Overcoming Barriers to Accessing LSVT BIG® and LSVT LOUD® Treatment

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Objectives of Presentation

• Define LSVT LOUD and LSVT BIG
• Describe evidence-based practice
• Discuss Barriers and Solutions
  • Dosage Barriers
  • Reimbursement
  • Misinformation
  • Not enough LSVT Certified Clinicians
• Next steps – how to get started

Plan for Webinar

Logistics
Brief Review
Resources Available
Address your questions and real-world implementation challenges
Disclosures

• All of the LSVT faculty have both financial and non-financial relationships with LSVT Global.

• Non-financial relationships include a preference for the LSVT BIG and LSVT LOUD as a treatment techniques.

• Financial Relationships include:
  Dr. Cynthia Fox receives lecture honorarium and travel reimbursement and has ownership interest in LSVT Global, Inc. Laura Gusé is an employee of LSVT Global, Inc. All of the LSVT Faculty receive consulting fees, lecture honorarium and travel reimbursement from LSVT Global, Inc.

Define LSVT LOUD and LSVT BIG

Lee Silverman Voice Treatment

LSVT LOUD – speech therapy to improve communication

LSVT BIG – physical or occupational therapy to improve movements

Rehabilitation (ST, PT, OT) is becoming a routine part of management in PD

To provide symptomatic relief, improve function

Pharmacological (L-dopa) Neurosurgical (DBS-STN)

Speech, Physical Occupational Tx (Empower)

Kleim & Jones, 2008; Kleim et al., 2003; Zigmond et al., 2009
LSVT Programs
Administered in an intensive manner to challenge the impaired system.

Techniques specific to PD-specific deficits!
- bradykinesia/hypokinesia
- and kinesthetic awareness (sensory deficit)

LSVT is Intensive and High Effort
Treatment delivered 4 consecutive days a week for 4 weeks

- Individual 1 hour sessions (↑ repetitions)
- Daily homework practice (all 30 days of the month)
- Daily carryover exercises (all 30 days of the month)
- LIFE LONG HABIT OF PRACTICE!

Why is the dosage standardized?
RESEARCH...which we will talk about next
Evidence Based Practice

Exercise is medicine.

This is evidence based practice.

25+ year journey from invention to scale-up
Over 8 million dollars in NIH funding; Ramig PI

1987-89: Initial invention; Pilot data (Scottsdale)
1989-91: Office of Education OE-NIDRR
1991-94: OE-NIDRR
1990-95: NIH funded EMG, Kinematics
2002-07: NIH funded RCT Spread of effects
2007-12: NIH funded RCT, Imaging
2001-02: Coleman Institute (PDA; LSVTC)
2002-04: NIH and M J FOX Foundation PDA (R21)
2002-04: Coleman Institute (VT; LSVTVT)
2004-06: NIH LSVTVT (R21)
2004: Coleman Institute (LSVT Down Syndrome)
2004-07: LSVT Dissemination
2006: Technology-enhanced Clinician Training (SBIR)
2009: ONLINE LSVT LOUD Workshop (Phinney grant)
2010: Technology-enhanced LSVT LOUD delivery (SBIR)

Advances in Clinical Efficacy
(Ramig et al, 1995; 1996; 2001a; 2003; Goetz, 2003)

Cross-system effects, Neural changes

- PET
- El Sharkawie, Logemann (2002)
- Rong & Dromey (1996)
- Baker (1999)
- Narayama (2010)
- Spiegel, Bond (2003)
- Dromey, (1995)
- Sapir (2007; 2010)
- Taskoff (2001)
- El-Sharkawie (2002)
- Rong & Dromey (1996)
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Research data supporting a standardized dosage and predictable outcomes helps assure for the patient, physician, therapist what to expect.

Can LSVT BIG or LSVT LOUD be delivered in fewer than 16 visits?
Can LSVT BIG or LSVT LOUD take more than 16 visits?

NO

YES
Barriers and Solutions

Dosage Barriers

Barriers or Gates?

Dosage Barriers

Challenge 1: PWP can’t come to therapy that often of that many visits because of transportation, or geographical barriers.

Challenge 2: PWP can’t fit the treatment into his/her own schedule.

Challenge 3: PWP does not want to participate in intensive therapy.
Solutions!

• Schedule a time when you can focus on YOU!  Plan for a time with no interruptions, such as trips or major life events.

• LSVT protocols will keep you at your peak function longer so you can do the things you need or want to do! It may even help you to continue your job longer, so 16 hours of your life is worth it!

Solutions!

• Some PWPs temporarily stay near an LSVT Certified Clinician when geography is a barrier

• Start “recruiting” your support team now! PD is for life and your loved ones may be honored to help!

• Low motivation- Recognize this can be part of PD first of all. It is NOT laziness! LSVT BIG and LSVT LOUD will give you the energy and motivation you need to do the things you LOVE to do!

How much time is it really?

16 hours of treatment

Less then one full day’s time

PD may last 10-20 years or more (87,600 – 175,200 hours of living with PD)

VERY SMALL investment for HUGE potential return!!!
“I resorted to my endless list of excuses – it was too far to drive, gas was too expensive, four days a week for six weeks was too much of a commitment, my dog would miss me…”

“Get off your couch, stop making excuses (gas is cheap these days!), and find a LSVT therapist near you! You have nothing to lose and oh so much to gain.”

