

# A Journey in Developing an Independent Continence Practice for Long Term Care (LTC)



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## Purpose

This poster discusses the steps in setting up an independent continence practice for the Advanced Practice Nurse (APN) and reports on the initial experiences.

## Opportunity

CMS F-Tag 315 mandates that all patients in LTC with incontinence be evaluated for optimal bladder restoration to improve continence status and quality of life. It also provides a window of opportunity for continence nurse specialists to implement individualized assessment and treatment plans while satisfying an entrepreneurial dream. (Smith, 2000).

### Prerequisites:

- Motivation: Dare to dream of having a successful and lucrative independent continence practice. **You Must Want This for Yourself!**
- Surround yourself with a support team and mentor who has been successful in practice.
- Complete a site visit with your mentor to visualize practice and continence care of patients in LTC.
- Establish contract and fee for mentorship.



## Partnering with LTC

Identify and establish relationships with key LTC facilities.

- Personally meet with LTC administrator and DON to discuss opportunities to assist them with the F-Tag 315.
  - Educate all staff to services & incontinence management through an in-service and ongoing support.
  - Develop key staff at all levels in the facility to participate in the program.
  - Determine lines of communication for orders, Primary Care Provider & problems.
- Set date for first **'Continence Clinic'** and determine the location.

## Develop a Formal Structure for the Independent Practice

Determine name of business, apply for an EIN (employer identification number).

- Establish your business as a distinct entity by forming a limited liability company (LLC) \*\*.
- Obtain professional liability insurance (malpractice insurance).

Apply for Medicare, Medicaid and National Provider No. (may require 4-6 weeks to obtain).

- Review reimbursement regulations in **YOUR** state since getting paid for services will define financial success.
- Determine if a supervising/collaborative physician is required for claims. If so, negotiate relationship (i.e. collaborative physician is not required in Iowa, but is required in Minnesota).

Procure business supply list and costs.

- Develop forms and educational materials. (i.e. Super Bill, initial and follow up progress notes, etc).

Identify a business to work with your practice that provides coding, billing and collection services.

### \*\*Advantages of an LLC:

1. **Limited Liability:** For the members of an LLC, liability is limited to the amount of capital which the member has invested in the LLC. Therefore, members of an LLC are offered the same liability protection as a corporation's shareholders.
2. **Pass-Through Taxation:** LLC's allow for pass-through taxation. That is, the earnings of an LLC are only taxed once.
3. **Flexible Management Structure and Flexible Ownership:** LLC's are generally free to establish any organizational structure agreed on by its members.

*The APN will need to individualize information in this poster based up state regulations and advice from qualified business professionals.*

## Challenges



## Benefits

1. Substantial work, time & business expertise required to establish a business.	'Cutting Edge' Service & improved resident care with F-Tag 315 requirements.
2. Delay of 4 to 6 months for reimbursement (start up and ongoing expenses immediately).	Independent Practice (lucrative potential).
3. Must be self motivated and tenacious.	Develops practitioner's perseverance & ability to leap over hurdles gracefully.
4. Unforeseen changes.	Develops practitioner's flexibility.



*Celebrate success of every resident you assess to improve their continence status AND a family celebration with that first REAL pay check for providing continence services!!*

## Summary

Although time consuming and not for everyone, the development of an independence continence practice can be both fiscally and professionally rewarding. Improved quality of life for patients who suffer from incontinence optimizes care while enhancing the LTC image.

## References

Smith, DB. (2002). Establishment of Continence Services. In DB Doughty (ED.), *Urinary and Fecal Incontinence: Nursing Management*, 2nd edition. St Louis: Mosby, Inc.  
 Hurlow, J & Smith DA. Tag F315: An opportunity for WOC nurses. *JWOCN*. 2006;33(3):296-304.