

LONG TERM CARE (LTC) E- NEWSLETTER – April 2014: Volume 12, Number 4

The [LTC E-Newsletter](#) is a monthly electronic newsletter of the [Long Term Care Community Coalition](#). Note to Readers: To go directly to an article, click on its page number in the Table of Contents. Once you are at the article, click on any underlined text for a link to more information or to send a message in “Spotlight on Advocacy.”

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[Congress Passes/President Signs HR4302 - 11th-Hour Deal with the Nursing Home Industry Will Increase Risks for Medicare Beneficiaries](#)

Only weeks after the [Office of Inspector General published a report showing that one-third of Medicare patients sent from hospitals to skilled nursing facilities suffered harm](#) — at a projected annual cost to taxpayers of \$2.8 billion — the House and Senate leadership struck an 11th-hour deal with the nursing home industry to enrich powerful owners at the expense of patients. The Skilled Nursing Facility (SNF) value-based purchasing provision in HR 4302, which was signed into law by President Obama, reduces overall Medicare reimbursement by 2% and allocates up to 70% of the resulting savings to be used as a financial incentive for SNFs that meet certain criteria for reducing rehospitalizations.

Far from benefiting Medicare beneficiaries by reducing hospital readmissions, this provision will give nursing homes financial incentives to keep dangerously ill patients in nursing homes when they do not have appropriately trained staff to take care of them. Moreover, the legislation will divert Medicare payments from facilities serving poorer, sicker residents to wealthier ones while delaying an evaluation of the impact of “unintended consequences” on lower socio-economic groups until 2021.

History has shown that increases in reimbursement are largely absorbed as corporate profits, not spent to hire sufficient registered nurses and other caregivers. For the year (2011) in which the Inspector General’s report showed high levels of preventable harm due to substandard treatment, inadequate resident monitoring, and failure or delay of necessary care, MedPAC reported that SNF profits on Medicare patients were 21 percent.

Under the new law, which will take effect in 2019, facilities will be ranked and rewarded based on a single “quality measure.” The Department of Health and Human Services could exempt itself from the pre-rulemaking process that allows a wide variety of stakeholders, such as representatives of residents and workers, to have input. Moreover, it would exempt the payment scheme from Office of Management and Budget review under the Paperwork Reduction Act.

[<http://thomas.loc.gov/cgi-bin/bdquery/z?d113:h.r.4302:>]

[Review of Policy Issues Relevant to Promoting Community Living for LTC Published in *The Gerontologist*](#)

Though it is widely known that LTC consumers generally prefer to avoid institutional settings (such as nursing homes and many assisted living/adult homes), they often face significant barriers to accessing services in their homes and communities. In recent years, however, there have been significant strides to improving access to LTC services in home and community based settings, particularly since the U.S. Supreme Court held, in its 1999 [Olmstead](#) decision, that the unjustified institutional isolation of people with disabilities is a form of illegal discrimination.

This article, written by H. Stephen Kaye, PhD, Institute for Health & Aging, University of California San Francisco, provides a discussion and commentary on different “policies and practices that could potentially improve LTSS [long-term services and supports] provision by shifting from institutional to community-based services, increasing equity across populations, offering consumers more choice and control, improving conditions for workers and caregivers, and promoting improved consumer-level outcomes. Policy areas include access to publicly funded LTSS, support for consumer direction, workforce development, caregiver support, transition from institutions to the community, diversion from institutional placement, and quality and outcome measurement.”

Importantly, for consumers in New York and other states shifting to mandatory managed LTC for Medicaid beneficiaries, the article’s “policy considerations apply both to programs and to the managed care organizations that are increasingly responsible for LTSS provision. Additional

policy areas related to managed LTSS include financial risk and capitation rates, enrollment strategies, assessment, outcomes monitoring, care coordination, and support for independent living goals.” [Note: Quotations are from the article’s abstract. The full content of the article is available for free via the links provided here.]

[\[http://gerontologist.oxfordjournals.org/content/early/2014/03/07/geront.gnu013.full\]](http://gerontologist.oxfordjournals.org/content/early/2014/03/07/geront.gnu013.full)

[Spotlight on Advocacy: Speak Out to Support Safe Staffing Standards in NY State](#)

Nursing homes in New York and across the country too often fail to provide safe care and a dignified quality of life for their residents. The problem in many facilities is lack of staffing - about 90% of the nursing homes in NY do not have enough staff to provide adequate care for their residents! As discussed in our [March edition](#), and mentioned in the first article, above, the March 2014 study by the Office of the Inspector General found that the enormous rate of harm experienced by short-term Medicare residents in nursing homes, 33% were harmed within 35 days of arriving in a facility, was connected to “substandard treatment, inadequate resident monitoring, and failure or delay of necessary care.”

This not only hurts residents, it hurts care staff too. Nurse aides have high rates of injury. Nurses and aides get burnt out because they are spread to thin.

We believe that it is about time that NY join with the large majority of states and pass minimum staffing standards for the nursing homes caring for vulnerable elderly and disabled individuals. Now that NY will begin mandating private Managed Care for nursing home access this year, a base staffing standard is even more crucial. Please send a quick message now in support of decent staffing standards – [click here](#) or go to http://capwiz.com/nhccnys/issues/alert/?alertid=62598586&MC_plugin=3202.

We’re on the Web!

www.ltccc.org: Our main website, with access to all of our issues, policy briefs and research.

www.assisted-living411.org: For information on assisted living, including consumer issues and policies.

www.nursinghome411.org: For information on developments in nursing home care, regulation and policy issues.

LTCCC Links of Interest

[View](#) the latest enforcement actions against nursing homes in New York State.

[Read](#) the latest edition of LTCCC's quarterly newsletter, *The Monitor*.

LTCCC's dedicated [webpage on antipsychotic drugs and dementia care](#).

[Report on NY State Nursing Homes in Managed Long Term Care](#)

[Piecing Together Quality Long-Term Care: A Consumer's Guide to Choices and Advocacy in New York](#).

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