

THE INSTITUTE FOR REHABILITATION AND RESEARCH

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TIRR
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Inside the Index: TIRR Memorial Hermann's Case Mix Index Highlights Its Unique Patient Care Capabilities

TIRR Memorial Hermann cares for patients with some of the most complex disorders in physical and rehabilitation medicine.

This comprehensive capability is reflected in our case mix index (CMI), a measure that assesses the severity and complexity of patients treated in a health care facility.

“Our case mix index is in keeping with what TIRR Memorial Hermann is known to do—provide rehabilitation medicine services to the most catastrophically injured patients or those with the most complex neurological diagnoses,” says TIRR Memorial Hermann Chief Medical Officer Gerard E. Francisco, MD.

For the Fiscal Year 2025 (July 2024 – June 2025), TIRR Memorial Hermann has an overall CMI of 1.9, the highest among all designated rehabilitation national innovation centers. In our brain injury and stroke programs, our CMI is 1.86, compared to the national average of 1.77. And in our Spinal Cord Injury (SCI) Program, our CMI is 2.13, which is among the highest of any rehabilitation hospital in the country.

These numbers tell a powerful story: Patients facing limited options for high-quality care can find innovative and patient-centered treatment at TIRR Memorial Hermann. Our mission is to redefine what's possible in rehabilitation and provide hope to those who need our care.

TIRR Memorial Hermann's CMI reflects the complexity of its patient population. For example, the TIRR Memorial Hermann SCI program treats patients who have suffered traumatic spinal injuries, have been diagnosed with a spinal cord disease that causes paralysis or with neuromuscular diseases (i.e., amyotrophic lateral sclerosis) and those with cancers that have metastasized to the spinal cord. However, it is one of the few spinal cord injury programs in the United States that accepts patients dependent on ventilators, a population that includes nearly 90% of all cervical SCI patients and 40% of those with complete cervical lesions.

“Being intubated increases the complexity of the patient's condition, which drives the CMI to be higher,” Dr. Francisco explains.

“Our clinicians are truly leading the field in managing complex patients with SCI, not only in terms of clinical outcomes but also in addressing nonmedical drivers of their health,” adds TIRR Memorial Hermann CEO Rhonda Abbott.



“We offer the supportive services they and their families need in order to be able to successfully discharge home and back into their communities.”

In addition, TIRR Memorial Hermann is among a handful of hospitals across the country that manage patients with neurobehavioral disorders as a result of brain injury. Our approach to this population is unique: Care teams strive to minimize the use of sedative medication to allow for optimal cognitive function levels to be achieved earlier in patient recovery.

The hospital's **Neurobehavioral Disorders Program** includes a full staff of rehabilitation medicine specialists, psychologists and neuropsychologists, speech language pathologists, care team coordinators, physical and occupational therapists, nurses, nurse aides and technicians, all of whom are experienced and specially trained in caring for patients with these complex disorders.

In another example of patient complexity, TIRR Memorial Hermann's Disorders of Consciousness (DoC) Program provides state-of-the-art care for patients in an unresponsive wakefulness or minimally conscious state. Disorders in consciousness can arise from a variety of types of brain injuries, including traumatic brain injuries and injuries due to hypoxia, stroke or aneurysm rupture.

The DoC program admits and treats patients regardless of the etiology of their injury and is the only such program in the country that admits consciousness-challenged patients who are dependent on ventilators, thanks to a respiratory therapy team that is available 24/7.

“TIRR Memorial Hermann's mission is to provide hope to patients who have been turned away by other institutions because they don't have the same expertise and/or resources we have here,” Dr. Francisco says. “Our commitment is to care for the sickest of the sick, and our CMI reflects that.”

How a Learning Health System Enables TIRR Memorial Hermann to Lead Care for the Most Complex Patients

At TIRR Memorial Hermann, the mission is clear: Redefine rehabilitation and set new standards for patient outcomes. For decades, the hospital has been recognized as one of the nation's leading rehabilitation institutions. What sets us apart today is how we leverage the framework of a Learning Health System (LHS) to deliver excellence in care, especially for patients with the highest levels of medical complexity.

WHAT IS A LEARNING HEALTH SYSTEM?

An LHS is built upon the principle of continuously collecting, analyzing and applying data-derived evidence to consistently drive improvements in patient care. In contrast to relying exclusively on traditionally derived research findings, which may take years to translate into practice, an LHS integrates evidence generation and practice implementation into clinical operations in real time.

