





Our annual report showcasing company news and accomplishments for the calendar year 2024.

Founded in 1999 and based in Tualatin, Oregon, Infinity Rehab provides occupational, physical, and speech therapy wherever patients and residents call home. Through the leadership of industry-recognized therapists, Infinity Rehab serves nearly 100 skilled nursing, long-term care, home health, and hospital programs across 16 states.

As we entered our 25th year, Infinity Rehab, a leading therapy services company, witnessed many transformative changes. Our dedicated clinicians achieved numerous milestones, and I am privileged to present the highlights of our journey in 2024. Our unwavering commitment to delivering top-notch, compassionate care to our patients has driven our success. I am delighted to share the tangible outcomes of our efforts with you.

The year 2024 marked 25 years since our founding in 1999. Our journey has been marked by innovation, compassion, and a relentless pursuit of excellence in healthcare therapy. Through it all, we have always been guided by our mission: to set the standard in rehabilitation for successful aging by delivering the best of science with the art of caring.

Management by Infinity Rehab (MIR) continued to thrive. The program, designed to empower providers to create a high-performance therapy department in a fully capitated environment, highlighted client success stories across eight case studies. Through a series of case studies, MIR highlighted real challenges faced by our clients—ranging from staffing shortages to regulatory compliance—and showcased how our expert team successfully identified and implemented solutions. You can read more about these successes in this Quality Report.

We held our annual Employee Appreciation Event virtually in July. We honored career milestones for many team members and recognized seven employees and teams across four different awards. Additionally, our teams held creative culture-building get-togethers throughout the summer after the event.

Throughout the year, our therapists were recognized in various ways. Patty Scheets, Vice President of Quality and Compliance at Infinity Rehab, was honored with the Lucy Blair Service Award from the American Physical Therapy Association (APTA). We also honored our healthcare heroes by shining a spotlight on our dedicated clinicians during Occupational Therapy Month (April), Better Hearing and Speech Month (May), and Physical Therapy Month (October).

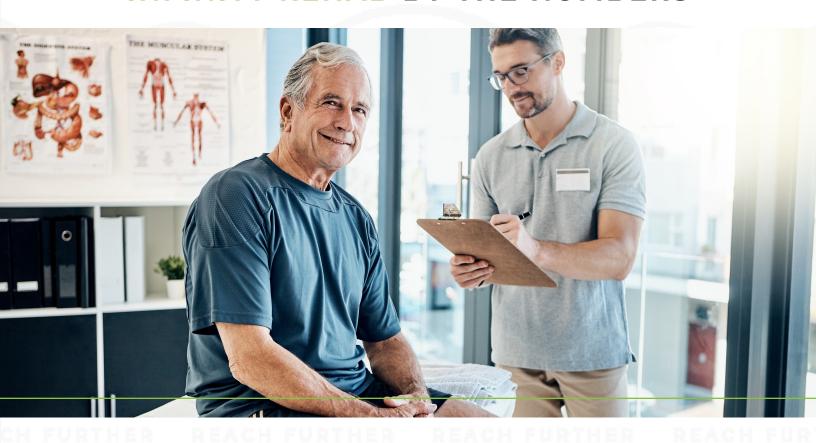
We sincerely appreciate your continued support as we strive to improve the health and well-being of all those we serve. Your unwavering commitment to our mission has been instrumental in our success, and we look forward to continuing this journey together.

Michael Billings



MIKE BILLINGS
PT, DHSc, MS
President and Co-Founder
Infinity Rehab

## **INFINITY REHAB BY THE NUMBERS**





50.1K

**ENHANCED** 

480K

PATIENT VISITS



124

LOCATIONS & MARKETS



**12** 

NEW CONTRACTS



ACTIVATED INSIGHTS SURVEY RESULTS

**4.52** (National average 4.51)

OVERALL SATISFACTION

AT OR ABOVE NATIONAL AVERAGE IN 10 OUT OF 12 PATIENT SATISFACTION CATEGORIES



16 STATES



## **INFINITY REHAB EMPLOYEES**



## **TOTAL EMPLOYEES: 1039**



PT: 80 PTA: 73



OT: 54 OTA: 46



**SLP: 40** 



MOBILITY
SPECIALISTS:
17



PRN

PT: 212 PTA: 120 OT: 177

**OTA: 75** 

**SLP:92** 



RESTORATIVE AID/COORDINATORS: 7



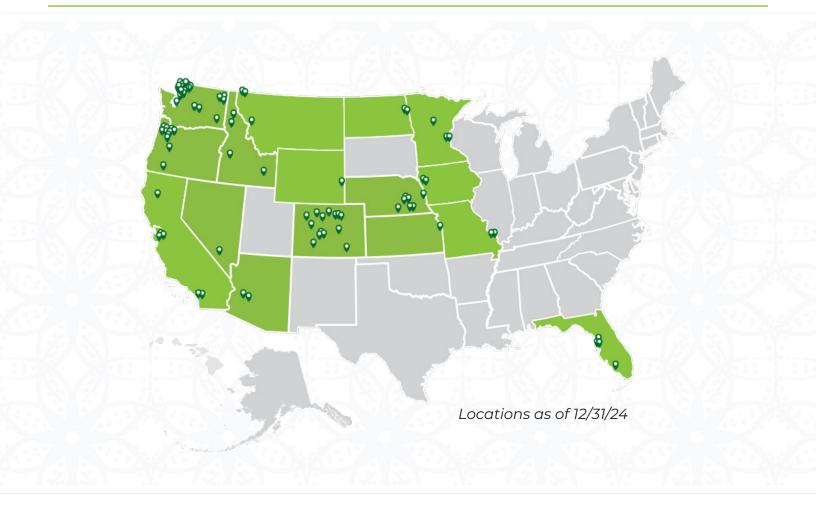
REHAB AIDES/ADMIN ASSISTANTS: 11



LEADERSHIP/HOME OFFICE: 36



#### **CELEBRATING OVER 25 YEARS ENHANCING LIVES**



Founded in 1999, Infinity Rehab is a therapist-led company that operates therapy departments for skilled nursing facilities, retirement campuses, home health agencies, and critical access hospitals. We offer several contract models, including fully outsourced rehab, management, and consulting services, including compliance oversight. Based in Tualatin, Oregon, Infinity Rehab serves nearly 100 facilities across 16 states.

