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Therapeutic house calls

By Stacey Burling

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What Al Grubb, a physical therapist, did last week with Blanche Souder, an 88-year-old woman who cracked a pelvic bone while on vacation over the summer, might seem unremarkable.

As he has once a week since Sept. 7, Grubb went to Souder's house in West Deptford. He helped her with simple exercises, watched her go up and down the stairs, and had her do some "distance" walking in the house. All the while, he monitored her blood oxygen. Souder, a robust, outgoing woman, has lung disease and Grubb was helping her to recognize when to rest and when it's OK to push it.

Grubb didn't stay long. Souder is about to graduate back to the independent life she had before she fell.

That, said Grubb's boss, Tim Fox, is remarkable.

As modern medicine keeps patients alive longer, helping people like Souder stay self-sufficient has major fiscal and social implications.

Fox has built an unusual and rapidly growing company - Fox Rehabilitation in Cherry Hill - around taking physical therapy to the homes of Medicare patients like Souder, who, in much of the country, could get such treatment only if they went to an outpatient office. He argues that they're more likely to do their exercises if a therapist comes to them and that exercise delays a spiral of physical decline that often leaves the elderly frail and dependent.

"That's where the slippery slope begins, when they aren't able to do those things they used to do with the confidence with which they used to do them," said Fox, a trim 39-year-old with chin-length, TV-actor-blond hair.

The argument seems to be resonating with doctors, who write prescriptions for Fox's services. The company, which Fox founded in 1998, now has 600 employees, including 400 physical, occupational, and speech therapists. They make 10,000 visits a week to homes and assisted-living facilities in seven states. Fox says his company grew by 48.5 percent last year and now grosses \$40 million to \$45 million a year.

It's not hard to see why Fox, who seemed barely able to contain his exuberance as he discussed his company, is an effective salesman. Among his inspirations, he counts God, Deepak Chopra, business-management tools developed by L. Ron Hubbard, and the positive-thinking book *The Secret*. He races his Aston Martin as a hobby because he likes speed with control. With a noticeable trace of his childhood British accent, he talks with earnest passion about helping geriatric patients.

The company, he says, is working with the "oldest of the old, the frailest of the frail and changing their lives moment by moment, and I'm not overdramatizing."

Take Souder. She is not frail, and, as she said after she completed her therapy session, "not bad for being two years from 90." But she returned from vacation with a walker, unable to climb her steps or drive. She couldn't even lift her foot off the ground while sitting. Her sister-in-law came every morning to help her. Friends moved everything she needed downstairs. Souder was improving on her own but decided to accept her doctor's suggestion to let Fox's staff work with her.

The first time Grubb came, he encouraged her to try to climb the 13 steps to the second floor. She found out she could do it. "After that," she said, "I said, 'Hey, I'm going up to my own bed.' "

This is exactly the kind of small victory that Fox says matters. Without the extra help, many elderly people in this situation never go back upstairs to the bed they've slept in for decades. They get a hospital bed on the first floor and gradually exercise less. They get weaker and their balance suffers. One day they fall and it scares them so much they move around even less. Maybe they fall again and end up with a walker. It gets harder to make their own lunch and get dressed. Then, it's on to assisted living or a nursing home.

Elderly patients often drop out of outpatient care, Fox said. They find it hard to get to the office or they need more attention than the therapists, who typically juggle several patients at once, give them.

Fox became interested in physical therapy while watching his parents, who moved to New Jersey from England when he was in fifth grade, struggle with cancer. Both died when he was 18. He worked his way through physical-therapist training at Thomas Jefferson University and took a job in home care when most of his classmates were gravitating to higher-paid and more prestigious jobs in sports medicine.

Fox, who no longer works with patients, found he liked the elderly. "They have so much to offer. Just to sit and listen to them is a blessing," he said. "To be able to help them change their lives and help them do things they once thought impossible is pretty rewarding."

What he didn't like is that people in traditional Medicare home care didn't get a high enough "dose" of physical therapy. If the dose is too low, he said, the therapy is ineffective. Older people can often handle more exercise than people think, Fox said. "We're so afraid of doing harm that we're not doing good."

In 1998, Medicare changed its rules so that physical therapy could be delivered in the home under Part B, Medicare's outpatient arm. That's when Fox started his house-call company. At the time, he hoped there would be enough business to bring three other therapists into the company.

Cindy Krafft, a Massachusetts consultant who heads the home-health section of the American Physical Therapy Association, said most therapists have not wanted to enter Fox's niche because they can make more money if patients come to them in outpatient offices. She said Medicare carefully scrutinizes home physical-therapy services for medical necessity and has been doing a lot of documentation review. She said sometimes it's better for people to go to a physical-therapy office because patients need to change their routines and get out of the house.

Fox says his company, which is typically paid about \$120 for an hour-long visit, is able to make money because of its volume.

Laura Gitlin, a sociologist who directs the Jefferson Center for Applied Research on Aging and Health, said Fox's company addressed "huge unmet needs." She said home therapy could lengthen lives and lessen the burden on caregivers.

"He is doing something that is desperately needed for the older adults," she said of Fox, who is a member of Jefferson's board of directors.

Gitlin's program, which has conducted research with Fox, has also started a home-based program aimed at people with dementia and their caregivers, funded by Medicare Part B.

Souder said physical therapy worked for her. When she first returned home, she didn't want to exercise. "I just wanted to sort of relax. I just wanted to be by myself," she said. When the pain wouldn't go away, she decided to buckle down.

"I would have eventually gotten better, but I think therapy has truly helped," she said.

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