"The essence of an LHS is to actively create linkage between patient characteristics, treatment pathways and outcomes—and the infrastructural capacity to rapidly analyze decades of data—to derive evidence and implement it in real time," explains Farhaan S. Vahidy, PhD, MBBS, MPH, FAHA, the associate vice president of research and chief scientific officer at TIRR Memorial Hermann. "We then apply those learnings to personalize treatment targets so patients achieve the best possible outcomes."

DRIVING REHABILITATION EXCELLENCE FOR THE MOST COMPLEX PATIENTS

Over the years, TIRR Memorial Hermann has become known for caring for patients with the highest levels of medical complexity across several clinical programs, including Disorders of Consciousness and Neurobehavioral Disorders. The hospital also treats tetraplegic patients with spinal cord injuries and patients requiring ventilator support.

One way this complexity is measured is through

"TIRR Memorial Hermann consistently ranks among the very top in the nation for patient severity as determined by the case mix index. Yet when you look at outcomes, we match or surpass our peers. That ability to combine excellence with complexity is central to our identity."

the case mix index, a calculation which reflects both severity and resource needs.

"TIRR Memorial Hermann consistently ranks among the very top in the nation for patient severity as determined by the case mix index," Dr. Vahidy notes. "Yet when you look at outcomes, we match or surpass our peers. That ability to combine excellence with complexity is central to our identity."

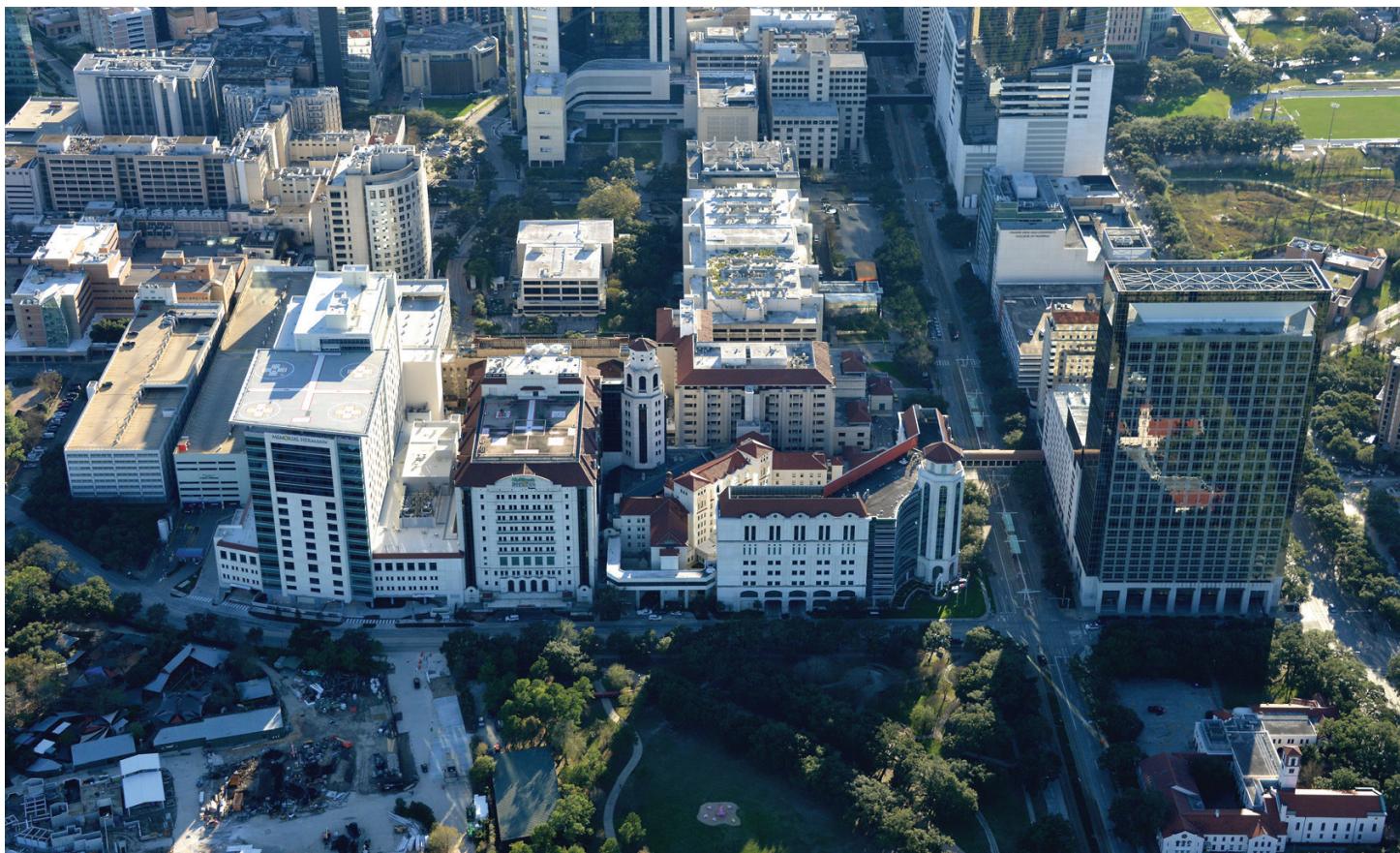
For patients and families, this means that even in the most challenging circumstances, TIRR Memorial Hermann has the infrastructure, expertise and commitment to achieve exceptional results.