At Infinity Rehab, we are committed to ensuring that patients receive the benefit of care for which there is substantive external evidence. With an estimated 12 to 17-year gap between the availability of best evidence in healthcare and its systematic implementation, we are closing the gap by investing time and resources in many ways. For example, we standardized our outcome assessments and reviewed the literature for the best evidence for older adult rehabilitation. Next. we converted the research evidence into collections of training, knowledge tools, and other knowledge translation supports. Finally, we studied our patient data and blended it into a comprehensive, evidence-based model for rehabilitation care.







## **OUR MISSION**

To set the standard in rehabilitation for successful aging by delivering the best of science with the art of caring



#### **OUR VISION**

To be the first choice for high-value rehabilitation in every home and community

## **CORE VALUES:**

- → Lead with courage
- → Pursue the extraordinary
- → Obsessed over outcomes
- → Boldly innovate
- → Empowered together



## **LEADERSHIP**





Our senior leadership team is comprised of licensed therapists and healthcare industry experts. Our leaders take great pride in guiding clients, and their patients, towards greater success. Our leaders have over **110 cumulative years** of elected and appointed leadership positions with rehabilitation associations, have led national presentations, hold nearly **30 awards and honors**, and have authored over **20 peer-reviewed publications and abstracts** related to clinical diagnosis and rehabilitation intervention.



## **OUR LEADERS**





MIKE BILLINGS
PT, DHSc, MS

PRESIDENT AND CO-FOUNDER



STACEY TURNER
MS, CCC-SLP
VICE PRESIDENT OF
OPERATIONS



LAURA CANTRELL
PT, MS
VICE PRESIDENT OF
COMMUNITY-BASED SERVICES



DEREK FENWICK
PT, MBA, SHRM-SCP
VICE PRESIDENT, PEOPLE
AND CULTURE



PATTY SCHEETS
PT, DPT, NCS
VICE PRESIDENT, QUALITY
AND COMPLIANCE



MARK WILHELM
MS
VICE PRESIDENT
OF SALES



TY KEETER

PT, DPT, MHA

REGIONAL DIRECTOR OF

OPERATIONS



## **INDUSTRY AWARDS**



# Activated Insights

4.52
OVERALL COMBINED
AVERAGE

(National Average = 4.51)



Four locations recognized by Activated Insights (formerly Pinnacle Quality Insight), a nationally recognized satisfaction firm, with awards for outstanding Customer Experience. These locations were in the top 15% of care providers nationally. These awards reflect their strong dedication to continuous improvement and exceptional care, securing their position among the top care providers nationwide.

#### WEST HILLS REHABILITATION CENTER

Dignity and Respect, Equipment Quality

#### THE GARDENS AT TERRACINA

Understood Procedures, Atmosphere/Therapy Area, Equipment Quality, and Knowledge/Skills of Therapists

#### JOSEPHINE CARING COMMUNITY

Pace of Progress and Recommend to Others

#### CHATEAU GIRARDEAU

Overall Satisfaction, Understood Procedures, Dignity and Respect, Response to Concerns, Involvement with Goals, Pace of Progress, Results Achieved, Atmosphere/Therapy Area, Equipment Quality, Knowledge/Skills of Therapists, Recommend to Others, Overall Customer Experience

## **GROWTH UPDATE**

## **NEW CONTRACTS: 12**

Foothills Health and Rehabilitation (Tucson, AZ)

Idaho State Veterans Hospital – Boise

Idaho State Veterans Hospital - Lewiston

Idaho State Veterans Hospital - Post Falls

Knife River Care Center (Beulah, ND)

Maryhill Manor (Niagara, WI)

Mennonite Village (Albany, OR)

Mercy Care Center (Oakland, CA)

St. Benedictine-Dickinson (Dickinson, ND)

St Raphael (Valley City, ND)

Wilber Care Center (Wilber, NE)

