



THE VOICE

The e-newsletter of National Consumer Voice for Quality Long-Term Care

March 19, 2019

Legislation Introduced to Close Gap for Medicare Coverage in SNFs After Hospital Stays

Congressman Joe Courtney (D-CT), Congressman Glenn Thompson (R-PA) and Senator Sherrod Brown (D-OH) have reintroduced bipartisan legislation regarding observation status. Under current law, patients must have an inpatient stay in a short-term acute care hospital of at least three consecutive days in order for Medicare to pay for a subsequent stay in a skilled nursing facility (SNF). However, more and more patients are being held under "observation status," which is an outpatient designation. Patients who receive hospital care under "observation status" do not qualify for Medicare coverage in a SNF. These patients are either strapped with astronomical bills after their stays in a SNF or are forced to return home without receiving the treatment they needed. The Improving Access to Medicare Coverage Act of 2019 would count time spent under observation status towards the required three-day hospital stay, so patients can receive Medicare coverage in a SNF. Read more about the legislation [here](#). Consumer Voice is a part of a coalition of more than 30 organizations that support the legislation.

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Materials Available for World Elder Abuse Awareness Day 2019 - June 15

The National Center on Elder Abuse (NCEA) has unveiled the updated microsite for World Elder Abuse Awareness Day (WEAAD) including tools, tip sheets, ways to take action and many more WEAAD materials. NCEA, in collaboration with the National Clearinghouse on Abuse in Later Life (NCALL), announced this year's theme - *Lifting Up Voices* - to serve as a platform for unifying elder justice and violence against women by sharing the experiences of older people around the world. NCALL and Terra Nova Films put together a series of videos - *Lifting Up the Voices of Older Survivors* - featuring older survivors sharing their stories and experiences of domestic violence, sexual assault, stalking and financial exploitation. Sign up for information about the video release [here](#). Find other WEAAD resources on [NCEA's microsite](#).

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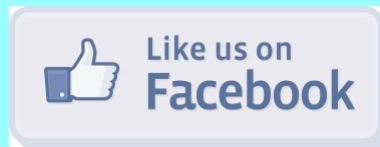
Consumer Voice Analysis of CMS Update on the National Partnership to Improve Dementia Care in Nursing Homes

On March 1, 2019, the Centers for Medicare and Medicaid Services (CMS) released a [memo](#) providing updates and outlining a new enforcement approach related to the [National Partnership to Improve Dementia Care in Nursing Homes](#). The memo notes that since 2011, National Partnership data has shown a reduction of 38.9% in the number of nursing home residents receiving antipsychotic medication; at the end of 2018, the rate was 14.6%. However, CMS has identified 1,500 nursing homes, or "late adopters," that have not improved their antipsychotic medication usage rate for nursing home residents since Quarter 4 of 2011. CMS notified these facilities of their

Saturday, June 15: [World Elder Abuse Awareness Day - Lifting Up Voices](#)

November 3-6, 2019: Consumer Voice Annual Conference, Crystal Gateway Marriott, Arlington, Virginia

Join the conversation and follow us on social media!



Last Week's Most Popular Post:

Friday, March 15:

[In response to encouragement from the nursing home industry, the Trump administration decreased fines against facilities found to have endangered or injured residents.](#)



Last Week's Most Popular Tweet:

Friday, March 8:

[Updated hospital performance data is available on the Hospital Compare website](#)

identification in December 2017 and has set a goal for the facilities to decrease usage of antipsychotic medications by 15% for long-stay residents by the end of 2019.

As of January 2019, there are 235 late adopters that have been cited for noncompliance with federal regulations related to unnecessary medications or psychotropic medications two or more times since January 1, 2016. These late adopters have also not shown improvement in their long-term antipsychotic medication rates.

CMS is initiating a new enforcement approach for these facilities, and state agencies are directed to monitor these facilities and conduct on-site revisits to confirm if deficiencies have been corrected.

Consumer Voice welcomes the steps CMS is taking to increase its enforcement actions related to the use of antipsychotic medications. However, while we appreciate the enforcement actions CMS is initiating, we are concerned that they are too limited in scope. By focusing on only 235 of 1,500 facilities that have not reduced their antipsychotic usage rates, CMS is essentially giving a “free pass” to 1,265 nursing homes whose antipsychotic rates have not decreased. CMS’s approach is to encourage these facilities “to continue focusing on reducing use of antipsychotic medications.” Considering that seven years of “encouragement” have not been successful in reducing utilization rates, it seems that a different approach is necessary to effectuate change.

