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FOR IMMEDIATE RELEASE

In Response to CMS Announcement of New Goals for Reducing Antipsychotic Drugs in Nursing Homes

**Government Goals Do Too Little to End Rampant Misuse of Antipsychotic Drugs in Nursing Homes**

*Washington, DC, September 19, 2014* - The government's incremental goals to reduce rampant misuse of antipsychotic drugs in nursing homes are doing too little to protect elderly residents, consumer advocates have told federal regulators. Forty years after a Senate committee branded psychotropic drugs used in nursing homes as "chemical straight jackets," more than 250,000 residents could still be administered dangerous antipsychotic medications inappropriately under targets to be announced by the Centers for Medicare & Medicaid Services (CMS). The advocates fear that this signals to providers that regulators will tolerate indiscriminate use of antipsychotics in long-term care facilities.

Antipsychotic drugs are frequently used to sedate residents with dementia and to suppress behaviors that may be caused by residents' inability to articulate pain, confusion, fear, or lack of meaningful activity. The drugs carry Black Box warnings from the Food and Drug Administration that they can cause strokes, heart attacks, weight gain, diabetes, and death in elderly persons with dementia.

A recent Canadian study—based on examination of health records of more than 97,000 people over age 65—found that those taking three of the most widely used antipsychotics were one-and-a-half times more likely to be hospitalized for acute kidney problems within 30 days of starting them. They were also more likely to be hospitalized for conditions such as pneumonia, heart attacks, and inability to pass urine and had an increased risk of dying.

Four consumer organizations that have led the call to end misuse of antipsychotics in nursing homes told CMS in July they would withhold endorsement of new goals it was proposing, which would effectively lower antipsychotic prescribing through 2016 by only 5 percent a year from 2011 levels. The four organizations—the National Consumer Voice for Quality Long-Term Care (the Consumer Voice), Center for Medicare Advocacy, California Advocates for Nursing Home Reform (CANHR), and Long Term Care Community Coalition (LTCCC)—joined with CMS and nursing home providers in 2012 in the launch of CMS's National Partnership to Improve Dementia Care in Nursing Homes. However, the advocacy groups' July 28 letter to CMS said the goals, which many nursing homes ignore with impunity, will "not meaningfully improve current drugging practices."

CMS challenged nursing homes to reduce antipsychotics by 15 percent by the end of 2012, the campaign's first year. Although the goal was not reached until December 2013, a full year after the target date, CMS did not step up enforcement against facilities that violate long-standing regulations

that prohibit the use of unnecessary drugs and chemical restraints. Instead, it announced it would initiate a new round of goal-setting.

The consumer groups said when CMS set the initial 15 percent goal and extended it by a year when providers failed to meet that goal, it sent a message that a great deal of misuse is acceptable.

The advocates asked, “How much more time do nursing homes need to learn how to provide basic care to residents? Every day we go without significantly greater antipsychotic reductions is a failure to the hundreds of thousands of residents whose lives are diminished and curtailed by the continued, well-documented overuse of antipsychotics.”

In May 2011, Health and Human Services Inspector General Daniel R. Levinson said nursing home residents and their families should be “outraged” by the rampant misuse of antipsychotics found during an investigation by his office. The Consumer Voice, Center for Medicare Advocacy, CANHR, and LTCCC met with then acting CMS Administrator Donald Berwick in September 2011 to ask for long-neglected federal action to end the routine drugging of residents with Alzheimer’s disease and other forms of dementia. The result was the launch in 2012 of the National Partnership to Improve Dementia Care in Nursing Homes.

While the campaign is improving provider and surveyor education on standards of care that require the use of non-pharmacological approaches to meet the needs of persons with dementia, the advocacy groups said the industry’s inadequate response to CMS’s initial goals, coupled with CMS’s failure to improve enforcement, calls for a stronger—rather than weaker—action by CMS and state agencies.

The U.S. Attorney in northern California recently sued the owners of two California nursing homes, alleging that they “persistently and severely overmedicated elderly and vulnerable residents” with antipsychotics and other psychotropic drugs and used them as “as chemical restraints for the convenience of management . . . without evidence of medical necessity or evidence of clinical medical need.” (<http://www.justice.gov/usao/can/news/2014/docs/COUNTRY%20VILLA%20-%20Complaint.pdf>) While the advocates applaud the action taken by the US Department of Justice in these two nursing homes, they are calling on the US Department of Health and Human Services and CMS to protect residents in more than 15,000 other nursing homes across the United States from inappropriate and often illegal drugging.

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### **About the Consumer Voice**

The National Consumer Voice for Quality Long-Term Care was formed as the National Citizens' Coalition for Nursing Home Reform in 1975 to address public concern about substandard care in nursing homes. Today, the Consumer Voice is the leading national voice representing consumers on issues related to long-term care, helping to ensure that consumers are empowered to advocate for themselves.