FROM DATA TO ACTION

The LHS infrastructure plays a critical role in achieving excellence in care for some of the most medically complicated patients. For example, by evaluating prior patient experiences and outcomes, care teams have the capability to incorporate predictive models in clinical decision-making. TIRR Memorial Hermann clinicians can quickly recognize patterns, identify effective therapies and apply them to new patients—often at the earliest stages of care. At the same time, the LHS supports testing new treatment modalities and technologies, allowing for care to continually evolve.

Traditional clinical research often involves long timelines, with its multiyear process of securing funding, publishing results and finally implementing relevant findings. This lag can slow the pace of improvement, a gap that an LHS can help close.

"As we are evaluating interventions and generating evidence, we also have a pathway for implementation



COLLABORATION THAT EXTENDS BEYOND THE HOSPITAL - TIRR Memorial Hermann's LHS also facilitates meaningful collaborations with external partners. Locally, the hospital is actively engaged with the Texas Medical Center Innovation Hub, partnering on initiatives to advance rehabilitation care. On a broader scale, the LHS provides a platform for regional, national and even international collaborations.

of that evidence right away," Dr. Vahidy notes. "So we cut that time period really, really short."

This agility fuels innovation. With access to real-time data and integrated infrastructure, TIRR Memorial Hermann can quickly test and adopt promising new approaches. The result is a cycle of continuous improvement, where research and clinical practice build on and reinforce each other.

EMPOWERING CLINICIANS AND STAFF

Another key benefit of the LHS model is its impact on professional development. TIRR Memorial Hermann's staff are primarily clinicians with demanding day-to-day responsibilities. Historically, this has left little room for deeper engagement with research or evidence synthesis.

"Training and growth often get stalled when the infrastructure just isn't there," Dr. Vahidy explains. "An LHS allows us to involve more frontline clinical staff in evaluating, synthesizing and applying evidence."

This culture of learning not only strengthens individual

careers, but also elevates the entire enterprise. Clinicians begin to see research and innovation as integrated aspects of their professional pathways.

REDEFINING REHABILITATION, LEADING THE FIELD

For TIRR Memorial Hermann, the LHS is not a one-time initiative—it is the foundation for continuous improvement. By uniting research, innovation and education within clinical care, the hospital increases its capacity to keep pace with rising complexity while setting national benchmarks for outcomes.

"Our mission is not just to follow what is already known in rehabilitation," Dr. Vahidy says. "It's to lead the charge—creating new knowledge, disseminating it and moving the field forward."

The commitment to learning in real time—as foundational to caring for the most complex patients while striving for the best possible outcomes and advancing rehabilitation for all patients—defines the hospital's vision as a true LHS. 

Researchers Recognized for NIH Funding

TIRR Memorial Hermann is proud to recognize our academic partner UTHealth Houston for being recognized as #9 in the nation and #1 in Texas in National Institutes of Health (NIH) rehabilitation research funding, as tallied by the Blue Ridge Institute for Medical Research (BRIMR). This recognition is based solely on objective data and is a true marker of research excellence.

Our academic partner UTHealth Houston, based in the renowned Texas Medical Center, received more than \$2.5 million in NIH grants for research for physical medicine and rehabilitation in 2024, which is the highest figure for research centers in Texas.

