

2017 Disclosure Statement

Mission

To regain function and maximize independence on the journey towards home.

Vision

To provide quality service and coordinate care throughout the rehabilitation process to those we serve.

Core Values

The patient is at the center
Collaborative team work is our focus
Our culture is centered on compassion, integrity and respect
Patient and staff safety is our priority
Returning the patient to home is our goal

Patients served

St. Luke's Inpatient Rehabilitation Unit provides services for patients who have suffered functional loss due to a disabling illness or injury, including the following:

Stroke (CVA)	Cancer	Closed Head Injury	Polyarthritis
Neuropathy and Myopathy	Parkinson's Disease	Spinal Cord Injury	Multiple Sclerosis (MS)
Peripheral Nerve Injury	Guillain-Barre' Syndrome	Multiple Trauma	Amputations
Hip Fractures and Replacement	Other Medically Complex Conditions	Degenerative and Progressive Neurological Disorders	

Scope of Services

Persons served will receive a minimum of three hours each day of physical, occupational or speech therapy, Monday through Friday. In addition, Saturday or Sunday therapy is provided from at least one therapy discipline.

This program does not currently serve persons who are ventilator-dependent, comatose or have burn management needs. Routinely, persons served are age 18 and older.

St. Luke's Rehabilitation is a resource for suggestions for alternative placement when patients referred do not qualify for our program.

Hours of Operation

24 hours a day/7 days a week

Payer Source Information

Medicare pays for the cost of inpatient rehabilitation provided you meet criteria at admission and during your stay. Our physicians will determine whether you meet criteria. Medicare pays 100 percent of your inpatient hospital stay up to 60 days. After 60 days you may have a co-pay that you would be responsible for unless you have secondary insurance to cover your stay. Our social worker or case coordinator will inform you if you have a co-pay.

Private insurance, MN Medicaid and Managed Care Benefits will be verified prior to admission, and pre-authorization for admission will be obtained. This is not a guarantee of payment. Throughout the stay, hospital staff will work with the patient's insurance carrier to obtain continued authorization. Persons without insurance coverage are admitted only after approval by hospital administration. Third party funding sources, such as Worker's Compensation and Vocational Rehabilitation, can be explored as needed.

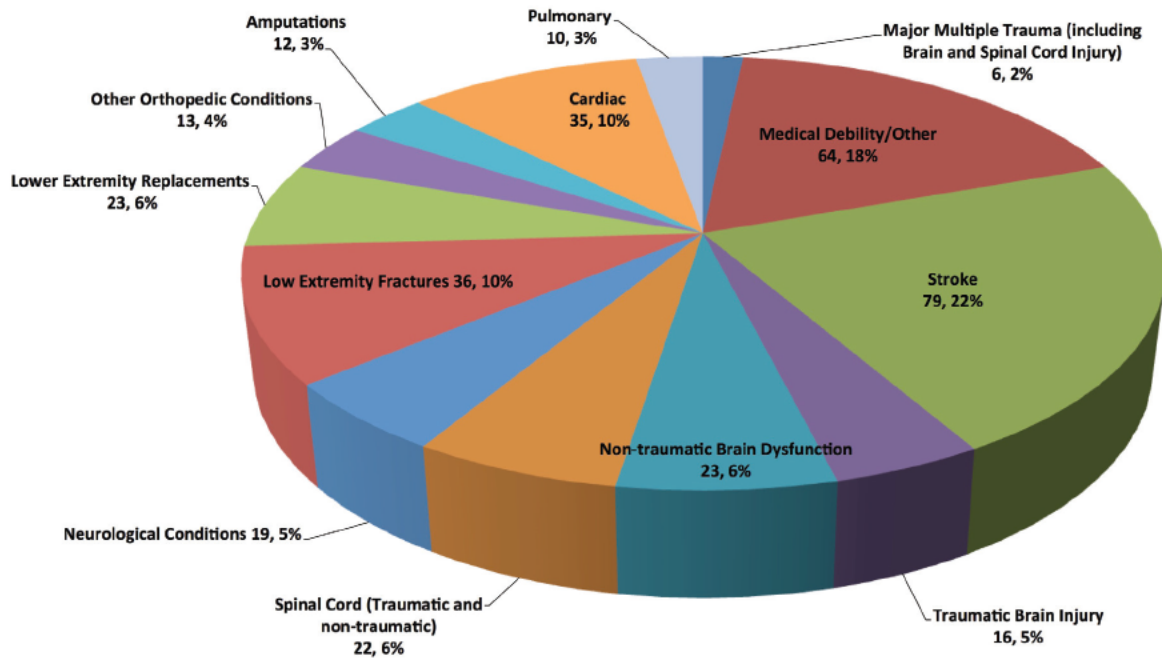
St. Luke's
Inpatient Rehabilitation Unit

915 East First Street
Duluth, MN 55805
218.249.5564

 **St. Luke's**
**Inpatient
Rehabilitation Unit**

Patient Outcomes - All Diagnosis

PERSONS SERVED BY DIAGNOSIS



PATIENT OUTCOMES

Reporting Period 01/01/2016-12/31/2016
Data Source: UDS (Uniform Data Systems)

PATIENT SATISFACTION

OVER 95% OF OUR PATIENTS WOULD REFER US TO FAMILY AND FRIENDS

OUTCOMES	ST. LUKE'S INPATIENT REHAB	NATION
AVERAGE STAY (DAYS)	11.2 Days	12 Days
AVERAGE AGE	70.7 Years old	68.9 Years old
DISCHARGE TO COMMUNITY	80%	80%
ADMISSION FIM (FUNCTIONAL IMPROVEMENT MEASURE)	66.3	63.9
DISCHARGE FIM (FUNCTIONAL IMPROVEMENT MEASURE)	92.6	93.2
FIM CHANGE (FUNCTIONAL ABILITY GAINED)	26.2	29.3
DAYS TO ONSET	8.4 DAYS	10.9 DAYS

FIM Scores represent a patient's functional independence. The higher the FIM Score the greater the patient's functional ability. Data obtained from UDS (Uniform Data Systems).

Many factors influence your length of stay, including severity of injury, previous health status and medical complications.

The St. Luke's rehabilitation team will work with you and your family to help determine the best discharge environment based on your needs at the time of discharge. If you are unable to return home, the team will assist you and your family in making other arrangements.

Patient therapy averages just over 4 hours (263 minutes) of therapy 5 days out of every 7. This represents 32% more therapy than is required by Medicare.

Accreditations

➤ DNV-GL Healthcare USA ➤ The Commission on Accreditation of Rehabilitation Facilities (CARF), including Stroke Specialty Program

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