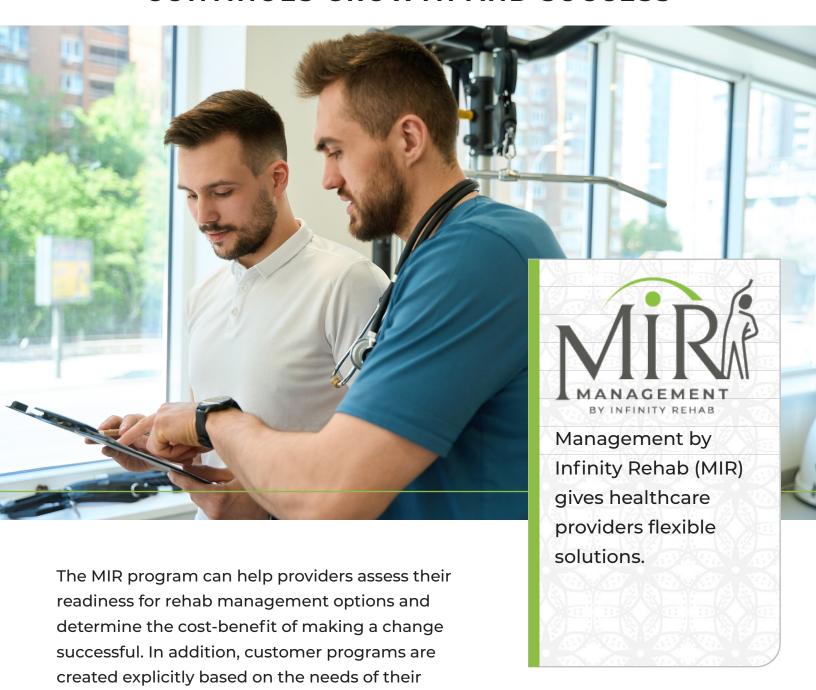






## MANAGEMENT BY INFINITY REHAB (MIR)

## **CONTINUES GROWTH AND SUCCESS**



Management by Infinity Rehab (MIR) offers options to help customers determine their best course of action: from complete outsourcing to a hybrid management model, which includes training, recruiting, and performance monitoring. In addition, Infinity Rehab has 25+ years of industry expertise serving skilled nursing facilities in capitated contract arrangements.

patients, residents, and facility circumstances.

#### **CUSTOMER SUCCESS STORIES**

"Working with MIR has been a game-changer for our facility..."



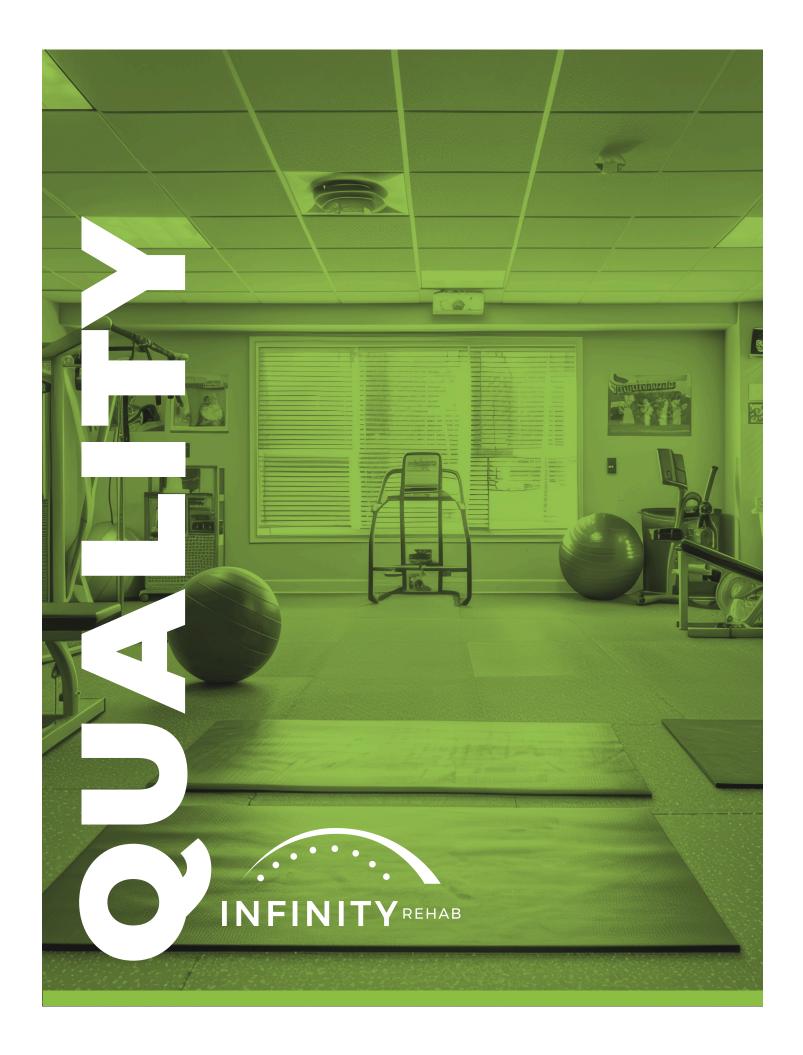
Through a series of case studies, we highlight real challenges faced by our clients—ranging from staffing shortages to regulatory compliance—and showcase how our expert team successfully identified and implemented solutions. These success stories demonstrate our commitment to innovation, clinical excellence, and collaborative problem-solving, ensuring our partners achieve sustainable, long-term results.

Client successes and benefits from MIR include:

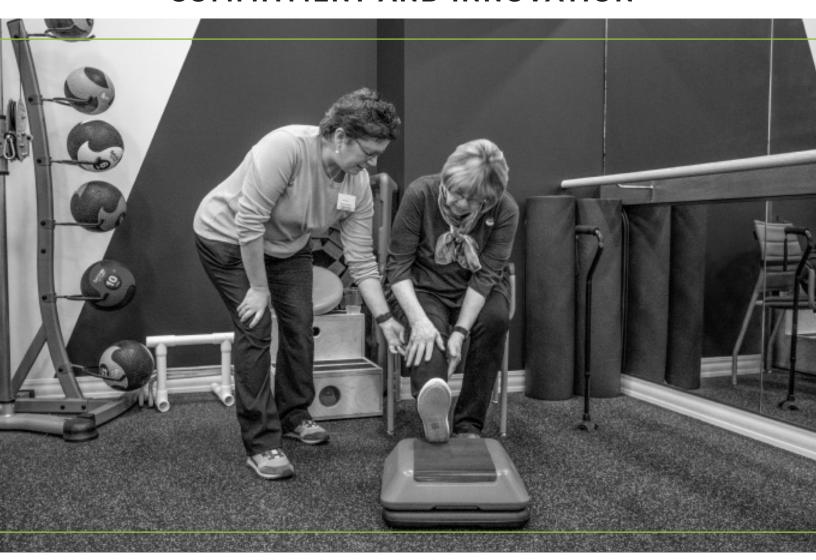
- 25% improvement in part B units per visit within 3 months
- Part B revenue increased by 72% per case
- 40% reduction in therapy labor costs by switching to an in-house therapy model
- Compliance violations eliminated, lowering audit risk
- One customer experienced a \$250,000 improvement in net profit
- Successfully recovered over
   \$30,000 from previously denied managed care claims

Download all the MIR case studies **here**.





