient clinic
- Freestanding hospital with <u>all</u> private rooms
- Featuring advanced therapy technology
- Located in Georgetown, opening in January 2023





PAM Rehabilitation Hospital of Georgetown



POST ACUTE Additional Project Details



- 22297 Dupont Boulevard, near intersection of US 113 and 9
- 42,000 SF
- \$17M capital investment



Inpatient Rehabilitation Facilities

- IRFs are licensed hospitals intended for patients who need close medical supervision and intense daily rehabilitation
- IRFs typically treat persons with:
 - Strokes
 - Neurological disorders
 - Spinal cord & traumatic brain injuries (TBI)
 - Joint replacements, hip fractures, and other orthopedic trauma
 - Amputation
- IRFs provide daily physician visits, 24/7 nursing care, a minimum of 3 hours of therapy 5 days a week



CPR Review Criteria

1. Relationship to HRMP

2. Need

3. Alternatives

4. Relationship to existing system

5. Long-term viability

6.Effect on cost and charges

7. Effect on quality



Effect on Costs

- Consistent with Governor's Executive Order 25
- <u>Necessary</u>: PAM Dover turning away 22 25 patients per month
- <u>Effective</u>: IRF care helps contain costs per case; appropriate IRF admissions have a history of low acute hospital readmissions and high direct to community discharge
 - 86% of PAM Dover patients discharged direct to community (national avg. is 76%)
- <u>Efficient</u>: Accept direct admit from home or ED without taxing additional healthcare services

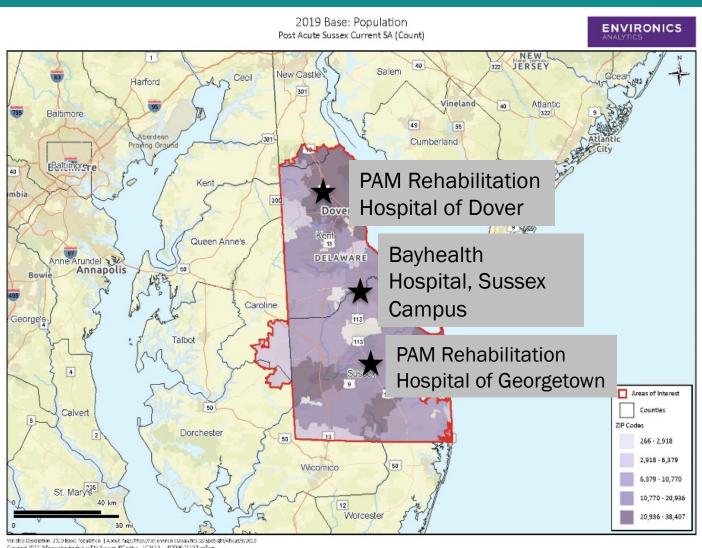


Project Need

- Georgetown has no IRF beds, Service Area has an IRF bed deficit
- IRFs in Delaware are virtually full (83% at Encompass Middletown, 81% at Bayhealth Sussex, 100% at PAM Dover) and Encompass Health in Salisbury, MD at 92%
- Even Delaware and Sussex nursing homes are becoming full; average of 89 percent occupancy rate.
- IRF patients benefit from beds close to home, friends, and family to maximize quality
- Private rooms offer better patient and family experience
- Freestanding facilities offer unique quality advantages



POST ACUTE Project Need (Service Area)



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Project Need (Calculations)

Notes		2019	2025
а	Total Service Area Population	418,303	450,976
b	Total Over 65 Service Area Population	97,134	116,963
С	IRF Admissions Use Rate	17.21	17.21
d	Admissions Over 65	1,672	2,013
е	ALOS per Admission	12.7	12.7
f	Days Over 65	21,233	25,567
g	% Medicare	65%	65%
h	Total Days	32,666	39,334
i	Beds at 85%	105	127
j	Market Share	90%	90%
k	IRF Beds Needed by Service Area Pop	95	114
I	In-migration	0%	0%
m	IRF Beds Available in Service Area	74	74
n	Market Beds Needed after Inmigration	95	114
0	Service Area Deficit	(21)	(40)

By 2025...

- 30,000 more people in service area
- 20,000 more over age 65
- Assume: Local use rate, ALOS
 12.7 days, 85 percent
 occupancy,90 percent retention
 of service area with no in migration
- Current deficit of 21 IRF beds, will grow to 40 beds



Relationship w/ Existing Healthcare System

- Beebe Healthcare
- Nanticoke Health Services
- Sun Behavioral Health
- Skilled Nursing Facilities
- Assisted Living Facilities
- Capacity to staff with Physical Medicine and Rehabilitation physician coverage today
- Nanticoke physician office nearby
- e-Bright and Aledade ACO



Alternatives for Service Area Residents

- Traffic congestion on U.S Route 1 is increasingly a deterrent for Sussex County resident use of services in Milford
- Southern Sussex County has no IRF beds
- Limited availability of IRF beds in eastern and western Sussex County
- The continuum of care has a gap. Skilled nursing, home care, and outpatient therapy are the only local options available
- PAM Dover is at capacity and turning patients away



Long-Term Viability

- Break even on cash flows in the 4th month
- Net-positive operating margins in 2nd year
- National supply contracts facilitate cost management
- Highly structured startup and pre-opening process



Quality Overview

- Access to the appropriate service to meet patients' needs
- Quality outcomes better than national averages at PAM and PAM Dover
 - Functional Improvement
 - Discharge to Home
 - Infection Rates
 - Re-Admission Rates



Additional Benefits to Delaware

- \$10.3M \$11.6M construction project in Georgetown
- 88 initial jobs created (\$5.2M annual salaries and benefits)
- Integration with Delaware Health Information Network
- Additional clinical training site for Delaware COI COI
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- Build a local community network of support for stroke, Parkinson's, and traumatic brain injury patients, families, and caregivers
- Most importantly, we will provide a new clinical service not currently available in Georgetown



Questions

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THANK YOU

