

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE WESTERN DISTRICT OF TEXAS  
SAN ANTONIO DIVISION**

<b>IN RE:</b>	§	<b>CASE NO.</b>
	§	
<b>Millennium Home Health Care, Inc. DEBTOR</b>	§	<b>16-51822-11</b>
	§	
	§	<b>CHAPTER 11</b>
	§	

**OMBUDSMAN REPORT**

Pamela Rose, the patient care ombudsman (the “Ombudsman”) appointed in the Chapter 11 case (the “Case”) of Millennium Home Health Cars, Inc., (the “Debtor”), submits her report.

1. On August 10, 2106 (the “Petition Date”), the debtor filed a voluntary petition for relief under Chapter 11 of the bankruptcy Code. In its petition, the debtor designated itself a “health care business”.
2. On September 20, 20116, Ms. Pamela Rose was appointed the ombudsman in this case. (DKT. 31 )

**REPORT OF ACTIVITY**

3. The Ombudsman communicated via telephone, by email and in person with Debtor and agency personnel. Ombudsman filed an appearance and reviewed applicable case filings.

4. The Ombudsman inspected Debtor's location at 2403 Fredericksburg Road San Antonio, Texas 78201.
  
5. The Ombudsman reviewed patient records and employee files; and interviewed staff to determine the quality of care. The Ombudsman attended case conferences via the telephone. The Ombudsman inspected the supplies areas and spoke with staff that report no issues with vendors. The ombudsman inspected the medical records department and found no issue with the housing of patient records.

#### SERVICES

6. Debtor provide services to primarily private insurances as well as Medicare and Medicaid eligible recipients. Patients consist of both genders. Debtor's clients range from pediatrics to the elderly, predominantly with the elderly. Skilled services provided are 1) Nursing 2) Physical Therapy 3) Occupational Therapy 4) Speech Therapy 5) Medical Social Worker 6) Intravenous Therapy and 7) unskilled services are provided by Home Health Aides. Debtor's census fluctuates daily, and ranged from 40's-60's daily.

#### RECORD REVIEWS

7. Ombudsman reviewed patient files and found patient care being administered according to physician orders. Employee files were reviewed with Human Resources. Some employee files were found missing updated licensures, and insurance coverages. The Human Resource director reported she would contact employees and get files updated. She was confident that the missing documentations had just not been provided to the office, but felt they were current.

STAFF

8. Direct patient care staff consist of Registered Nurses, Licensed Vocational Nurses, Home Health Aides, Occupational Therapists, Physical Therapists. Ombudsman received minimal complaints from staff regarding company operations. Ombudsman inquired regarding the staff/patient ratios and did not receive any complaints regarding staffing. Ombudsman communicated her contact information to the staff and did not receive any calls reporting any issues with patient care. Ombudsman did not receive any information regarding rapid turnover of clinical staff, just normal turnover and replacement of staff. The staff appeared to be dedicated to providing quality care. Debtor reported that they were late with employee payroll once, but did get the employees paid. Several employees confirmed that they were paid late, but was eventually paid. Ombudsman will continue to monitor for employee payment issues.

REGULATORY

9. Debtor was visited by the Department of Aging and Disability Services on October 26-27, 2016 for a complaint. The agency was found to be in compliance.

OMBUDSMAN CONCERNS

10. On December 1, 2016, the Debtor started a process of discharging all the patients. Debtor presented patients with a letter that stated that the agency was closing. Ombudsman spoke with the administrator on November 23, 2016, whereby Ms. Gabriel stated that there was a possibility that the agency would be making some changes with the agency. Ombudsman requested to be notified of any changes regarding patient care.

Ombudsman was not notified of the agency's decision to discharge all the patients. Ombudsman became aware on December 13, 2016 when calling into to the agency to sit in on a case conference. Ombudsman was informed that all of the patients would be discharged from the agency by December 16, 2016.

The Texas Administration Code section 97.295 requires the agency to provide written notification to the client 5 days before discharge and notify the attending physician. Debtor reports that they hand delivered the notices to their patients. Ombudsman began the process of contacting patients to ascertain what discharge notice they had received. Of all the pediatric patients contacted, the discharge process is going well, except patients reporting shock of the agency closure and reporting anxiety of anticipation of continuity of care. Ombudsman will continue to monitor. Some of the adult population also reported shock, and concerns about the agency closure. Many of the patients reported they were saddened by the closure, but are transitioning to new agencies. Ombudsman spoke with several patients that reported they were notified by telephone and not by hand delivered discharge notice documents. Debtor reported that an outsourced Physical Therapy agency that they hired for therapy services, notified seven (7) patients and discharged them from the agency without their knowledge by telephone. Ombudsman will continue to contact patients and monitor patients transition of care with new agencies. Debtor reported 27 pediatric patients and 64 adult patients were discharged from the agency since the decision was made December 1, 2016.

Ombudsman is unclear at this time what direction Debtor is pursuing in terms of continued patient care efforts. Debtor reported they have completed an application to

pursue personal assistant services under their current license. Debtor reported that the results of the application should take 30 days from submission and would probably receive results of the application in January 2017.

### **CONCLUSION**

Ombudsman has not concluded her contact of all discharged patients, but will continue the process. Ombudsman will continue to work with the Debtor to relay any patient concerns regarding transitioning to new agencies. Further Ombudsman is concerned about storage of patient records and the ability of discharged patients to be in contact with the Debtor for future needs in regards to their records. Ombudsman would request that Debtor contact ombudsman immediately for any new developments in regards to starting up any type of patient care in the agency if they are continuing to reorganize the company.

Dated December 22, 2016

Respectfully submitted,

/s/ Pamela Rose  
Pamela Rose

### **Certificate of Service**

I hereby certify that on the 22nd day of December 2106 I electronically filed the foregoing with the Clerk of Court using the CM/ECF system which will send notification of filing to any party listed under the ECF system to receive notification in this matter.

/s/ Pamela Rose  
Pamela Rose