

# Quality Counts

Arizona Nursing Home Quality Initiative

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## What's New

### Arizona Geriatrics Society 19th Annual Fall Symposium and Exposition

November 2-3

Black Canyon Conference Center  
9224 N. 25th Avenue, Phoenix, AZ

For more information and to register,  
please visit

<http://www.arizonageriatrics.org>.

## Medicare to Stop Paying for Some Hospital-Acquired Conditions

The Centers for Medicare & Medicaid Services (CMS), the federal agency that administers the Medicare and Medicaid programs, recently issued a ruling that Medicare will stop paying for eight preventable hospital-acquired conditions, starting in 2008. The eight conditions for which Medicare will no longer reimburse hospitals are as follows:

### Treatment

- Hospital-acquired injuries, including fractures, dislocations, and burns
- Mediastinitis after coronary artery bypass graft surgery
- Urinary tract infections that result from improper use of catheters
- Pressure ulcers
- Vascular catheter-associated infections

### Never Events

- Objects left in the body during surgery
- Air embolisms
- Blood incompatibility

Medicare currently does not track these eight measures, but that will soon change. As of October 1, hospitals must report whether the conditions are present upon patients' admissions.

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### Medicare Appeals: Provider Information

To view HSAG's new Medicare provider Web page that contains information about fee-for-service and Medicare Advantage benefits, visit <http://www.hsag.com/providers>.

The page contains information on:

- The beneficiary notices initiative (BNI).
- Managed care appeals and grievances.
- Sample notice forms (downloadable).
- The *Federal Register* BIPA regulation.

Once Medicare stops reimbursing for these hospital-acquired conditions, good admission assessments will mean the difference between payment for care associated with a pressure ulcer or other secondary condition present on admission and no reimbursement.

Under the new laws, hospitals may have to perform more laboratory tests to determine if patients have pre-existing conditions such as infections, skin damage, or other problems at the time of admission. For nurses, the new rule will have major ramifications in the way they deliver patient care.

Many hospitals are ahead of the game and have proved rates of pressure ulcers and infections can drop when nurses follow guidelines recommended by the Institute for Healthcare Improvement, a nonprofit organization that strives to improve health care throughout the world.

To read this article in its entirety, please visit <http://news.nurse.com/apps/pbcs.dll/article?AID=/20070924/CA09/309240012>.

Source: Debra Anscombe Wood, RN. Nurse.com, Monday, September 24, 2007. <http://news.nurse.com/apps/pbcs.dll/article?AID=/20070924/CA09/309240012>.

## CMS Publishes Final Rule on Revisit User Fees

The Centers for Medicare & Medicaid (CMS) has published the Final Rule for the Establishment of Revisit User Fee Program for Medicare Survey and Certification Activities. The rule is in effect as of September 30, 2007. The rule is applicable to health care facilities (SNFs, hospitals, HHAs, hospices, ambulatory surgery centers, ESRD facilities, and rehabilitation health centers) that have been cited for deficiencies during initial certification, recertification, or substantiated complaint surveys and require a revisit to confirm that corrections to previously identified deficiencies have been remedied.

Established revisit fees for SNFs are as follows:

- Onsite Survey—\$2,072.00
- Offsite Survey—\$168.00

Please visit, <http://a257.g.akamaitech.net/7/257/2422/01jan20071800/edocket.access.gpo.gov/2007/E7-18458.htm> for a detailed explanation of the program.

Source: <http://a257.g.akamaitech.net/7/257/2422/01jan20071800/edocket.access.gpo.gov/2007/E7-18458.htm>.

## More Profits and Less Nursing

According to a recent *New York Times* article, an increasing number of private firms have acquired nursing homes and subsequently reduced costs, increased profits, and then quickly resold the facilities for significant gains. The article also provides insight into the complex ownership and management structure of these firms.

Centers for Medicare & Medicaid Services data shows residents at these nursing homes are subject to less quality care and are more prone to depression,

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### Upcoming Events

#### Director of Nursing Training

Presented by Residents First, LLC

October 17–19 from 8 a.m. to 4:30 p.m.

Plaza Healthcare, Scottsdale, AZ

For registration information, call 602.265.5331 or e-mail [residents\\_first@yahoo.com](mailto:residents_first@yahoo.com).

#### CMS Skilled Nursing Facility/Long-Term Care Open Door Forum

Thursday, October 25

For more information, including registration, please visit [http://www.cms.hhs.gov/OpenDoorForums/25\\_ODF\\_SNFLTC.asp](http://www.cms.hhs.gov/OpenDoorForums/25_ODF_SNFLTC.asp).

#### AZAHA Back Injury Prevention Seminar

Presented by the Arizona Association of Homes And Housing for the Aging (AZAHA)

November 13 from 1 to 3 p.m.

Christian Care Nursing Center

11818 N. 19th Avenue, Phoenix, AZ

For registration information, please visit <http://www.azaha.org> and click on the Education Calendar.

loss of ability to dress and bathe themselves, and loss of mobility. Some nursing home advocacy groups are calling for increased transparency.

