



**LONG TERM CARE (LTC) E- NEWSLETTER – Dec 2012 – Jan 2013: Volume 10, Number 10**

Welcome to the [LTC E-NEWSLETTER](#), 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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**[Survey Finds Barriers to Enrollment May Contribute to Underuse of Hospice Care in the U.S.](#)**

The December 2012 issue of Health Affairs reports on a national survey of U.S. hospice services conducted to identify issues related to access of hospice care. Following is the article abstract which provides an overview of some significant findings (note that only the abstract is available to non-subscribers):

Hospice use in the United States is growing, but little is known about barriers that terminally ill patients may face when trying to access hospice care. This article reports the results of the first national survey of the enrollment policies of 591 US hospices. The survey revealed that 78 percent of hospices had at least one enrollment policy that may restrict access to care for patients with potentially

high-cost medical care needs, such as chemotherapy or total parenteral nutrition. Smaller hospices, for-profit hospices, and hospices in certain regions of the country consistently reported more limited enrollment policies. We observe that hospice providers' own enrollment decisions may be an important contributor to previously observed underuse of hospice by patients and families. Policy changes that should be considered include increasing the Medicare hospice per diem rate for patients with complex needs, which could enable more hospices to expand enrollment.

[\[http://content.healthaffairs.org/content/31/12/2690.abstract?ct\]](http://content.healthaffairs.org/content/31/12/2690.abstract?ct)

## **Federal Report Assesses Medicaid Home and Community-Based Services in Assisted Living Facilities**

For people who need or desire residential long term care, and want to avoid the institutional nature of the traditional nursing home, assisted living offers the potential to access monitoring and care in a setting that is supposed to be more home-like and resident-directed. The majority of assisted living residents pay for their care privately. However, there is a growing movement to enable Medicaid beneficiaries to access assisted living as part of the national initiative to increase access to Home and Community Based Services (HCBS).

Unfortunately, little is known about the costs and types of HCBS provided to people in assisted living or, importantly, to what extent the services provided comply with state and federal requirements. Compliance with state and federal requirements is critical because assisted living lacks a strong system of standards and oversight, such as that which exists for nursing home care. Given the longstanding, serious problems that have plagued the nursing home industry (despite its having comprehensive standards and oversight mechanisms), quality assurance and accountability is critical in the assisted living arena, especially as more and more vulnerable individual turn to assisted living and more public funding is dedicated to assisted living care.

The Office of Inspector General of the Department of Health and Human Services conducted a study of Medicaid HCBS in assisted living to gain insights into the costs of HCBS care in assisted living, what kind of care is being provided under Medicaid HCBS waivers and the compliance of these services with federal and state requirements. Following is a synopsis of the study's findings, from its executive summary:

In 2009, 35 Medicaid programs reported that, under 1915(c) waivers, they covered various HCBS for beneficiaries in ALFs [assisted living facilities] at an annual cost of \$1.7 billion. Each State had federally

mandated provider standards; however, ALFs in the seven selected States did not always comply with them, and federally required plans of care did not always meet Federal requirements. In the seven States, 77 percent of beneficiaries received HCBS under the waiver in ALFs cited for a deficiency with regard to (i.e., noncompliance with) at least one State licensure or certification requirement. Nine percent of beneficiaries' records did not include plans of care required by the States. Further, 42 percent of the federally required plans of care did not include the frequency of HCBS furnished, as required. Five of the seven States also required that plans of care specify the beneficiaries' goals and the interventions to meet them. In these 5 States, 69 of 105 plans of care for beneficiaries receiving these services in ALFs did not meet that requirement. Two of the seven States also required that plans of care be signed by beneficiaries or their representatives. In these 2 States, 12 of 25 plans of care for beneficiaries receiving HCBS in ALFs did not meet that requirement.

[\[https://oig.hhs.gov/oei/reports/oei-09-08-00360.asp\]](https://oig.hhs.gov/oei/reports/oei-09-08-00360.asp)

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## **[Spotlight on Advocacy: Protect the Elderly from Dangerous Bed Rails](#)**

As reported in the last issue of the [LTC E-Newsletter](#), bed rails, though they are supposed to keep people safe, actually pose a significant risk for both adults and children. The FDA has reported over 500 deaths as a result of bed rails, mostly as a result of entrapment.

The [National Consumer Voice for Quality Long Term Care](#), a national consumer advocacy group (of which LTCCC is a member), has set-up a petition for people to tell government agencies that the frail elderly deserve protection from hazardous bed rails by establishing minimum standards for bed rails and prohibiting the use of bed rails that fail to meet those standards.

Please [click here](#) to sign the petition or go to

[http://wfc2.wiredforchange.com/o/8641/p/dia/action/public/?action\\_KEY=8970](http://wfc2.wiredforchange.com/o/8641/p/dia/action/public/?action_KEY=8970).

## **We're on the Web!**

[www.ltccc.org](http://www.ltccc.org): Our main website, with access to all of our issues, policy briefs and research.

[www.assisted-living411.org](http://www.assisted-living411.org): For information on assisted living, including consumer issues and policies.

[www.nursinghome411.org](http://www.nursinghome411.org): For information on developments in nursing home care, regulation and policy issues.

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## **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:  
[nursinghome411.org/?articleid=10042](http://nursinghome411.org/?articleid=10042).

NEW!: [Materials on the Affordable Care Act and Mandatory Managed Long Term Care in New York](#)

Long term care information booklet in [Chinese](#) and [English](#) for Chinese consumers: What You Need to Know about Long Term Care.

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