

ESSENTIAL ARTICLES OF PM&R

PM&R Administrative Management, ACA, CMS, Quality Medicine and Patient Centered Care

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Patient Protection and Affordable Care Act: Potential effects on physical medicine and rehabilitation.

Boninger JW, Gans BM, Chan LC. Archives of Physical Medicine and Rehabilitation 2012;93(6):929-934. *This article reviews pertinent area of the Patient Protection and Affordable Care Act (PPACA) to determine the PPACA's impact on physical medicine and rehabilitation and indicated, if fully implemented, the PPACA will significantly impact the field of PM&R. While the law contains ambitious initiative that may, if unsuccessful or incorrectly implemented, negatively impact PM&R, it also has the potential to greatly improve the quality and efficiency of rehabilitative care. A proactive approach, to the changes the PPACA will bring about, is essential for the health of the field.*

Publication guidelines for quality improvement in health care: Evolution of the SQUIRE project.

Davidoff F, Batalden P, Stevens D, Ogrinc G, Mooney S. QualSaf Health Care 2008;17(Suppl 1):i3-i9. *This paper describes the Standards for Quality Reporting Guidelines Excellence or SQUIRE project. It was designed to facilitate more and higher quality reporting of formal improvement studies. It also presents the guideline creation process. It is an excellent resource to guide quality improvement study presentations.*

Quality improvement methods in clinical medicine.

Plsek P. Pediatrics 1999;(103) Sup E1:203-214. *This article introduces usage of basic quality improvement tools and methodology such as flow charts, cause and effect diagrams, check sheets, histograms, brainstorming, failure modes and effects analysis, rapid cycle PDSA, control charts and benchmarking.*

Using online health communities to deliver patient-centered care to people with chronic conditions.

Van der Eijk M, Faber MJ, Aarts JWM, Kremer JAM, Munneke M, Bloem BR. J Med Internet Res 2013;15(6):e115. *Study on the use of Online Health Communities (OHCs) as a tool to facilitate high-quality and affordable health care for future generations. OHCs can be used to share experiences, exchange knowledge, and increase disease-specific expertise among patients and providers. OHCs can bridge geographical distances and enable interdisciplinary collaboration*

across institutions and traditional echelons. OHCs can be used to actively engage and empower patients in their health care process and to tailor care to their individual needs.

Chapter 1 – The Changing Nature of Hospital-Physician Relations.

Lister E, Sagin T. *Creating the Hospital Group Practice*. Health Administration Press 2009.

Rehabilitation in the New World Order: Will our difference be our demise.

Ulin G. Archives of Physical Medicine and Rehabilitation 2012;93(2):185-187.

Comparison of discharge functional status after rehabilitation in skilled nursing, home health, and medical rehabilitation settings for patients after hip fracture repair.

Mallinson T, Deutsch A, Bateman J, Tseng HY, Manheim L, Almagor O, Heinemann AW. Archives of Physical Medicine and Rehabilitation 2014;95:209-17.

The many faces of Medicare.

D'Orsi SC, Worsowicz G. PM&R 2013;5(5):429-432.

What are the implications of Accountable Care Organizations for physical medicine and rehabilitation practices?

Melvin JL, Worsowicz G. PM&R 2011;3(11):1069-1071.

A user's manual for The IOM's 'Quality Chasm' report.

Berwick D. Health Affairs 2002;21(3):80-90.

Patient-perceived involvement and satisfaction in Parkinson's disease: effect on therapy decisions and quality of life.

Grosset KA, Grosset DG. MovDisord. 2005;20(5):616-9.

Randomized controlled trial of peer mentoring for individuals with traumatic brain injury and their significant others.

Hanks RA, Rapport LJ, Wertheimer J, Koviak C. Arch Phys Med Rehabil 2012;93(8):1297-304.

Capturing patients' experiences to change Parkinson's disease care delivery: A multicenter study.

Van der Eijk M, Faber MJ, Post B, Okun MS, Schmidt P, Munneke M, Bloem BR. Journal of Neurology 2015, August 21 (Epub ahead of print).

Family-centered theory: Origins, development, barriers, and supports to implementation in rehabilitation medicine.

Bamm EL, Rosenbaum P. Archives of Physical Medicine and Rehabilitation 2008;89(8):1618-1624.