# QUALITY: OUR UNWAVERING COMMITMENT AND INNOVATION





## MEANINGFUL IMPROVEMENTS THAT MATTER

In addition to traditional measures of activity limitations, such as the level of assistance needed with activities of daily living, getting in and out of bed, and walking, at Infinity Rehab we have invested in time, energy, and resources to quantify systematically patient capacity on several physical performance measures, the outcomes of which are related to overall health status and risk for adverse events. These additional data add depth to our understanding of a patient's condition, their readiness to return home, and their likelihood of success in staying in their home over time. These measures are named and described in the following figure.

INFINITY

#### PHYSICAL PERFORMANCE MEASURES



FUNCTIONAL STRENGTH Repeated chair stands without UE support



ACTIVITY TOLERANCE Six-Minute Walk Test (6MWT)



OVERALL STRENGTH Grip strength



COGNITIVE SCREENING SLUMS



GAIT SPEED 6th Vital Sign



FALL & MOBILITY DECLINE RISK Short Physical Performance Battery (SPPB)



ACTIVITY/ FUNCTIONAL LIMITATIONS

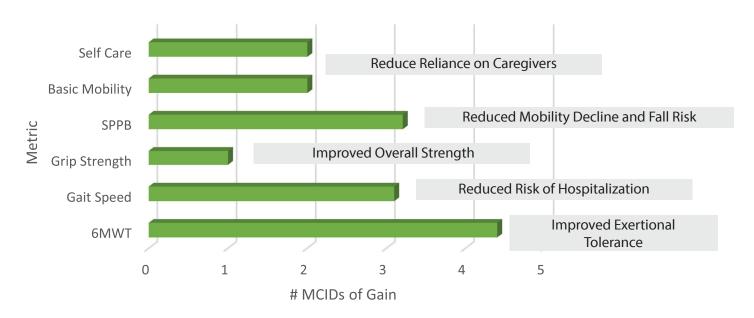
Caregiver burden

In recent years, researchers have introduced the idea of a minimal clinically important difference (MCID) to reflect the amount of change on a standardized measure that matters in a person's life. We apply this concept to help us better understand the extent to which we are not only assisting patients to perform basic functions with less physical assistance, but also, and perhaps more importantly, to what degree are we helping the patient reduce their risk for adverse events.



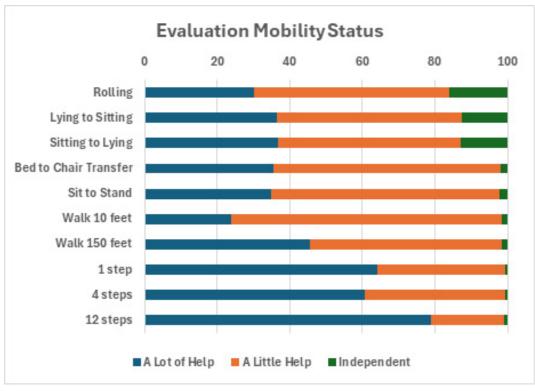
In the figure below, we plotted the average units of MCID for several measures. You can see that even more than helping patients reduce their reliance on caregivers as reflected in improvements in self-care and basic mobility, we are assisting patients to get stronger overall and within a functional task which reduces their risk for falls. We are helping patients reduce their risk for further mobility decline, hospitalization and even mortality. These improvements reflect the value of our services in improving overall health status which extends beyond the episode of care.

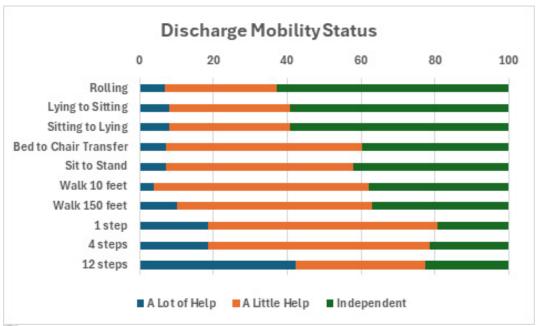
## Clinically Meaningful Improvement





72% of our patients successfully discharge to the community where most continue their rehabilitation course at home. The figures below illustrate our patients' significant gains in critical mobility tasks. Most begin needing substantial help from a caregiver and leave independent or needing minor assistance with more complex tasks.







