AMRPA and AAPM&R Briefing:
Meeting the Medical Rehabilitation Needs of COVID-19 Patients

Thursday, July 9, 2020
Who We Are

- **AMRPA Mission Statement:** Advancing the field of medical rehabilitation through advocacy, education, and the promotion of access to care.
  - AMRPA is the primary national trade association representing more than 650 inpatient rehabilitation hospitals and units.

- **AAPM&R Mission Statement:** AAPM&R leads the advancement of physiatry’s impact throughout health care.
  - AAPM&R is the only organization advancing more than 9,000 practicing and in-training physiatrists and the care they offer to a diverse patient population.
Agenda

- The Distinct Value of Inpatient Rehabilitation to Patients
- COVID-19’s Impact on Patients, Physiatrists, and Inpatient Rehabilitation Hospitals
  - Examples from the Field - How Providers & Hospitals are Responding
  - Complex and Long-Term Rehab Needs of COVID-19 Survivors
- Policy Considerations
  - Key Flexibilities & Waivers Granted to Date
  - Actions to Bolster Patient Access to IRFs & Outcomes in Future Pandemics
Featured Panelists

- Steven R. Flanagan, MD
  Chair and Professor
  Rusk Rehabilitation at NYU Langone Health
  NYU Robert I Grossman School of Medicine

- Keith Foster, MD, MBA
  Chief Medical Officer
  Broward Health North

- Patty Jobbitt, MSA, PT
  AMRPA Board Member
  Chief Executive Officer
  Rehabilitation Institute of Michigan
  Detroit Medical Center

- David Storto, JD
  AMRPA Board Member
  President
  Partners Continuing Care
  Spaulding Rehabilitation Network
The Value of Inpatient Rehabilitation
The Value of Inpatient Rehabilitation

- Hospital Level Care

- Distinct Characteristics from Other Post-Acute Care Options (Skilled Nursing, Home Health, Outpatient):
  - Physician Managed Care and Supervised Therapy
  - 24/7 Nursing
  - Stringent Infection Control Plans and Protocols
  - On-Site Hospital Equipment and Specialists (Respiratory, Laboratory, Diagnostic, Daily-Living Simulations).

The Value of Inpatient Rehabilitation

- Experts in Intensive, Interdisciplinary Care for Severely Debilitated Patients

- Patients receive daily interdisciplinary therapy including PT, OT, Speech, Psychology and others designed to return them to their previous lives

- Rehabilitation physicians are uniquely qualified to create treatment programs and coordinate with therapists and other consultant physicians to restore function and achieve optimal health
What is Happening in the Field?
Rusk Rehabilitation at NYU Langone Health

- One of the world’s largest university-affiliated academic centers for rehabilitation medicine providing rehabilitation from acute care through outpatient.
- Covid-19 response
  - Acute care proning, early mobilization, timely transitions
  - Rehab in place (commingling acute and rehab)
- IRF
  - Transition to Covid Acute and Covid Rehab Units
  - Relaxation of 3 hour therapy and 60% diagnosis rules
- Ambulatory: Preparing for long-term disability

Flexibility
Spaulding Rehabilitation Network

- Includes all level of post-acute care (PAC)
  - Spaulding Boston - Freestanding IRF (132 rehab beds)
  - Spaulding Cape Cod - Freestanding IRF (60 rehab beds)
- Numerous Outpatient Centers
  - 510k visits in FY 2019
- Robust Research Investment
  - $11.6M in new awards in 2019
- Reconfiguration of IRFs for COVID-19 positive and negative wings
- Strategic/safe rationing of personal protective equipment (PPE) and cleaning supplies
- Increased utilization of telehealth services to preserve PPE
Rehabilitation Institute of Michigan

- Only freestanding, academic IRF in southeast Michigan
- One of only 5 rehabilitation hospitals in the country designated as a Magnet hospital for nursing excellence
- Specialize in amputee, brain injury, spinal cord and stroke care
- 69 licensed rehabilitation beds
  - 1,300 IRF discharges in 2019
  - 237K outpatient visits in 2019
- Clinical training, education and research
- Innovative Rehab Recovery Centers for COVID-19 Patients
Broward Health North

- Part of a 4 hospital health system
  - 10th largest public, safety-net health system in the US
- 409 bed acute-care hospital
  - 30 bed IRF unit
  - 13,000 admissions/year
- Outpatient PT, OT, and Speech Therapy
Policy Considerations
COVID-19: Considerations for the Future

- Public Health Emergency duration must be carefully considered
  - Hospital capacity, infection rates must be considered
  - Longer “tail” for inpatient rehabilitation providers
- IRFs in “late phase” states/regions still require surge flexibilities due to varying approaches to reopening by states
- Positive impact of voluntary prior authorization waivers
- PPE and testing distribution to IRFs must be addressed/improved
- Certain regulatory waivers considered for longer implementation:
  - Three-hour Rule
  - 60% Rule
- Relief from Audits
- Rehabilitation physician leadership
AMRPA/AAPM&R Recommendations for Future Pandemic Response

- Adequate appropriations for IRFs, other hospitals, and providers to address necessary modernization/construction for future PHEs
- Interstate licensing
- Allowance of commingling during future PHEs
- Permanent telehealth flexibilities for outpatient therapy & recognition of new technologies as being HIPAA compliant
- Improved PPE distribution and resources dedicated to innovative PPE for IRF provider/patients
- Permanent and meaningful prior authorization reform
- Establishment that certain critical waivers and flexibilities be implemented for any IRF/IRF provider during future PHEs
Questions?

Thank you for your time. For additional information, please contact Kate Beller, AMRPA EVP for Government Relations and Policy Development (kbeller@amrpa.org) or Reva Singh, AAPM&R Director of Advocacy and Government Affairs (rsingh@aapmr.org).