



# HHEALTH CCARE CCOST

# EEVALUATION



Submitted by:

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HEALTH CARE COST EVALUATION  
OF:

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# PURPOSE OF REPORT

The purpose of this report is to assess the health care needs of [REDACTED]. [REDACTED] is a 4 year old male who has suffers from physical and cognitive delays. Recent records note the following diagnoses:

1. Hypoxic Ischemic Encephalopathy and Chronic Static Encephalopathy
2. Gastroesophageal reflux with G-tube (Requires gastrostomy feeding by pump)
3. History of Nissen Fundplication with re-do at age one
4. Oral motor Dysfunction
5. Overweight and obesity (per [REDACTED]) related to decreased energy needs and physical inactivity
6. Portacath in place (for frequent need of IV access)
7. Unprotected Airway (mother reportedly prefers no trach; a nasal trumpet is used intermittently to aid in airway patency; he requires frequent suctioning; baseline O2 saturations run somewhat low at 85-95%; Home oxygen is on stand-by)
8. Recurrent Aspiration Pneumonias (requires chest physical therapy)
9. History of Mandibular Distraction surgery on Feb. 21, 2007 (Also has history of surgery to tie off duct of submandibular salivary gland to help with oral secretions, however, no benefit is reported)
10. Seizure Disorder (not fully controlled with multiple medications; mother reports one recent seizure requiring CPR; Distal rectal valium ordered; continues to 2-6 focal seizures per week and occasional generalized seizures)
11. Spasticity (although he has low tone through neck and trunk, and a tenuous airway making treatment of spasticity very challenging--could further impair his airway/breathing). History of surgical releases to knee extensors and dorsiflexors.
12. Bilateral hip dislocations
13. Hearing Impairment (moderate sensorineural loss in both ears; has hearing aids)
14. History of urinary tract infections (neurogenic bladder is reported in medical record)
15. Global development delays

Currently, [REDACTED] lives with his parents, [REDACTED] and [REDACTED] and his two siblings in [REDACTED], [REDACTED]. He relies upon his critical care nurses to provide his cares and to ensure his safety.

[REDACTED] requires homecare services, equipment, supplies, medication and follow-up medical care. Outlined in this report will be an assessment of [REDACTED] health care needs and cost estimates of his needs to ensure that he lives a life that is as safe and as comfortable as possible.

The information for this report was obtained from the following:

- An interview with [REDACTED] mother, [REDACTED].
- Review of [REDACTED] health records and bills.
- Review of [REDACTED] school and therapy records.

## HEALTH CARE NEEDS

As one with numerous disabilities, [REDACTED] will face many health challenges and ongoing treatment. [REDACTED] physical disabilities include spastic quadriplegia, a neuromuscular problem affecting all four limbs. This disorder holds a host of consequences that will affect [REDACTED] development and ability to function. Some of these health issues include the following:

- Abnormal muscle tone
- Decreased range of motion
- Contractures
- Joint subluxation and/or dislocation
- Bone growth deformities
- Pain
- Scoliosis.

As a result of these disabilities, [REDACTED] ability to function is altered and he will be unable to perform daily living tasks as one can without these disabilities.

In addition to the numerous orthopedic concerns which [REDACTED] will need to deal with throughout his life, he is also prone to other health problems within his body system. These include the following:

- Cognitive disability
- Gastroesophageal reflux
- Feeding/growth/nutrition
- Vision
- Bowels - Constipation
- Bladder and bowel control
- Aspiration
- Communication - speech disorder
- Lack of Mobility

[REDACTED] requires management and treatment of the effects of his health problems by multiple health professions. A "team" approach is required by all to help [REDACTED] deal with his daily needs and functioning. This team of health care professionals include the following:

**MEDICAL/SURGICAL**

Neurologist  
Physiatrist  
Orthopedic Surgeon  
ENT  
Special Needs Pediatrician  
Gastroenterologist  
Ophthalmologist  
Pulmonologist  
Dentist

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**THERAPY**

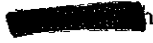
Physical Therapist  
Occupational Therapist  
Speech Therapist  
Orthosists  
Vision Therapist

**DAILY FUNCTIONING**

Parents  
Nurses

**MEDICATIONS**

Spasticity management  
Antacids  
Stool softeners  
Respiratory  
Seizure Control



**TESTING**

X-Rays

EEG's

Blood counts

**TREATMENT**

Orthotics/Bracing

Botox Injections

Surgical Procedures

Jaw manipulation for airway

[REDACTED]

The following is a list of Nursing Assessment Skills [REDACTED] has required due to his health condition.

