OUTCOMES

Get The Insiders’ Dish On 4 Outcomes Tools

Decide which tool(s) would be best for your facility.

CMS has kept you quite busy this year, introducing new documentation requirements with four recommended outcomes tools. In Transmittal 63 (www.cms.hhs.gov/transmittals/downloads/R63BP.pdf) released Dec. 29, 2006, CMS named Focus on Therapeutic Outcomes Inc.’s FOTO Patient Inquiry, the American Speech-Language Hearing Association’s National Outcomes Measurement System (NOMS), the American Physical Therapy Association’s Outpatient Physical Therapy Improvement in Movement Assessment Log (OPTIMAL) and the Activity Measure-Post Acute Care (AM-PAC) tool, developed by the Boston University Health and Disability Research Institute, as recommended ways to measure your patients’ progress.

Important: CMS didn’t require you to use any of these tools, but you should check them out. They could turn out to be your best benchmarking friend — and you might need them down the road if CMS does decide to require them. Read on as Eli probes the makers of these tools for more details on how they work.

Get Benchmarking-Serious With FOTO

Who it’s for: Mostly physical therapists turn to FOTO’s Patient Inquiry because of its strong musculoskeletal focus, according to experts. But FOTO can also extend to occupational therapy and speech-language pathology because it addresses some neurological function, clarifies Al Amato, MBA, PT, president of Focus On Therapeutic Outcomes Inc. As far as rehab settings best suited for using FOTO, Amato says that users span the entire continuum of care, including outpatient and inpatient settings.

How it works: FOTO is a questionnaire the patient — not the therapist — completes via an intuitive software program whose questions progressively change based on the patients’ input to compute a classification score. The patient completes the questionnaire at admission and discharge, or at other intervals if the therapist sees a need.

Extra: If you want to benchmark your outcomes, FOTO links and compares your patient data to other rehab facilities nationwide that use FOTO. That’s a database more than 14 years old and approaching 2 million cases, Amato says.

“The FOTO data is great evidence for us as a company when we speak with insurance companies,” says Mitchel Kaye, director of quality assurance for PTPN, an independent physical therapy network that uses FOTO. “And each practice can get reports specific to body part, condition, referral, insurance company or by therapist in their office,” Kaye elaborates.

PTPN also enjoys the option to add additional screens to the tool.

Cost: Your facility or practice would pay an annual $450 fee for FOTO and then pay a usage fee of $1.50 per patient billed monthly, Amato explains. You can find out more about FOTO at www.fotoinc.com.

SLPs Can’t Go Wrong With NOMS

Who it’s for: NOMS is a tool designed specifically for speech-language pathologists across the continuum of care.

How it works: Unlike FOTO, which takes the patient’s perspective, NOMS is for a clinician to complete. “This is largely due to the cognitive nature of speech-language disorders,” explains Tobi Frymark, associate director of ASHA’s National Center of Evidence-Based Practice. “NOMS uses a series of seven-point rating scales known as ‘functional communication measures’ in the most common areas that SLPs treat adults,” Frymark continues.

NOMS also lets you compare your cases to its national database. The clinician completes the tool at admission and again at discharge, including demographics and information such as frequency and intensity of services, and then submits the data to ASHA’s national registry, Frymark explains.

The database is well established too, dating back to 1998. “Currently, 1,400 facilities participate, and that includes 2,500 registered NOMS users,” Frymark says.