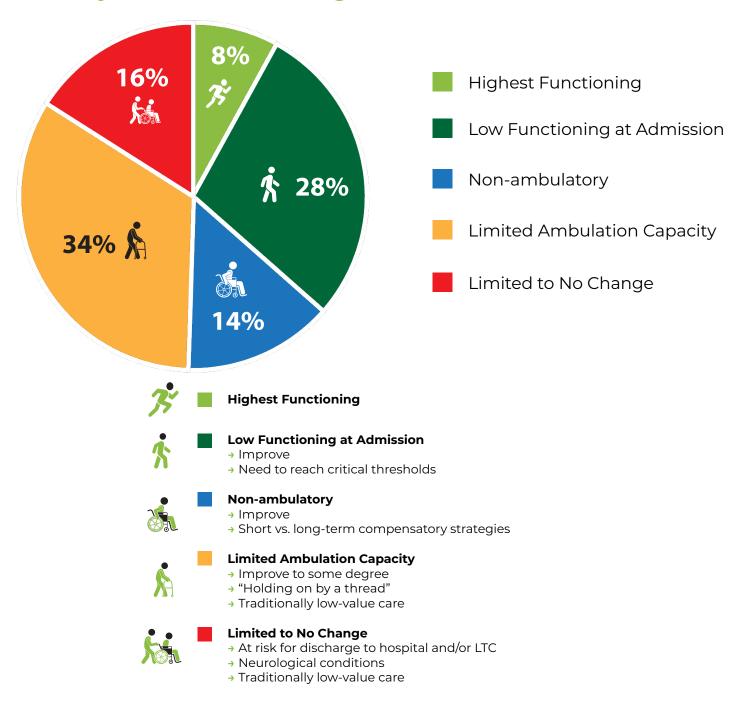
As mentioned previously, we have a standardized data collection process to have a comprehensive, standardized, and objective picture of each patient. These data are used at the individual patient level to understand current status, measure change over time, compare status to published normal values, benchmark current status against critical health-related thresholds, and communicate with each other and other stakeholders including the patients themselves, families, and the inter-professional team. The systematic collection of these data is a foundational practice in our commitment to best evidence care.

In addition to using these data in managing individual patients, we have implemented a robust data analytics process that allows us to learn from the group of patients. We've taken what we've learned from the group of patients to inform and guide our practice of current and future patients. These steps illustrate our commitment to ongoing performance improvement and consistently bringing our very best to each patient.

We have identified five distinct clusters in our data set. In the figure on the next page, you can see the proportion of these patient types followed by a brief summary of each group. It is interesting to note that since the COVID-19 pandemic, there are 17% fewer patients in the highest functioning group (light green) and a 14% increase in the limited ambulation group (gold).



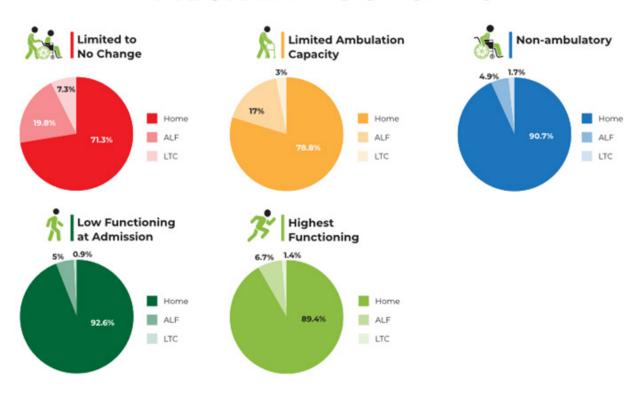
## **Analysis of Skilled Nursing Rehab Patients**



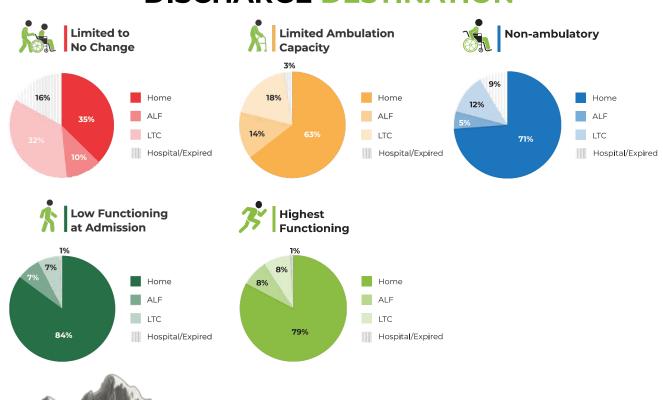
One of many ways we can appreciate the differences among these groups of patients is to visualize their living situation before admission and at discharge. In the figures on the next page, you can see more similarities among groups based on their prior living situation compared to the discharge destination. The patients who make limited to no change in activity limitations (red group) are also those most at risk for mortality, hospitalization, or new discharge to long-term care.

Since we can identify these patients early in their stay, we can assist the inter-disciplinary team, patient, and family in appropriate discharge planning that will maximize the patient's participation goals.