### Neurological Status

[REDACTED] neurological status is impaired due to the brain injury. He suffers from a seizure disorder for which he requires medication and medical follow-up. He experiences seizures and tremors frequently. It is important that [REDACTED] caregivers monitor his neurological status. He also requires monitoring by a neurologist.

### Nutritional Status

Because [REDACTED] is unable to eat food orally, it has been necessary for him to rely upon gastrostomy tube feedings for his nutrition. A gastrostomy is a surgical opening into the stomach for feeding and medication administration purposes. It is necessary for his nurses to monitor the g-tube patency and stoma condition. In addition, [REDACTED] has difficulty with bowel movements and requires stool softeners.

[REDACTED] feedings must be regulated and monitored by his caregivers. It is also very important for the nurses to observe and treat the site at which the gastrostomy tube enters the stomach for skin breakdown or irritation. The site should be cleansed regularly. This area is very vulnerable to infections, and it is important that the area is cared for properly. Any changes must be reported to [REDACTED] physician.

[REDACTED]

### Orthopedic Status

[REDACTED] is prone to ongoing problems with his orthopedic status. He wears special braces on his feet and legs. He requires a daily exercise/therapy program. He has already required orthopedic surgery.

### Respiratory Status

Due to his disabilities, [REDACTED] requires a tracheostomy-like opening for adequate respiratory status. Respiratory care is a very important aspect of [REDACTED] care. The caregivers must suction out any excess secretions from [REDACTED] lungs. Sterile or clean technique must be maintained when suctioning [REDACTED], or cleaning his device, since any contamination to this area could result in respiratory complications such as pneumonia, aspiration or infections.

[REDACTED] requires lung treatments called nebulizer treatments. He receives medication instilled directly into his lungs. He will be prone to lung infections and may require antibiotics as appropriate.

The following is a list of nursing care provided to [REDACTED] in regards to his respiratory status:

### Integumentary (Skin) System

Due to [REDACTED] condition, he has decreased ability with his mobility, making him prone to developing a decubiti ulcer, which is a breakdown or hole in the skin which results from lack of proper circulation. [REDACTED] will always rely upon his caregivers to move him, reposition him and care for his skin adequately, in order to prevent breakdown.

Special care and attention must be given to the site around [REDACTED] gastrostomy. He requires a special ointment to be applied to his skin to prevent rashes and breakdown.

██████████h

## LIFE CARE PLAN GOALS

The Life Care Plan outlined in this evaluation proposes the following goals for ██████████. These goals are developed to provide his with adequate and safe care through out his life span, thus preventing or treating many medical complications.

- ① ██████████ will have access to home care services in order to meet his health care needs. The setting which this care is rendered will be one of care, love and support.
- ② ██████████ will have access to adequate medical supplies and equipment through out his life. The access to proper supplies and equipment will assist to prevent health complications of ██████████
- ③ ██████████ will have access to proper medication in order to control and prevent health complications from occurring.
- ④ ██████████ will have access to medical services in order to monitor and treat his health care needs.
- ⑤ ██████████ will have access to therapy services to enhance and maintain his level of functioning and prevent complications.

# HEALTH CARE COSTS

## HOME CARE SERVICES

Due to his special health care needs, [REDACTED] requires ongoing care, assistance and monitoring, by health care professionals, as well as his mother. He requires 24 hours/day of care from a nurse professional. [REDACTED] receives care and assistance with the following:

- Administer Respiratory treatment in times of respiratory compromise and PRN
- Assess effectiveness of respiratory treatment by listening to lung sounds, monitoring oxygen saturations, and watching for s/s of respiratory distress post treatment and PRN
- Assess sputum production, color, consistency, amount suction with Sterile Yanker/8fr catheter PRN to maintain clear et patent airway
- Chest physiotherapy-postural drainage/cupping/percussion BID at a length of 10-20 min or as tolerated. May decrease frequency if client does not tol. Increase CPT treatments to QID s/s resp illness/compromise
- Continuous medical monitoring and assess respiratory status. Monitor O2 sats continuous: administer O2 for SaO2 < 91%
- Assess demands and care needs of patient daily
- Assess needs for additional resources daily
- Assess bowel patterns every 4 hours and PRN
- Assess nutritional status every 4 hours and PRN. Monitor for s/s/ constipation utilizing PRN meds when needed
- Assess skin integrity around stoma/instruct in site care
- Skilled Nurse twice daily with ADL'S and PRN. Clean GT site BID with soap and H2O. Use 1/2 strength H2O2, PRN to clean GT site if drainage present
- Change NG/gastrostomy tube every 30-45 days and as needed. If Mickey falls out, replace immedietly. If new Mickey button not avail reinsert old button until new button avail. Always have extra Mickey button avail
- Skilled nursing 24 hrs/day, 7 days/week
- Assess & identify complication from IV/TPN, every shift
- Assess for infection of IV site/instruct in signs/symptoms of same monitor site for redness, swelling, or drainage. Report immediately to parent/MD if any S/S noted.