-Doreen Erasmus
Deen’s Day Trippers
http://www.unitywalk.org/weblog/?p=2942

Barriers and Solutions
Reimbursement
Reimbursement Barriers

Challenge 1: Insurance authorizes a number which is less than 16 sessions of therapy.

Challenge 2: PWP is already beyond the annual therapy cap.

Challenge 3: PWP is apprehensive about insurance denial.

Potential Solutions!

• Therapist should seek authorization for all visits up front
• Ask for a personal case manager with your insurance company
• Seek to understand your policy. Ask questions! Advocate for you AND for others with PD! Patients’ actions make a difference!!!!

Potential Solutions!

• When finances are a barrier, look for help: financial counselor at medical institution, PD organizations, personal or community fundraising, and shop for insurance plans! PD is for life-plan well!
LSVT BIG and LSVT LOUD are Eminently Reimbursable!

- Research on LSVT protocols
- Clinical outcomes-Consistent Functional Improvements
- Subjective Patient Reports and Surveys
- Experiences of LSVT BIG Experts who've provided LSVT BIG to thousands of patients

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LSVT eLOUD

Telepractice

LSVT LOUD Companion

Funded by: NIH-NIDCD & Michael J. Fox Foundation

www.LSVTGlobal.com

Reimbursement for LSVT eLOUD™

LSVT eLOUD

Telehealth/Telemedicine

Varies state to state

Check with individual policies

Private pay may be an alternative
How Do Patients Make Choices?

Treatment Planning: A Team Approach

Therapist’s Role
- Educate on LSVT BIG and other therapy options
- Educate on the science
- Education on potential personal value to the pt.
- Give patient the choice – respect patient autonomy

Patient’s Role
- Listen to the provider’s recommendations and education
- Make a choice based on information given and personal circumstances and values
- Follow through with treatment plan

Barriers and Solutions

Misinformation
Misinformation Barriers

Challenge 1: PWP thinks LSVT BIG or LSVT LOUD does not work because he/she did not truly receive LSVT

Challenge 2: Physician does not believe in LSVT because the patients he referred did not truly receive LSVT

Challenge 3: PWP thinks fitness he already engages in is enough

Challenge 4: PWP thinks learning the LSVT BIG exercises he saw on the LSVT BIG Homework Helper DVD or his friend’s exercise handout will result in the same effects

Education

Make sure what you receive is the REAL Thing!

There is NO modified, based on, altered, or “kinda sorta” LSVT BIG or LSVT LOUD!

It either IS LSVT – which has proven efficacy...
or it is NOT LSVT – which has no proven efficacy.

It is so much MORE than a set of exercises!

How can you tell if it’s “the real deal”???

Five questions to ask LSVT BIG and LSVT LOUD therapists

1. How many LSVT LOUD/LSVT BIG clients have you treated?
2. What are your typical outcomes?
3. Do you have a follow-up/maintenance plan for your clients?
4. Is your LSVT LOUD/LSVT BIG Certification current?
5. Do you deliver the gold standard dosage of LSVT LOUD/LSVT BIG? (4 days a week for 4 weeks, individual 60 minute sessions, with daily homework and carryover assignments)
Barriers and Solutions

Not enough LSVT Certified Clinicians

Potential Solutions!

- LSVT Global is training more clinicians everyday!
  - Up to 8 workshops per month all over the world!
- ONLINE Training is now available for both LSVT BIG and LSVT LOUD
- LSVT eLOUD can help to reach patients in remote areas

What can you do?
- Advocate and Ask! If LSVT is not offered in your area, speak to your neurologist and to your local therapists. Persist!
- Support a therapist- talk to your support group
Next Steps: How to get started!

LSVT BIG and LSVT LOUD are One Choice
Effective
Evidence-Based
Functionally Relevant

How to get started with LSVT LOUD and LSVT BIG
• Ask your doctor for a referral and a prescription for a speech or physical/occupational therapy evaluation and treatment
• Visit www.lsvtglobal.com to find an LSVT LOUD or LSVT BIG Certified Clinician in your area
  • Click on “Find a Clinician”
  • Select the desired type of clinician and enter location information
• DVDs available to introduce you to voice and movement exercises used in LSVT LOUD and LSVT BIG programs: www.lsvtglobal.com/products
Take Home Points

• You may encounter barriers from time to time
• LSVT BIG and LSVT LOUD are reimbursable and have great value.
• LSVT BIG and LSVT LOUD are one choice to treat the symptoms associated with Parkinson’s disease
• Often barriers can be overcome with education and advocacy
• If a barrier can’t be overcome, choose a different treatment option, but do NOT alter the LSVT protocols.

Further Information and Resources

• LSVT Before/After Videos
• Webinars – FREE for the PD Community!
• LSVT Clinician Directory- www.lsvtglobal.com
• LSVT BIG and LSVT LOUD Homework Helper DVDs
• LSVT LOUD Companion Home Edition
• Future Development: LOUD for LIFE® and BIG for LIFE®

“It is possible to take charge of your life, even with Parkinson’s.

It is possible for your will to override your brain.

It is possible to have Power Over Parkinson’s”

Sharon Kha, LSVT BIG and LSVT LOUD Graduate
Thank you!
Questions???

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