## **PRIOR LIVING SITUATION**

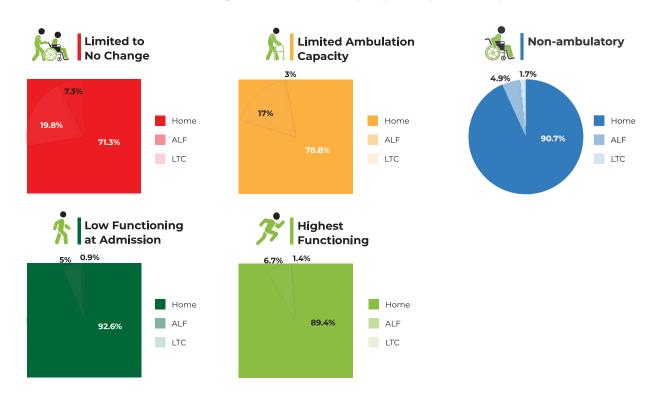


## **DISCHARGE DESTINATION**

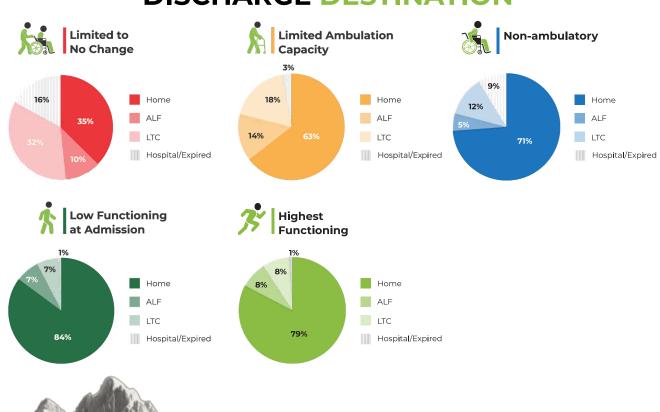


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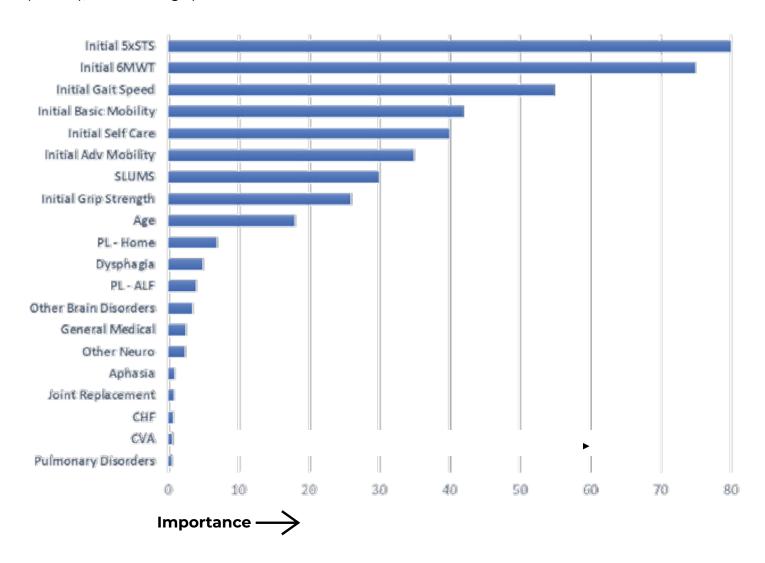
## **PRIOR LIVING SITUATION**



## **DISCHARGE DESTINATION**



This type of data analysis yields a list of features that are important in distinguishing one group from the other in order of importance. In the figure below, you can see the visualization of this feature impact list. The length of the bar next to each variable reflects the importance of that feature in group assignment. Interestingly, you can see that the most important variables impacting group assignment are initial repeated chair stands (5XSTS), initial 6-minute walk test (6MWT), and walking speed.



These measures of physical performance are more important than measures of activity limitation like mobility and self-care and significantly more important than health condition, or medical diagnoses. As you can see from the figure above, the first health condition is identified in the 13th position. We use the patient groupings from this analysis to assist us in tailoring the type, intensity, and amount of care provided to each patient, making our care genuinely patient-centered.



### **BUILDING AN EMR THAT SUPPORTS QUALITY CARE**

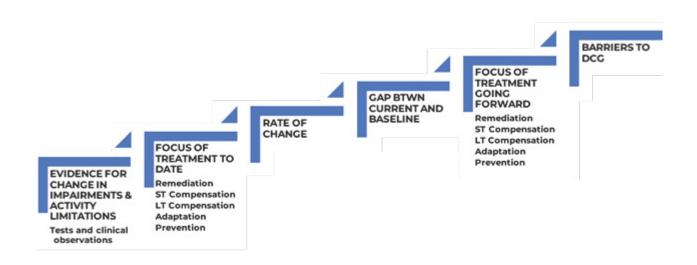
Part of our company-wide ongoing performance improvement project centers around shortening the 17-year gap between what is known from research to be the best care and the care patients consistently receive. Through this work, we discovered the power of the electronic medical record (EMR) in dictating and reinforcing clinical behavior, and so we set out to shape the content of the EMR to promote sound clinical decision-making, meet regulatory standards, and support the implementation of standardized evidence-based practices. This vision includes integrating critical aspects of standardized examination, evaluation, and intervention with key rehabilitation frameworks and concepts. The evaluation and progress report documents were successful immediately due to the integrated systematic decision-making process. The process for the evaluation is illustrated below. In it you can see how the therapist is guided to link the patient's impairments in body structure and function to their activity limitations and then reflect on the best rehabilitation pathway. This decision is a critical step in directing the specifics of intervention and is related to the expected prognosis for improvement in impairments.







A similar systematic approach is used in the progress report (illustrated below) where the clinician reflects on the care to date, the patient's responsiveness, and makes adjustments to the treatment plan and further refinements to the discharge plan.



The foundation of the treatment encounter note consists of best evidence interventions with tool tips and guides for the critical elements for each and clearly stated clinical behaviors that make intervention skilled.



## **MORE MOVEMENT MATTERS**



We, along with our clients, continue to examine how we can increase the value of rehabilitation services. One approach we've taken is to examine the literature around generalized activity and mobility, primarily studied in acute care, and consider what the evidence-informed strategies we can implement in post-acute care.

We know that when older adults are hospitalized, they experience the unrecognized epidemic of low mobility which creates a cascade to dependence. This syndrome referred to as Hospital Associated Deconditioning (HAD) or Post Hospital Syndrome can lead to significant adverse events including risk for falls, weakness and deconditioning, decline in activities of daily living, risk for nursing home placement, and decline in caregiver health. Half of all Medicare beneficiaries who experience hospitalization do not recover to their prior level of function 1 year after their admission. Generalized activity and mobility, primarily centered on walking and upper and lower extremity exercise, has been shown to positively impact patient outcomes when provided in the acute care setting. Can it work in post-acute care also?