The following shows the cost of the nursing care which [REDACTED] receives from nurses:

\$55.00 average/hour x 24 hours/day x 365 days .....\$ 481,800.00

██████████

Due to his health status, ██████████ also requires numerous supplies and pieces of equipment in order to function daily. The following is a list of the major supplies, equipment and services which ██████████ requires:

### SUPPLIES

ITEM	COST PER ITEM	NUMBER PER YEAR	COST PER YEAR
<b>• Nutrition</b>			
Mickey Tubes	\$ 248.00	5	\$ 1,240.00
Feeding Bags	\$ 299.00	12	\$ 3,588.00
Feedings	\$45.00/case	91	\$ 4,095.00
Tape	\$ 4.00	104	\$ 416.00
3 cc	\$ 16.00	12	\$ 192.00
6 cc	\$ 32.00	12	\$ 384.00
12 cc	\$ 32.00	12	\$ 384.00
60 cc	\$ 6.00	24	\$ 144.00
Tube Extensions	\$ 80.00	12	\$ 960.00
<b>• Skin Care</b>			
Skin Cream	\$ 6.25/bottle	6	\$ 38.00
Sterile Tips	\$ 9.25/box	6	\$ 56.00
Ora Gel	\$ 6.00	6	\$ 36.00
Bactroban			\$ 40.00
Applicators	\$ 30.00	12	\$ 360.00
Vaseline/Chapstick	\$ 2.00	24	\$ 48.00
Alcohol Wipes	\$ 3.00/box	52	\$ 156.00
<b>• Bowel and Bladder Care</b>			
Diapers	\$ 80.00/case	22	\$ 1,760.00
Diaper Pail Refills	\$ 6.00	52	\$ 312.00
Gloves (large)	\$ 10.00/box	24	\$ 240.00
Gloves (Medium)	\$ 10.00/box	24	\$ 240.00
Triple Paste	\$ 6.50/case	52	\$ 338.00
4 x 4 Sponges	\$ 12.00/bag	5	\$ 60.00
2x2 Drain sponges	\$ 19.00/box	30	\$ 570.00
Attends Wipes	\$ 5.00/box	24	\$ 120.00

•Respiratory Care

Suction Catheters	\$ 374.00/case	12	\$ 4,488.00
Concentrator	\$ 300.00/mo	12	\$ 3,600.00
Naso-pharyngeal airway	\$ 85.00/box	2	\$ 170.00
Neo-tech catheter	\$ 156.00/case	2	\$ 312.00
Sterile Water	\$ 120.00/case	15	\$ 1,800.00
Oxygen Tanks			
M Tank	\$ 50.00	12	\$ 600.00
A Tank	\$ 64.00	12	\$ 768.00
F Tank	\$ 64.00	12	\$ 768.00
Suction Canisters	\$ 8.50	52	\$ 442.00
Oximeters	\$ 48.00	52	\$ 2,496.00
Corragated Tubing	\$ 25.00/box	4	\$ 100.00
Hudson Mask	\$ 2.00	52	\$ 104.00
Nebulizer Kits	\$ 14.00/box	12	\$ 168.00
Misc. Supplies			\$ 500.00
<b>Average Yearly Cost:</b>			<b>\$ 32,093.00</b>

**EQUIPMENT**

The follow is a list of the major pieces of adaptive equipment that [redacted] requires in order to function daily.

