



JAMES L. MADARA, MD
EXECUTIVE VICE PRESIDENT, CEO

ama-assn.org
t (312) 464-5000

December 8, 2015

The Honorable Keith Faber
President
Ohio State Senate
Statehouse
Columbus, OH 43215

Re: American Medical Association strong support for House Concurrent Resolution 16

Dear Senator Faber:

On behalf of the physician and student members of the American Medical Association (AMA), I write in strong support of Ohio House Concurrent Resolution (HCR) 16, which would encourage the Centers for Medicare & Medicaid Services (CMS) to revise survey measures included in the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) that relate to patient pain management.

This resolution complements AMA advocacy urging CMS to reexamine the validity of questions used on the HCAHPS survey related to pain management as reliable and accurate measures of the quality of care in this domain. The AMA believes that the current HCAHPS survey does not accurately and meaningfully assess patient satisfaction around pain control and management during hospital and emergency department visits. This aspect of the survey does not take into account variations in treatment regimens due to physician preference, patient behavior, or health care facility practices.

The AMA acknowledges that pain is one of the most common reasons for patients to seek medical attention and one of the most prevalent medical complaints in this country. However, the goals of pain management vary from patient to patient. When pain is acute, the overriding goal is to reduce pain intensity as quickly as possible, often in association with amelioration of its underlying cause. In those with persistent pain related to a serious medical illness, such as cancer, the goal of comfort may become linked to other concerns such as the relief of other symptoms and management of diverse problems undermining physical, psychosocial, and spiritual well-being. Although systemic pharmacotherapy is the mainstay approach in the treatment of acute and many types of persistent pain, optimal pain management may also involve diverse non-pharmacologic therapies. These include an array of non-invasive strategies and other approaches that can be administered in a multidisciplinary manner.

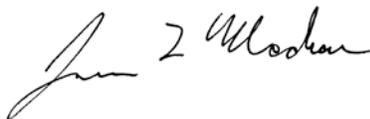
The Honorable Keith Faber
December 8, 2015
Page 2

The HCAHPS survey, however, primarily focuses on the effective use of pharmacotherapy. This may be consistent with the patient's wishes, but it is not always in the patient's best interest. Physicians who exercise their judgment and decide to limit or not prescribe opioid analgesics to certain patients may pay the price in the form of a poor rating. Consequently, some physicians feel pressure to prescribe opioids in order to meet satisfaction metrics by which they (and their practices) are judged. HCAHPS has now created ethical tensions due to the challenges of trying to satisfy patients while refusing inappropriate requests. It also may be perversely contributing to an over-abundant supply of opioids that are being diverted and abused—which is one of the nation's major public health problems today. These issues were made clear by a 2013 survey by the Ohio State Medical Association of 1,100 Ohio physicians that found that 74 percent of physicians believe that HCAHPS survey measures add to the problem of overprescribing pain medications and may be fueling the prescription drug abuse epidemic.

That is why the AMA has repeatedly urged CMS to: reframe the questions used on the HCAHPS survey related to pain management; assess whether the HCAHPS appropriately reflects patient satisfaction and whether it may encourage inappropriate treatment; and suspend the use of HCAHPS measures addressing pain management until the revised questions are reexamined to determine whether they are contributing to over prescribing due to the pressures HCAHPS scores place on providers. For the foregoing reasons, the AMA strongly supports HCR 16.

If you have any questions, please contact Daniel Blaney-Koen, JD, Senior Legislative Attorney at daniel.blaney-koen@ama-assn.org or (312) 464-4954.

Sincerely,

A handwritten signature in cursive script, appearing to read "James L. Madara".

James L. Madara, MD

cc: Ohio State Senate
Ohio State Medical Association