## MORE MOVEMENT MATTERS

## THE PROBLEM



During 2024, we began coupling our **high-intensity skilled care with low-intensity generalized activity** and mobility to remediate HAD. Our approach was to bring in a non-licensed provider, trained by the rehab team and supervised by the nursing team, to work with short-stay patients in outside of therapy activity and mobility.

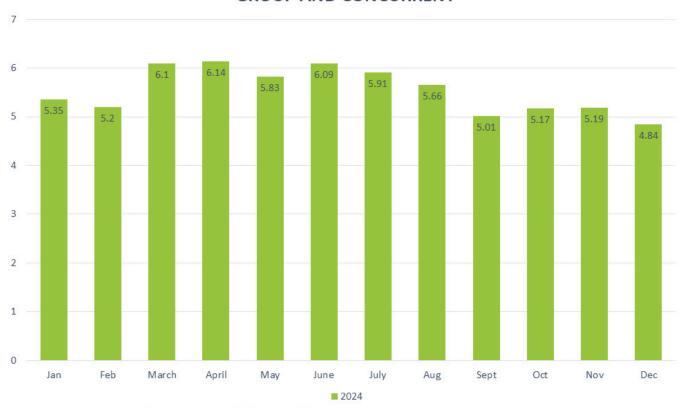
We now have the program **More Movement Matters** fully implemented in 15 locations. The Mobility Specialists in these communities have provided over 200,000 minutes of activity and mobility to more than 1500 short-stay patients. Patients who work with a Mobility Specialist engage in 20% more activity bouts than patients who do not work with a Mobility Specialist. While we are still measuring the full impact of this effort on clinical outcomes, there is a **positive trend toward greater gains** in activity tolerance (6-minute walk test) and overall mobility (section GG) with stable performance in gait speed and ADL performance (section GG).

Patient and family feedback has been overwhelmingly positive, and our **community** partners are thrilled with the added presence around activity and mobility in their communities.

#### **GROUP AND CONCURRENT PROVES SUCCESSFUL**

**Infinity Rehab's** group and concurrent percentage is showing growth comparable to industry benchmarks.

#### **GROUP AND CONCURRENT**

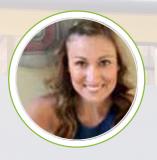


We are seeing successes with group and concurrent in our communities. It is making an impact on our teams and the care we provide.

Groups can often be effective for patients with similar diagnoses, to see that they are not alone in their rehab journey and encourage others to progress in their therapy goals."

#### **BECKY SAHADI**

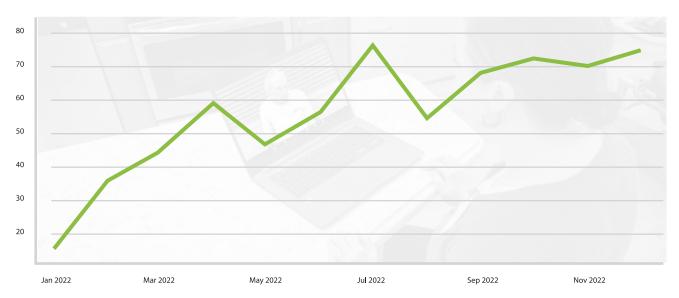
Director of Rehab and PT, DPT



#### **INFINITY REHAB CONTINUES TELEHEALTH INNOVATIONS IN 2024**

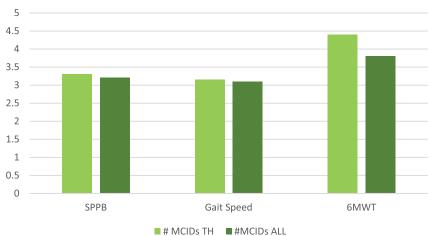
Infinity Rehab has been leading the way in providing telehealth services for over a decade. This mode of service delivery has enabled older adults in rural and underserved areas to receive the necessary rehabilitation for optimal recovery. In 2024, we provided over 4000 telehealth visits to patients in skilled nursing communities, who otherwise would have had a significant delay in their rehabilitation. In addition, we have continued to offer telehealth services to acute care patients receiving care at home, expanding into three new states. Our hospital-at-home services bring expert therapy and personalized care directly to the patient's doorstep. Over 330 virtual visits were provided to these patients and patients needing new seating systems. Providing therapy to individuals in their home environment allows patients increased access and flexibility in care and the ability for therapists to tailor care plan to their setting and surroundings. Feedback has been overwhelmingly positive as patients are thrilled to receive services in their own homes.

#### TELEHEALTH ENCOUNTER TREND



And there's no difference in the clinical quality of cases where patients received at least some telehealth as compared to the whole group. This is illustrated using a sampling of metrics in the figure below.

## Telehealth Comparison of Outcomes





#### **BUILDING A CULTURE OF COMPLIANCE AND SAFETY**

In 2024, we have focused on ensuring consistent, standardized processes consistent with regulatory best practices. Customization of the electronic medical record ensures that our clinicians interact with a tool daily that aids them in documenting essential elements from their daily practice. And it's working—2024 was another year in which we had no denials for payment related to skilled services provided. We maintain a steady quality assurance program focused on key areas of opportunity, staff education, and policy review directed by an active compliance committee.

We diligently protect patient privacy through Information technology security best practices. Through our partnership with PrimeCare Technologies and Incovate Solutions, we are deepening our layers of security against cyber-based bad actors.





#### 25TH ANNIVERSARY TESTIMONIALS

In 2024, we marked 25 years of providing healing and hope to countless individuals, positively impacting their lives and well-being. Our journey has been marked by innovation, compassion, and a relentless pursuit of excellence in healthcare therapy.

Our clinicians and team members took time to reflect on their time with Infinity Rehab in honor of our silver anniversary.

