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AMRPA welcomes any studies that shine a light on opportunities to improve health care delivery. We have focused on quality and safety for many years, through a wide range of initiatives and programs. AMRPA’s members are dedicated to providing the highest quality care and optimal outcomes to the patients they serve and embrace greater collaboration with the Centers for Medicare and Medicaid Services (CMS) to achieve these goals.

The OIG’s findings reflect the need to look at health outcomes through a different lens – to reduce avoidable adverse events, we must focus on systemic causes that pervade the entire health care system rather than individual providers in isolation. Although measures and assessments vary across different acute and post-acute care settings, and it is impossible to draw apples-to-apples comparisons between hospital and nonhospital providers, the result of this and related OIG studies reveal consistent levels of adverse events across different provider types and care settings.

Rehab Industry has Made Substantial Strides to Increase Hospital Quality Since 2012 Report Period

It is also critical to note that significant changes have occurred in rehabilitation hospitals to advance quality, prevent hospital readmissions, reduce medical errors, and improve safety since the limited study period in 2012, including the implementation of a Medicare quality program, revised Joint Commission standards, and other quality and operational initiatives generally designed to instill a culture of safety. Even in retrospect, reviewers characterized only 8 percent of adverse events as “clearly preventable” and the majority as “not preventable.” Compared to a robust and expanding quality measurement program being implemented in real time by providers, a post hoc review with the benefit of hindsight has limited application to those providing care in the moment, who do not have unlimited time to second guess with the benefit of information about the future.

Regardless of limitations of the OIG’s methodology, there is consensus about the opportunities to reduce medical errors and the need to continually strive for quality improvement. To deliver the most error-free delivery system possible, however, we need to build in more safeguards than our current policies allow. Market and regulatory pressures from payers place an ever-growing emphasis on documentation management processes that divert scarce resources away from patient care.

Regulatory Pressures Limit Providers Ability to Focus on Patient Care

The pressures placed on providers, patients, and families to accelerate the pace of care delivery, speed care transitions, and to press patients into less expensive settings all contribute to our system a sense of urgency that is counter to the need to take time to do things right the first time, and to allow caregivers and patients to have continuity of care provided not just by documentation, but by caregivers who develop relationships with patients and can rely on their personal knowledge, history, and experience with each individual patient to minimize the risk of harm being done by inaction or inattention.
AMRPA concurs in the OIG’s recommendations and embraces CMS’ continued engagement on information and data sharing to support quality-centric reforms. We remain focused on improving the safety and quality of care of the health system in this country and providing individuals that visit our hospitals with superior, patient-centric care.

About the American Medical Rehabilitation Providers Association

AMRPA is the nation’s only trade organization dedicated solely to the interests of Inpatient Rehabilitation Hospitals and Units (IRH/U), outpatient rehabilitation centers and other medical rehabilitation providers. Our focus is on collective advocacy—working together to advance the field of medical rehabilitation and support the medical rehabilitation needs of persons with disabilities. For more information, please visit www.amrpa.org.