For more detailed information on this memo, see Consumer Voice’s recent [Policy Break](#).

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Register for the Revised NORS Training Webinar Series

Join the National Long-Term Care Ombudsman Resource Center (NORC) for Parts 2-4 of their five-part webinar series on the Revised National Ombudsman Reporting System (NORS). This series introduces the new training materials and helps programs prepare for the transition to new codes, definitions, and activities on October 1, 2019.

Long-Term Care Resources & News

- [Opioids and Elder Abuse: A Disquieting Connection](#) USC Center on Elder Mistreatment blog, March 4, 2019

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The following three webinars will cover each part of the revised four-part training.


The recording and materials from the introductory webinar and Part I webinar are available [here](#). The Part II: Complaint Coding NORS training materials are [available now](#). **Join NORC TODAY Wednesday, March 19th at 3:00pm ET for the third webinar in the series - Part II Complaint Coding Quiz** and for the rest of the webinars in the series:

- Part III: Closing the Case – Verification, Referral, and Disposition April 30, 2019 3:00 – 4:30 ET
- Part IV: Activities May 29, 2019 3:00 – 4:30 ET.

Register [here](#) (you only need to register once to attend the full series). Missed today's webinar? No problem. Webinar materials will be available, and you can still attend the rest of the series.

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Spotlight on Resources



CONSUMER VOICE **FACT SHEET**
The National Ombudsman Resource Center

FAMILY INVOLVEMENT IN NURSING HOME CARE

Research supports that family involvement during a nursing home stay can help ensure that the facility provides quality care. But how can a family member get involved in the care of a loved one? Under the Nursing Home Reform Law of 1987, when a person is admitted to a nursing home, **family members have the right to be involved with the care of their loved one**, unless the resident states that she does not want family involvement. This fact sheet suggests ways family members can be involved in the care of a loved one during a nursing home stay and provides practical tips for family involvement.

Who conducts a resident assessment?
Typically an assessment involves:
The resident, nursing staff, social services staff, dietary staff, activities staff, and family members

Tip: Communicating Your Loved One's Story
Introducing your loved one to nursing home staff is one of the most important things you can do. Use the Resident Assessment to communicate personal habits and, most importantly, to share your loved one's unique life story.

Care Plan
Within 7 days of the initial comprehensive assessment, a Care Plan Conference is held. At this conference an individualized care plan is developed by an interdisciplinary team consisting of the attending physician, nurse, nurse aide, activities and dietary staff, and social worker. **It is important that the team have critical input from the resident and/or family members.**

Residents and families should participate in all care planning conferences.

All participants discuss the strategy for the resident's care in the Care Plan Conference to ensure all medical and non-medical issues are addressed. Care plan review conferences are held quarterly or whenever there is a major change in a resident's condition to see if the care plan is working or if it needs to be updated.

What is the purpose of the care plan?
The care plan is a strategy for how staff will help a resident on a daily basis. The care plan clarifies what each staff person will do and when they will do it. The care plan serves as a guide for the resident, family members, and staff to discuss the resident's progress.

Resident needs and wishes come first!
It is important to remember the role of the family member is to always communicate to the nursing home staff your loved one's needs and preferences. This may be different than what you think is best for your loved one but the resident's needs and wishes should always be respected. Always encourage the resident to express her preferences.

INITIAL FAMILY PARTICIPATION: THE RESIDENT ASSESSMENT AND CARE PLAN

Resident Assessment
The assessment is key to understanding what each resident needs to maintain physical, mental, and social function in a nursing home. The resident must have a comprehensive assessment within 14 days of admission to a nursing home and at least once a year after that or anytime there is significant change in the resident's condition. Resident assessment reviews are completed quarterly. The assessment is used to gather information about the health and physical condition of a resident and also examines her habits, activities, and relationships.

Consumer Voice and the National Ombudsman Resource Center have a multitude of resources available online covering a wide range of long-term care topics. Visit the [Consumer Voice](#) and [NORC websites](#) to explore all the available resources. Check out this week's

highlighted resource:

[Family Involvement in Nursing Home Care](#)

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About The Voice

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Consumer Voice is the leading national voice representing consumers in issues related to long-term care, helping to ensure that consumers are empowered to advocate for themselves. We are a primary source of information and tools for consumers, families, caregivers, advocates and ombudsmen to help ensure quality care for the individual. Consumer Voice's mission is to represent consumers at the national level for quality long-term care, services and supports.

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