“The ranking highlights that the affiliated physicians at TIRR Memorial Hermann are also actively engaged in research, helping to shape the future direction of physical and rehabilitation medicine as a field,” says TIRR Memorial Hermann Chief Medical Officer Gerard E. Francisco, MD. “This means that the physicians are not only working with the latest tools at their disposal: They are involved in developing them. Our patients can only benefit.”



Blue Ridge Institute for Medical Research

At TIRR Memorial Hermann, we’re especially honored to see physician-researchers from the Department of Physical Medicine and Rehabilitation at McGovern Medical School at UTHealth Houston contributing to this national success through groundbreaking studies that advance rehabilitation medicine and improve outcomes for patients around the world. Individual UTHealth Houston physical and rehabilitation medicine researchers affiliated with TIRR Memorial Hermann who were also ranked by BRIMR are listed below.

“Here at TIRR Memorial Hermann, we have a research section with only three dedicated researchers and clinician-researchers. Clearly, they are very active and engaged in significant research,” says Dr. Vahidy. ●



Sheng Li, MD, PhD

Ranked #7 in the field (with \$1.6 million in NIH grants in 2024)

Professor, Vice Chair of Discovery and Advancement at McGovern Medical School at UTHealth Houston

Director, Neurorehabilitation Research Lab and Stroke Rehabilitation Program and Recovery Research at TIRR Memorial Hermann

Director, NeuroRecovery Research Center at TIRR Memorial Hermann



Tatiana Schnur, PhD

Ranked #28

Professor, Department of Physical Medicine & Rehabilitation at McGovern Medical School at UTHealth Houston



Radha Korupolu, MD, MS

Ranked #75

Chief, Spinal Cord Injury Program at TIRR Memorial Hermann

Associate Professor, Department of Physical Medicine and Rehabilitation at McGovern Medical School at UTHealth Houston

Attending Physician and Clinical Chief, Respiratory Services at TIRR Memorial Hermann

New Assessment Tool Validated for Challenging Behavior in ABI Rehabilitation

A recent study led by researchers at TIRR Memorial Hermann, and published in *PM&R*, a publication of the American Academy of Physical Medicine & Rehabilitation, provides strong evidence that the Overt Behavior Scale-In Session (OBS-INS) is a valid and reliable tool for systematically assessing challenging behaviors (CBs) following acquired brain injury (ABI) in the inpatient rehabilitation (IPR) setting.

Ranging from aggression and restlessness to elopement and disinhibition, CBs are among the most difficult brain-injury symptoms clinicians face when treating patients with ABI, particularly in the early stages of recovery. The OBS-INS was adapted from the original community-based Overt Behavior Scale through a collaboration between the team at TIRR Memorial Hermann and colleagues in Australia. The OBS-INS provides physicians and clinical teams with objective, reliable data to guide treatment decisions and improve interdisciplinary communication. For patients, this translates into better-informed care plans that promote and prioritize cognitive recovery.



Lindsey Harik, PhD

either measured only one dimension of behavior, were designed for patients in the chronic phase or were too burdensome to complete regularly. We needed something that could objectively measure behavioral change in newly injured patients.”

The validation study included adults with traumatic brain injury, stroke and anoxic brain injury. OBS-INS scores correlated strongly with the Agitated Behavior Scale and moderately with the Disability Rating Scale. Reliability was excellent, and clinicians also endorsed the tool’s feasibility and utility for interdisciplinary communication, intervention planning and discharge readiness.¹

“We had been looking for a behavioral rating tool that would capture the types of behaviors that are common in the early phases of recovery from a severe brain injury,” says author Lindsey Harik, PhD, clinical neuropsychologist and program manager for the Neurobehavioral Program at TIRR Memorial Hermann. “Existing scales



At TIRR Memorial Hermann, the OBS-INS is now embedded in the electronic health record and used routinely in the Neurobehavioral Program. The scale is administered after every therapy session, allowing clinicians to monitor changes in behavior across time and treatment modalities.

“This gives us a really robust way of understanding if the intensity, frequency or impact of a behavior has changed in response to treatment,” Dr. Harik explains. “Over time, we hope to build a large data set that will not only guide our interventions, but also help us refine which strategies are most effective.”