View the entire video series here.



# 25th ANNIVERSARY REFLECTIONS





# PATTY SCHEETS RECEIVES DISTINGUISED LUCY BLAIR SERVICE AWARD

Patty Scheets, Vice President of Quality and Compliance at Infinity Rehab, was honored with the Lucy Blair Service Award from the American Physical Therapy Association (APTA) at a reception on July 21, 2024.

The Lucy Blair Service Award honors physical therapist members or physical therapist life members of the American Physical Therapy Association (APTA) whose contributions to the association are of exceptional quality. These contributions may be to the physical therapy profession and APTA as a whole and/or through a component (district, chapter, section, academy) of APTA. Recipients may have served on one or more elected or appointed groups, in one or more elected positions, or some other capacity.

Read the full press release <u>here</u>.



Board-Certified Clinical Specialist in Geriatric Physical Therapy
Joyce Maring, PT, DPT, EdD

Fire Norman DT, DDT

Eva Norman, PT, DPT

Kristin von Nieda, PT, DPT, MEd

#### 2024

Morris Casano Beato, PT, DPT,

**Board-Certified Neurologic Clinical Specialist** 

**Board-Certified Geriatric Clinical Specialist** 

Terence Brown, PT, DPT, COMT

Duane "Scott" Davis PT, MS, EdD

Board-Certified Clinical Specialist in Orthopedic Physical Therapy

Jennifer Green-Wilson, PT, MBA, EdD

Kenneth L. Miller, PT. DPT

Jodi Pfeiffer, PTA, BS

Charlene D. Portee, PT, PhD, FAAPT

Patricia Scheets, PT, DPT, MHS

Board-Certified Neurologic Clinical Specialist

Henry O. and Florence D.



#### **CELEBRATING HEALTHCARE HEROES**

## PT MONTH **HEROES**







SLP MONTH HEROES



In 2024, we honored our healthcare heroes by shining a spotlight on our dedicated clinicians during Occupational Therapy Month (April), Better Hearing and Speech Month (May), and Physical Therapy Month (October). These celebrations were a heartfelt tribute to the hard work, compassion, and expertise of our healthcare professionals, who play a vital role in improving patients' lives every day. Their unwavering commitment to excellence and patient care is truly inspiring and deserving of recognition.





#### PROFESSIONAL DEVELOPMENT

Lori Waller, PTA, RAC-CTA, and Infinity Rehab's Compliance Auditor, successfully completed a rigorous certification process through the American Association of Post-Acute Care Nursing (AAPACN) as a Resident Assessment Coordinator and Medicare Specialist. The RAC-CTA® (Resident Assessment Coordinator—Advanced Certification) education and certification program has long set the national standard for skilled nursing facility PPS and MDS 3.0 education. The RAC-CT is the same certification program originally created by the MDS professionals at AANAC (American Association of Nurse Assessment Coordination), now part of AAPACN. Constantly reviewed and updated by a team of experts, the RAC-CT certification program ensures knowledge of clinical assessment and care planning, completion of the MDS, and the regulatory body surrounding the RAI/MDS process. Her advanced training also includes advanced principles of clinical reimbursement, Medicare program compliance and integrity, RAI/MDS program integrity, leadership, ethical practice, managing medical review, accurate ICD-10 diagnosis coding, advanced strategies for payment oversight, and improving a facility's quality measurement in all CMS quality programs.

#### **ANNUAL EMPLOYEE AWARDS**









The Katie Walker Award was established in 2008 to publicly recognize an exceptional DOR/OPCD that impacts patient care, rehab team members, and communities in a unique & significant way.

The 2024 recipient of the Katie Walker award was Deanna Harris, PT and Senior Director of Rehab in Missoula, Montana.



#### **ANNUAL EMPLOYEE AWARDS**

#### **HOME OFFICE AWARD**

The Home Office Award was established in 2018 to publicly honor an Infinity Rehab home office employee who significantly impacts those they serve in a meaningful way.

The 2024 recipient of the Home Office Award was **Brandi** Moore, Payroll and HR Specialist.



#### CLINICAL EXCELLENCE AWARD

The Team Clinical Excellence Award is awarded to recognize teams that have exhibited outstanding effort towards Infinity Rehab's clinical programs. This award will be presented to an Infinity team who met the following criteria for the prior year for which they are nominated.

There were two recipients in 2024 of the Clinical Excellence Award: Chateau Girardeau in Cape Girardeau, Missouri and West Hills Health & Rehabilitation in Portland, Oregon.

West Hills Health & Rehabilitation



Chateau Girardeau





#### **ANNUAL EMPLOYEE AWARDS**

#### RISING STAR AWARD

Newly introduced in 2023, the **Rising Star Award** honors one clinician from each discipline. The therapist or assistant embraces our mission and vision and has proven to be an innovator in their position. They are a leader and demonstrate our five leadership practices and bring a new energy and dedication to their team. Nominees can be full- and part-time employees or PRNs who have worked for Infinity Rehab for one year or less.

#### The Rising Star recipients were:

- Physical Therapy: Sinead O'Dwyer, PT
- Occupational Therapy: Seira Plouviez, OT
- · Speech Therapy: Courtney LaManna, SLP



Sinead O'Dwyer, PT



Seira Plouviez, OT



Courtney LaManna, SLP



## **EMPLOYEE EXPERIENCE MATTERS**





In 2024, our commitment to fostering a positive workplace culture was reflected in our **Employee Net Promoter Score (eNPS) of 27**. This strong score demonstrates our employees' confidence in Infinity Rehab as a great place to work and grow. We remain dedicated to listening, improving, and ensuring our team feels valued and supported.







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