

Eli's Rehab Report

Industry Notes: Special Funding For Physical Therapist Researchers

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If you dream of conducting physical therapy research, but are hampered by lack of funds, there's great news for you.

The **Patient-Centered Outcomes Research Institute (PCORI) Pragmatic Clinical Funding Initiative** is offering millions of dollars for large patient-centered comparative effectiveness research studies involving thousands to tens of thousands of patients, according to a Feb. 25 **American Physical Therapy Association (APTA)** press release.

This funding opportunity is inspired by the lack of available information regarding outcomes in diverse patient and care situations derived from real-life situations, the press release says.

"Physical therapist researchers are on the forefront of developing an essential body of knowledge, demonstrating the efficacy of physical therapist treatment," said APTA President **Paul A. Rockar Jr.**

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To learn more about the funding program, visit www.pcori.org/blog/pcori-announces-first-awards-under-pragmatic-clinical-studies-initiative and www.moveforwardpt.com/default.aspx.

SNF Medicare Payments are Grossly Inaccurate, MedPAC Claims

Current Medicare payments to skilled nursing facilities (SNFs) for therapy and non-therapy ancillary (NTA) services haven't been so inaccurate since 2006, according to a Jan. 13 report from the **Medicare Payment Advisory Commission (MedPAC)**.

Despite the **Centers for Medicare & Medicaid Services'** (CMS') many revisions to the SNF prospective payment system (PPS) since 2006, MedPAC's report cites major flaws in how Medicare pays for SNF services. MedPAC asserts that the SNF PPS encourages SNFs to provide rehabilitation therapy services and discourages them from providing drugs and other NTA services.

"Put differently, the payment system contains incentives for facilities to admit rehabilitation patients," MedPAC says. One of the payment system's "key flaws is that it bases the therapy component of the SNF payment on the amount of therapy the SNF chooses to provide to a patient, rather than on the patient's characteristics and clinical need for therapy."

In the report, MedPAC recommends an alternative SNF PPS design, which would base therapy payments on patient characteristics, such as age, diagnoses and mental cognitive abilities, instead of the amount of therapy a patient receives. "These changes would not reduce Medicare's overall payments to SNFs, but would redistribute payments more equitably among providers," MedPAC states.

Link: To read MedPAC's new report, go to www.medpac.gov/documents/reports/january-2015-medpac-and-urban-institute-report-the-need-to-reform-medicare-s-payments-to-skilled-nursing-facilities-is-as-strong-as-ever.pdf.

What the IMPACT Act Means for PAC Providers

If you are still not sure whether the IMPACT Act affects you, here's the lowdown. The IMPACT Act directs the **U.S.**



Department of Health and Human Services (HHS) to standardize patient assessment data, quality and resource use measures for post-acute care (PAC) providers including skilled nursing facilities (SNFs). Other affected providers include home health agencies (HHAs), inpatient rehabilitation facilities (IRFs), and long-term care hospitals (LTCHs).

The legislation aims to "allow HHS to compare quality across PAC settings, improve hospital and PAC discharge planning, and use this standardized data to reform PAC payments in the future," according to the Alexandria, VA-based **American Physical Therapy Association** (APTA)