

Michael Friedman, MPT, MBA
CURRICULUM VITAE

DEMOGRAPHIC AND PERSONAL INFORMATION

Current Appointments

Director Rehabilitation Therapy Services, Physical Medicine and Rehabilitation, Johns Hopkins Hospital

Instructor, Physical Medicine and Rehabilitation, Johns Hopkins School of Medicine

Director, Rehabilitation Administration Certificate, University of Montana

Personal Data

Work:

1800 Orleans Street / Meyer 1-140, Baltimore, MD 21287

Phone: (443) 287-5371

Email: mfried26@jhmi.edu

Education and Training (year of completion)

1995 Bachelor of Science (B.Sc.), Psychology, University of Maryland, College Park, Maryland

1998 Master of Physical Therapy, Shenandoah University, Winchester, Virginia

2005 Master of Business Administration, R.H. Smith School of Business, University of Maryland, College Park, MD

Professional Experience

2007 - Present Director Rehabilitation Therapy Services, Johns Hopkins Hospital, Baltimore, MD

2004 - 2007 Regional Rehabilitation Director, Five Star Quality Care, Newton, MA

2002 - 2004 Area Director, Kessler Rehabilitation, West Orange, NJ

1999 - 2002 Director of Operations, RehabMAX.com, Baltimore, MD

1998 - 2000 Staff Physical Therapist, University of Maryland Medical Center, Baltimore, MD

RESEARCH ACTIVITIES

Publications: Peer-reviewed Original Science Research

1. Lord RK, Mayhew CR, Korupolu R, Manthey EC, **Friedman MA**, Palmer JB, Needham DM. ICU early physical rehabilitation programs: financial modeling of cost savings. *Critical Care Medicine*. In press.
2. Hoyer E.H., Needham DM, Miller J, Deutschendorf A., **Friedman M.**, Brotman DJ. Functional Status Impairment is Associated with Unplanned Readmissions. *Archives of PM&R*. 2013. Oct;94(10):1951-8.
3. Hoyer EH, Needham DM, Atanelov L, Knox B, **Friedman M**, Brotman DJ. Association of Impaired Functional Status at Hospital Discharge and Subsequent Rehospitalization. *Journal of Hospital Medicine*. 2014.
4. Hoyer EH, Brotman DJ, **Friedman M**, Needham DM. The Association between Functional Status Impairment with 30-Day Hospital Readmissions for Acute Rehabilitation Patients Discharged Home. Presented at the Academy of Academic Physiatrists Annual Meeting, 2015.
5. Hoyer EH, **Friedman M**, Lavezza A, Wagner-Kosmakos K, Lewis-Cherry R, Skolnik JL, Byers SP, Atanelov, L, Colantuoni E, Brotman DJ, Needham DM. Promoting mobility and reducing length of stay in hospitalized general medicine patients: A quality improvement project. *Journal of Hospital Medicine*. 2016.
6. Grant, MC, Galante DJ, Hobson DB, Lavezza A, **Friedman MA**, Wu CL, Wick EC. Optimizing an Enhanced Recovery Pathway Program: Development of a Post-implementation Audit Strategy. *Joint Commission Journal on Quality and Patient Safety*. 2017.
7. Probasco JC, Lavezza A, Cassell A, Shakes T, Feurer A, Russell H, Sporney H, Burnet M, Maritim, C, Urrutia V, Puttgen A, **Friedman M**, Hoyer E. Choosing Wisely Together: Physical and Occupational Therapy Consultation for Acute Neurology Inpatients. *The Neurohospitalist*. 2017.

Ongoing Research Support

1. Targeted interventions to Prevent Chronic Low Back Pain in High Risk Patients: A Multi-Site Pragmatic RCT
Source: PCORI 09/2015- 08/2020
Role: Co-I, 5% Effort
The primary aim of the study: In patients with acute low back pain who are deemed “moderate to high risk” for transition to chronic, we will compare guideline-based PCP care with PCP plus physical therapy (PT). Our primary outcome measure will be the proportion of patients that transition to chronic LBP at the one-year mark. Secondary aim: We will follow patients with acute LBP who are deemed “low risk” in a non-randomized cohort to determine the proportion that transitions to chronic, patient centered outcomes (e.g., pain, function, work status), and LBP-related medical procedures (e.g., imaging, epidurals, surgery).

Completed Research Support

Enhancements to Project Emerge Prototype System

Source: Gordon and Betty Moore Foundation

Grant # 3186.01, 7/1/13 - 10/01/14

Role: consultant

The foundation of Project Emerge is a tablet application that coordinates and integrates all data from all monitoring equipment and information systems. The goal is to ensure that patients in the intensive care unit are receiving all recommended treatments to prevent harm, receiving all recommended treatments to prevent harms.

eDiscovery/Catalyst Award

Source: Johns Hopkins University 07/01/2015 – 06/30/2016

Role: Co- PI

In this project we develop an inter-disciplinary framework for functional assessment in the hospital setting. Additionally, we study the reliability, feasibility, and validity of functional assessment measures common to both nurses and rehabilitation therapists.