Reference: 1. Herrin I, Harik L, Larkin E, et al. *PM&R*. 2025 Aug 19. doi.org/10.1002/pmrj.13448

Building Community Beyond the Clinic: Expanding Inclusive Opportunities at TIRR Memorial Hermann

Over the past year, TIRR Memorial Hermann has deepened its commitment to community inclusion by expanding recreational partnerships that empower patients and community members with disabilities to connect, participate and thrive. What began with pilot outreach efforts has grown into a calendar of recurring programs that bring people together through sports, art and shared experience.



Catherine Murray, OTR, MOT

"One of our community outreach initiatives is recreation and arts inclusion," says Catherine Murray, OTR, MOT, and rehabilitation manager at TIRR Memorial Hermann. "Our goal is to partner with local businesses that offer an activity, like pickleball, an art class or golf, and work with them to host inclusive events,

so that individuals in the community who are living with a disability can go to these events and then feel comfortable continuing to go to these businesses on their own."

TIRR Memorial Hermann rehabilitation team helps support a monthly pickleball night at the Chicken N Pickle in Webster, Texas, ongoing since April 2024.

"They supply the courts and a volunteer coach who comes every month, and we supply therapist volunteers as well as some local college students," Murray explains.

The program typically brings about 15 participants and 10 volunteers each month. With three courts available, participants can be matched to their level of experience.

Recently, TIRR Memorial Hermann partnered with the Houston Parks and Recreation Department and Memorial Park Golf Course to begin an adaptive golf program. The collaboration began with training sessions for golf professionals and volunteers, covering adaptive equipment, strategies and firsthand demonstrations from athletes who play from

wheelchairs. The response was overwhelmingly positive. "The golf pros told us it was the first time in 15 years that they had any kind of education on adaptive play," Murray recalls.

That training culminated in a community golf day in August 2025 which welcomed more than 30 participants, 15 volunteers and 10 golf pros. The event not only gave participants a chance to try the sport, but also laid the groundwork for a new monthly program at Memorial Park's First Tee area. Future plans include providing modified clubs to make the game even more accessible.

Beyond athletics, TIRR Memorial Hermann has expanded into arts programming and cultural partnerships. The rehabilitation team collaborated with a local studio on adaptive watercolor classes and partnered with organizations such as Stages and Theatre Under the Stars, which host sensory-friendly performances.

"Every time we collaborate with a community partner, we're planting the seeds for something that can grow and sustain itself. The goal is not only to host events but to help create a culture of inclusion throughout Houston."

In 2025, TIRR Memorial Hermann co-launched the inaugural ReelCommunity Expo as part of the annual ReelAbilities Houston Film & Arts Festival, an event designed to connect individuals and families with inclusive businesses across Greater Houston. More than just a resource fair, the Expo offered attendees the chance to meet business owners directly, discover adaptive opportunities and learn about modifications that make recreation possible. The event will return in January 2026.

While clinical therapy remains central to recovery, community-based activities provide a different kind of benefit. "When you're at a pickleball game or a golf event, conversations and connections happen naturally," Murray notes. "It doesn't feel like a support

MESSAGE FROM THE CHIEF MEDICAL OFFICER



News in this issue of the TIRR Journal highlights the dedication of the physicians at TIRR Memorial Hermann.

Of note, our academic partner institution, UTHealth Houston, has been ranked #9 in the nation in National Institutes of Health-funded

research for physical and rehabilitation medicine in 2024 by the Blue Ridge Institute for Medical Research. In addition, three members of our team appear in the list of top 75 NIH-funded researchers in the country.

This is significant because only two-thirds of the staff of 34 in Physical and Rehabilitation Medicine at UTHealth Houston are currently affiliated with TIRR Memorial Hermann. To have three of them make this list is a remarkable achievement for a relatively small department.

However, this isn't just about these three physicians. Indeed, their success is a testament to the remarkable commitment all of our team members make to moving the field of physical and rehabilitation medicine forward and providing the best care possible to our patients, many of whom are dealing with some of the most significant diagnoses imaginable (as evidenced by TIRR Memorial Hermann's case mix index, which is also featured in this issue).

At a number of institutions across the country, physicians have the ability to focus either on research or patient care. Here, our team is actively engaged in both, which means they are working hard to provide our patients and their families with groundbreaking, state-of-the-art treatment and support.