Item	Cost per Item	Replacement Ratio per years	Yearly Average Cost
<b>• Mobility</b>			
<u>Wheelchair</u>	10,000.00	5	\$ 2,000.00
Wheelchair Maintenance	\$ 500.00	1	\$ 500.00
<b>• Transportation (Handicapped modifications for vehicle)</b>			
Modifications to Van .....	\$ 17,650.00	7	\$ 2,521.00
<b>• Daily Functioning</b>			
Therapy Stander	\$ 3,000.00	10	\$ 300.00
Adaptive Toys Allowance	\$ 500.00	1	\$ 500.00
Bath Chair	\$ 600.00	10	\$ 60.00
Hospital Bed	\$ 2,000.00	10	\$ 200.00
Hoyer Lift	\$ 2,500.00	10	\$ 250.00
Adaptive Braces	\$ 1,500.00	2	\$ 750.00
Feeding Pump	\$ 1,130.00	10	\$ 113.00
Hearing Aides	\$ 1,200.00	4.5	\$ 267.00
Batteries	\$ 32.50	12/year	\$ 390.00
Nebulizer			
Stationary	\$ 280.00	2	\$ 140.00
Portable	\$ 600.00	2	\$ 300.00
Suction Machine			
Portable 1	\$ 350.00	2	\$ 175.00
Portable 2	\$ 350.00	2	\$ 175.00
Misc. Equipment			\$ 500.00
<b>Average Yearly Cost: .....</b>			<b>\$ 9,141.00</b>

[REDACTED]

MEDICATION

[REDACTED] requires several medications on a regular basis and on a PRN (as needed basis). Most of his medications are administered through his Mickey gastrostomy tube. The following is a list of his current medications and their yearly cost:

MEDICATION	MONTHLY COST	YEARLY COST
Phenobarbital	\$ 14.00	\$ 168.00
Klonopin	\$ 52.00	\$ 624.00
Topamax	\$ 407.00	\$ 4,884.00
Poly-vitamin Drops	\$ 9.00	\$ 108.00
Robinul	\$ 275.00	\$ 3,300.00
Lamictal	\$ 850.00	\$ 10,200.00
Prevacid	\$ 180.00	\$ 2,160.00
Folic Acid	\$ 12.00	\$ 144.00
Reglan	\$ 12.00	\$ 144.00
Tylenol		\$ 20.00
Albuteral	\$ 43.00	\$ 516.00
Lotrimin ointment		\$ 40.00
Ibuprofen		\$ 20.00
Miralax	\$ 12.00	\$ 144.00
Diastat		\$ 365.00
Calmoseptine		\$ 40.00
Hypotears		\$ 40.00
Beneprotein	\$ 12.00	\$ 144.00
Yearly Cost.....		\$ 23,061.00

[REDACTED]

**MEDICAL SERVICES**

[REDACTED] requires regular medical care and follow-up. The following is an estimate of the annual cost of the minimal required medical care that should be provided to [REDACTED]. This does not include any treatment for complications which may occur. This includes comprehensive follow-up and evaluations by the health care team.

Estimated Annual Cost .....\$ 20,000.00

**SCHOOL AND THERAPY**

[REDACTED] requires occupational and physical therapy services. The following is the value of therapy services which [REDACTED] requires.

**Occupational Therapy**

\$125.00/session x 3 session/week x 52 weeks .....\$ 19,500.00

**Physical Therapy**

\$125.00/session x 3 session/week x 52 weeks .....\$ 19,500.00

**Estimated Annual Cost .....\$ 39,000.00**

[REDACTED]

## HOUSING MODIFICATIONS

Due to [REDACTED] health care needs, he and his caregivers should have access to a house which is modified for one in a wheelchair. These housing features are as follows:

- An environment in which all cares and living space for [REDACTED] are provided on one level, including his bedroom and bathroom.
- Features to accommodate one in a wheelchair, including widened doorways and floor surfaces which are easy to maneuver on.
- A bathroom which is accessible to one in a wheelchair, which includes a roll-in shower, roll-under sink, a raised tub and extra storage space for the supplies required.
  - Ramps into and out of all doors.
  - An attached garage.

It is essential for [REDACTED] safety and the safety of his caregivers, that he have an appropriate living environment to accommodate his needs as one in a wheelchair. (The cost of such features listed above may be obtained from a housing contractor.)

[REDACTED]

# COST SUMMARY

## YEARLY COST SUMMARY

The following is an estimate of the yearly cost of [REDACTED] health care needs.

### HOME CARE SERVICES

Average yearly cost.....\$ 481,800.00

### SUPPLIES

Average yearly cost.....\$ 32,093.00

### EQUIPMENT

Average yearly cost.....\$ 9,141.00

### MEDICATIONS

Average yearly cost.....\$ 23,061.00

### MEDICAL SERVICES

\*Average yearly cost.....\$ 20,000.00

### THERAPY

Average yearly cost.....\$ 39,000.00

### HOUSING MODIFICATIONS

Cost .....Undetermined

\*This does not include the cost for treating complications,  
hospitalizations or surgery.

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**Estimated Annual Cost .....\$ 605,095.00**