EDUCATIONAL ACTIVITIES

Teaching

Classroom instruction

Fall 2009. University of Maryland. Professional Panel. University of Maryland, Baltimore, MD

Fall 2010. University of Maryland. Professional Panel. University of Maryland, Baltimore, MD

Winter 2011-14. Creating Innovation and Change, Arcadia University, Glenside, PA

Spring 2012. Clinical Management – Budgeting and Finance. University of Delaware, Newark, DE

Practicum/Tutorials

June 2011 – June 2012. Arcadia University, Department of Physical Therapy, Wellness Promotion in Breast Cancer, Glenside PA

Workshops / seminars

October 12-13, 2011. Facilitator, Musculoskeletal Summit, United States Bone and Joint Initiative, Washington, D.C.

CME Instruction

2012 - Present. Planning Committee and Speaker. Critical Care Rehabilitation Conference 2012: Creating and Sustaining a Physical Rehabilitation Program in the Intensive Care Unit. (10 hours of CME)

- 2012 Speaker.
 - Implementing the Business Case
- 2013 Speaker.
 - Implementing the Business Case
 - Future of ICU Rehabilitation, Early Mobility throughout the Hospital
 - Workshop – Implementing the Business Case
- 2014 Speaker.
 - Implementing the Business Case
 - Outcome Measurement, Functional Reconciliation, EMR
 - Workshop – Functional Reconciliation and Outcome Measurement
- 2015 Speaker
 - Hospital-wide Activity and Mobility Promotion
 - Workshop – Functional Outcome Measures and Leveraging the EMR
- 2016 Speaker
 - Pre-Conference: Creating a Culture of Mobility Hospital-wide
 - The Value Equation an Essential Part of Quality Improvement
 - Implementing the Quality Improvement Project
 - Workshop – Hospital Activity and Mobility Promotion

June 6-9, 2012. Facilitator and Planning Committee. Innovative Acute Care Concentrated Education Series: Practical Solutions for Managing Inpatient Physical Therapy Services. American Physical Therapy Association, Annual Conference, Tampa Bay, FL (2.1 continuing education units).

- Presenter. Developing a Culture of Mobility Panel, (1 hours total teaching, 2 hour preparation)
- Presenter. Workforce, Recruitment and Retention Panel, (1 hour total teaching, 2 hour preparation)

February, 2013. Speaker. Creating a Value Based Culture of Mobility in the Hospital Setting. American Physical Therapy Association, Combined Section Meeting, San Diego, CA (2 hours teaching time)

June, 2014. Speaker. Face the Storm - ICU Financial Case. American Physical Therapy Association, NEXT Conference, Charlotte, NC

July, 2014. Facilitator and Planning Committee. Preparing the Next Generation of Physical Therapist for Innovative Practice. Washington, D.C.

- Presenter. Activity and Mobility Promotion and Functional Reconciliation
- Presenter. Clinical Education Partnerships

February, 2014. Speaker. Creating a Value Based Culture of Mobility in the Hospital Setting 2.0. American Physical Therapy Association, Combined Section Meeting, Las Vegas, NV.

March, 2014. Speaker. The Role of Physical Therapy, Occupational Therapy and Speech Language Pathology in the Hospital Setting. Society of Hospitalist Medicine Annual Conference, Las Vegas, NV (2 hours teaching time)

January - December 2011, 2013, 2014. Rehabilitation Therapy Services Research Development Program – Fall Research Curriculum. Johns Hopkins Hospital, Baltimore, MD.

February, 2015. Speaker. Creating a Value Based Culture of Mobility in the Hospital Setting 3.0. American Physical Therapy Association, Combined Section Meeting. Indianapolis, IN.

February, 2016. Speaker, American Physical Therapy Association Combined Section Meeting, Anaheim, CA.

- Functional Reconciliation: Implementing Outcomes Across the Continuum
- Creating a Value Based Culture of Mobility in the Hospital Setting: A Clinician's Toolbox
- Physical Therapists Driving Health System Value

February, 2017. Speaker, American Physical Therapy Association Combined Section Meeting, San Antonio, TX.