This level of dedication is unique to the culture here at TIRR Memorial Hermann and in keeping with our "four pillars"—excellence in clinical care, advocacy, research and education. However, this dedication to excellence is also rewarding because it allows us to achieve optimal outcomes for our patients. ●

Gerard E. Francisco, MD

Chief Medical Officer
TIRR Memorial Hermann



Participants enjoyed inclusive pickleball at Chicken N Pickle in Webster, Texas.

group, but the same kinds of peer-to-peer support emerge in a more relaxed environment."

These programs also strengthen family and caregiver networks. Murray describes one participant and his mother who have attended pickleball nights since the program's inception. Even after completing formal rehabilitation, they continue to attend: The patient's mother is now serving as a resource for other caregivers navigating similar challenges.

"It's just as impactful for family members to see what's possible," Murray adds. "They realize that their loved one can participate fully in community life."

The success of these initiatives is driving momentum for even more opportunities. TIRR Memorial Hermann plans to continue expanding its partnerships, enabling inclusive spaces where individuals with disabilities can explore, engage and belong.

TIRR Memorial Hermann's outreach is proving that rehabilitation extends far beyond hospital walls. By helping people reengage in meaningful activities, these programs support independence, foster belonging and strengthen the community as a whole.

"Every time we collaborate with a community partner, we're planting the seeds for something that can grow and sustain itself," Murray says. "The goal is not only to host events but to help create a culture of inclusion throughout Houston." ●

Communicating About Brain Injury: A Shared Statement for Change

Last fall, a coalition of leading brain injury organizations, clinicians, individuals with lived experience and researchers, including Angelle Sander, PhD, and Shannon Juengst, PhD, both clinical investigators in TIRR Memorial Hermann's Brain Health and Rehabilitation Research Center (BHRRC), released *Communicating About Brain Injury*, a joint statement highlighting the importance of clear, consistent and hopeful language when discussing brain injury—a condition that can affect anyone, at any time.

Brain injuries are complex: Some people recover quickly, while others experience lasting effects that ripple across families, friends and caregivers. Yet, as Dr. Sander, the director and senior scientist of the BHRRC at TIRR Memorial Hermann, emphasizes, “It’s not just about deficits. People with brain injury can still accomplish their goals and live fulfilling lives, even if they do it differently.”

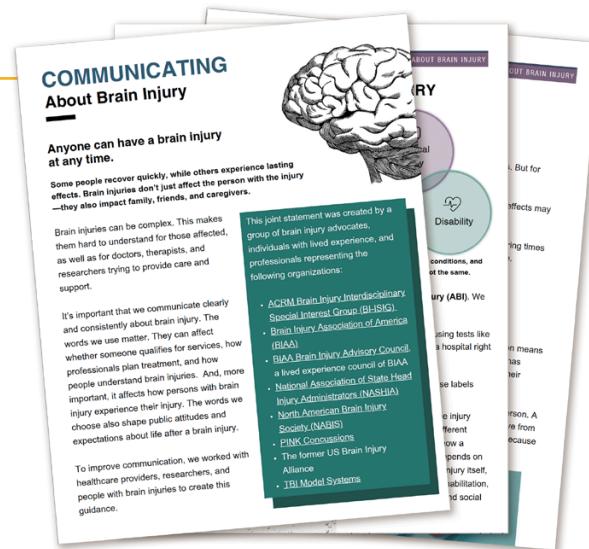
The joint statement was developed collaboratively by representatives from eight major organizations:

1. **ACRM Brain Injury Interdisciplinary Special Interest Group (represented by Dr. Sander)**
2. **Brain Injury Association of America (BIAA)**
3. **BIAA Brain Injury Advisory Council, a lived-experience council of BIAA**
4. **National Association of State Head Injury Administrators**
5. **North American Brain Injury Society**
6. **PINK Concussions**
7. **The former U.S. Brain Injury Alliance**
8. **TBI Model Systems (civilian and Veterans Affairs (VA) represented by Drs. Juengst and Sander)**

Individuals with lived experience of brain injury also played a critical role in shaping statement content, demonstrating that the perspectives of survivors and their families were central.

According to Dr. Juengst, a senior scientist and clinical investigator with BHRRC, the project grew out of a recognition that messages about brain injury are often unbalanced.

“Too often, what people hear or read is very negative, focused almost entirely on limitations,” she notes. “We wanted to create something that would both acknowledge the real challenges people face, while also fostering hope and emphasizing what people can actively do to live well after brain injury.”