- The Acute Care Clinician's Toolkit on Residencies and Fellowships
- Driving Value Through Interdisciplinary Functional Assessment

April, 2017. Speaker, Program Committee. AM-PAC Clinical Users Workshop. Boston, MA

- Demonstrating Value in Healthcare: A Systematic Approach to Using Data
- Integrating AM-PAC into Your Setting
- Function as a Vital Sign

Educational Program Building / Leadership Mentoring

- American Physical Therapy Association credentialed Neurological Physical Therapy Residency Program – Johns Hopkins Hospital and University of Delaware. JHH Administrator
- Johns Hopkins Hospital Speech Language Pathology, Clinical Fellowship Program. Administrator
- Johns Hopkins Hospital Rehabilitation Annual Clinical Showcase. Program Director
- Johns Hopkins Hospital Rehabilitation Professional Development Program. Administrator

CLINICAL ACTIVITIES

Certifications

Maryland Board of Physical Therapy (expires May 31, 2013, #19267)

Clinical Responsibilities

March 2007 to
current

Director of Rehabilitation Therapy Services (RTS), Department of Physical Medicine and Rehabilitation, Johns Hopkins Hospital – Baltimore, MD

Responsible for the delivery and integration of high quality Physical Therapy, Occupational Therapy, and Speech Language Pathology services throughout The Johns Hopkins Hospital inclusive of inpatient and outpatient services.

Responsibilities extend to all aspects of service delivery including but not limited to customer service, safety, compliance, finance, education/training, capital and physical plant management, program development, and marketing. Responsible for an expense budget of approximately \$11 million consisting of 130 FTEs.

- Designed and implemented RTS personnel re-organization plan into patient centered multi-disciplinary teams
- Exceeded variable adjusted budget past 5 years
- Established standardized outcome measurement protocol for RTS
- Collaborative care and integration models include, but not limited to: cancer rehabilitation, ICU early mobility, readmissions, and targeted therapy resource utilization.

March 2004 –
Feb 2007

Regional Rehabilitation Director – Five Star Quality Care, Newton, MA

Responsible for operations and financial oversight of rehabilitation and wellness services in 20 communities housing 2346 residents including assisted living, independent living and skilled nursing facilities in five states.

- Adhere to a \$4.5 million operating budget for rehabilitation operations.
- Supervise 52 FTEs including therapists, administrative, and billing staff.
- Developed and implemented the strategic plan for start up of the outpatient division resulting in \$1.4 million new revenue and 31% contribution margin in first year.
- Established new clinical programming resulting in a 38% referral increase.
- Created outpatient policy and procedures to meet federal, state, and company guidelines; resulting in positive survey results in eight states.
- Implemented CQI and financial review systems to reduce payment denials by 34%.
- Negotiated strategic service partnerships, staffing contracts, and lease agreements for rehabilitation, physician and home health services at 16 communities.
- Contributed to the design and budget process of seven capital construction projects.
- Member of the transition team for 12 properties acquired by purchase or merger.

- February 2002 – February 2004 **Area Director – Select Medical Corporation (Kessler Rehabilitation), Baltimore, MD**
- Manage on-site rehabilitation programs at assisted living and adult day-care facilities throughout Maryland. Accomplishments include:
- Increased revenue by over 60% while increasing profit margins from 12% to 29%.
 - Managed business development for clinical facilities that resulted in new contracts and an overall increase of the customer base by 33% (99% account retention).
 - Developed a national fall prevention program with an assisted living market leader that resulted in dramatic program expansions in Illinois, New Jersey, and Maryland.
 - Community outreach initiatives included establishing diabetes education, home safety, arthritis management, chronic pain, and total joint replacement seminars.
 - Implemented and maintained compliance with all professional, regulatory and licensing agencies (including HIPPA implementation and Medicare regulations.)

- November 1999 – January 2002 **Director of Operations, RehabMAX, Inc., Baltimore, MD**
- Directed operations for a provider of continuing and graduate e-learning education for rehabilitation professionals. Responsibilities include:
- Created and implemented comprehensive healthcare education business plan.
 - Guided a staff of 14 professionals to design and implement an on-line education platform and health care distance-learning product.
 - Organized 48 healthcare educators to provide curriculum content.
 - Ensured product compliance with accreditation and medical ethics requirements.
 - Negotiated and developed strategic business opportunities with healthcare partners in the publishing, education, university, and medical supply industries.

- June 1998 - January 2000 **Physical Therapist, University of Maryland-Medical Center, Baltimore, MD**
- Worked with patients in all levels of the acute care continuum, including intensive care, cardiac care, and progressive care units with a variety of neurological, orthopedic, and cardiovascular diagnoses. Responsibilities included recommendations of disposition-based treatments and communications with multi-disciplinary team to ensure quality of care.

ORGANIZATIONAL ACTIVITIES

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| 2010 to 2013 | Advisory Council Member, University of Maryland, School of Medicine, Department of Physical Therapy and Rehabilitation Science, Baltimore, MD |
| 2008 to present | Board Member, Rehab Essentials, Inc. |

Professional Societies

- 2004 to present American Physical Therapy Association
- 2008 to present American Physical Therapy Association, Acute Care Section
- 2008 to present American Physical Therapy Association, Health Policy and Administration Section
- 2012 to present Chair, American Physical Therapy Association Health System Community