The *Communicating About Brain Injury* statement outlines 12 key considerations for how professionals, advocates, the media and the public should frame conversations about brain injury.

Among its priorities are distinguishing between the initial injury, the resulting disability and the potential for chronic effects; allowing for language to reflect both realism and optimism; and underscoring the role of rehabilitation and support in maximizing recovery and quality of life.

This emphasis on balance aligns with broader shifts in the field toward brain health and long-term wellness. Under Dr. Sander’s leadership, TIRR Memorial Hermann’s BHRRC has recently expanded its focus in this direction, recognizing that individuals living with brain injury benefit not only from treatment of impairments, but also from resources that promote resilience, empowerment and self-management.

Of note, the statement underscores how much language matters. Words shape public perception and influence policy and can even determine whether someone qualifies for critical services.

“Having all of our major organizations aligned behind a consistent message is a powerful step toward allowing that people with brain injury be represented accurately, respectfully and with hope,” Dr. Juengst says.

The statement’s Oct. 6, 2025, release was accompanied by a coordinated effort from the participating organizations to share the statement widely. For clinicians, researchers, survivors and advocates alike, this statement offers both practical guidance and a unifying vision—that communication about brain injury should be accurate, compassionate and empowering. ●

MESSAGE FROM THE CHIEF EXECUTIVE OFFICER



The cover story for this issue of the *TIRR Journal* focuses on our case mix index, which measures the complexity of patient cases our clinicians manage day to day. This number is significant because it highlights how the hospital treats patients who are truly in the top 1% nationally, in terms of acuity and complexity.

At least part of that figure is driven by the fact that we are constantly innovating and adapting the treatments and care services we offer each and every patient who comes through our doors. Our mission, every day, when a patient is referred to TIRR Memorial Hermann, is to provide them with state-of-the-art care to help them progress on their recovery journey.

Another part of the equation, of course, is our location in Houston, one of the largest and most diverse cities in the United States, within the world-renowned Texas Medical Center, where we have been based since 1959. The Texas Medical Center campus has a tradition of pushing boundaries and revolutionizing the way care is delivered, across a number of disease states. We strive to carry on that vision within the field of rehabilitation medicine.

These factors have propelled us forward: We have created initiatives like our Spinal Cord Injury Program, which is unique for a number of reasons, including its ability to treat patients dependent on ventilators. More recently, we have taken proactive approaches to managing the larger challenges faced across the field of rehabilitation medicine, including the COVID-19 pandemic and rise of *Candida auris* infections among inpatients.

In short, our clinicians and researchers are constantly creating new interventions, implementing them and reassessing where we are in terms of quality outcomes. And that's what makes TIRR Memorial Hermann's case mix index and results so compelling: Because we're not just progressing these patients toward recovery, we're doing so in a way in which they and their caregivers are supported as they move on to lead fulfilling and productive lives.

At TIRR Memorial Hermann, our patients have an entire city around them to keep patients healthy and in their homes and communities, thanks to our whole continuum of care. ●

Rhonda Abbott, PT, FPTA

Senior Vice President and Chief Executive Officer

TIRR Memorial Hermann,

Memorial Hermann Rehabilitation Hospital-Katy and the

Memorial Hermann Rehabilitation Network

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ABOUT TIRR MEMORIAL HERMANN

TIRR Memorial Hermann, located in Houston, Texas, a leader in rehabilitation, does more than provide therapy. We provide rehabilitation beyond the health care setting for children and adults with a disabling injury or illness, and change lives by helping people regain the skills and confidence they need to reintegrate into the community and continue living full and meaningful lives. Our highly trained rehabilitation teams see the potential in every person they work with and develop that potential to the fullest through customized goal setting and treatment planning.

We work to maximize independence, restore function and improve the quality of life for our patients.

To achieve these goals, we put the individual patient and their family at the center of the rehabilitation team and provide them with the information and skills they need to transition successfully to community settings.

TIRR Memorial Hermann is the best rehabilitation hospital in Texas and among the best in the nation, according to the *U.S. News & World Report's* Best Hospital rankings for 2024-2025. The rehabilitation hospital's ranking marks its 34th consecutive year among the magazine's Best Hospital rankings.

**To make referrals or schedule an appointment, call 800.44REHAB (800.447.3422)
toll-free or 713.797.5942, or fax 713.797.5988.**

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