To view the article in its entirety, please visit [http://www.nytimes.com/2007/09/23/business/23nursing.html?\\_r=1&oref=slogin](http://www.nytimes.com/2007/09/23/business/23nursing.html?_r=1&oref=slogin).

Source: [http://www.nytimes.com/2007/09/23/business/23nursing.html?\\_r=1&oref=slogin](http://www.nytimes.com/2007/09/23/business/23nursing.html?_r=1&oref=slogin)

## Top 10 Nursing Home Federal Deficiencies in Arizona

10. F279—Develop Comprehensive Care Plans (cited 25 times)
9. F371—Store/Prepare/Distribute Food Under Sanitary Conditions (cited 29 times)
8. F253—Housekeeping and Maintenance (cited 30 times)
7. F315—Residents Not Cathed Unless Unavoidable (cited 32 times)
6. F514—Clinical Records Meet Professional Standards (cited 34 times)
5. F309—Provide Necessary Care for Highest Practicable Well Being (cited 37 times)

### 2008 Evercare Awards

The AMDA Foundation and Evercare are pleased to announce the first annual awards program—the Evercare awards for Improving the Quality of Life for Persons Living in Nursing Homes.

These awards—\$10,000 each—will reward nursing facilities for programs they have implemented to improve the quality of life for their residents. All nursing home facilities are eligible for these awards. Facilities may be profit or not-for-profit and/or individual facility, regional chain, or national chain facilities.

The deadline for application is November 30, 2007. Awards will be presented at the AMDA Annual Symposium in Salt Lake City, Utah, March 6–9, 2008.

For more information and to download application forms, visit <http://www.amdafoundation.org>.

4. F441—Infection Control (cited 45 times)
3. F225—Not Employ Persons Guilty of Abuse (cited 46 times)
2. F323—Facility Free From Accident Hazards (cited 74 times)
1. **F281—Services Provided Meet Professional Standards (cited 78 times)**

Source: Arizona Department of Health Services.

## Call for Success Stories

As a Local Area Network for Excellence (LANE) member in the Advancing Excellence in America's Nursing Homes Quality Campaign, Health Services Advisory Group (HSAG) is calling for nursing home success stories that are in alignment with the eight goals of the campaign. These goals include:

1. Reducing pressure ulcers
2. Reducing the daily use of physical restraints
3. Improving the management of pain in long-stay residents
4. Improving the management of pain in short-stay residents
5. Setting individualized targets for clinical quality improvement
6. Measuring resident and/or family satisfaction and incorporating this information into quality improvement activities
7. Increasing staff retention
8. Improving consistent assignment

To learn more about submitting your success story, please contact Joe Bestic at [jbestic@azqio.sdps.org](mailto:jbestic@azqio.sdps.org) or at 602.745.6205.

## State Wants to Prevent Falls by Elderly

*Incident cost in Arizona exceeds \$270 million a year*

Worried about the life-changing effects of a senior citizen's sudden collapse? Federal, state, and local governments, as well as health care agencies across the nation, are campaigning to prevent falls that tax

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the medical system and often force independent seniors into nursing homes.

Hospitalization for falls costs about \$270 million a year in Arizona, not including the cost of doctors, rehabilitation, or long-term disability. More troubling is that Arizona ranks sixth in the nation per capita for fatal falls among the elderly. Scottsdale has the nation's highest rate of senior deaths from falling.

The Arizona Department of Health Services (ADHS) has set a goal of cutting the number of falls in the state in half for all ages by 2010. A prevention plan on the health agency's Web site is designed to help seniors stay strong. "The goal is to prevent falls," ADHS Director Susan Gerard said. "Instead of building more emergency rooms and hiring more doctors and nurses, we can start looking at unintentional injuries, including falls, and find ways to prevent them."

Gerard said there is no easy explanation for why Arizona has such a high rate of fatal falls. It could be the state's focus on providing home health care to keep people out of nursing homes, she said.

Because fall injuries account for nearly 9,000 admissions a year in Arizona, hospitals offer an array of programs to help seniors prevent taking a tumble, including exercised to help strengthen muscles, improve balance, and increase mobility. Scottsdale Healthcare

started its free Healthy Steps program in 2005, when 1,175 people in the city older than 75 were admitted to the hospital with fall injuries.

"These were high-risk seniors who had been admitted to the hospital before," said Pauline King, Scottsdale Healthcare's director of community health services. Healthy Steps teams patients immediately with a case manager who monitors their progress. Of the 45 patients in the first Healthy Steps Program, only three were readmitted for fall injuries, King said.

Source: <http://www.azcentral.com/news/articles/0924falls0923.html>. By Carol Sowers, *The Arizona Republic*, September 24, 2007.

### **Learn. Empower. Achieve. Produce. (LEAP)**

LEAP is a comprehensive workforce development program that empowers staff, increases retention, and promotes staff-resident relationships through a model of person-centered care. LEAP is an acronym that corresponds to the following program goals:

- **Learn** how to build strong relationships among nursing, residents, and families.
- **Empower** nursing staff and create structures for advancement.
- **Achieve** staff development and retention goals.
- **Produce** measurable outcomes.

To learn more about the LEAP program, visit [http://www.matherlifeways.com/re\\_leap\\_1.asp](http://www.matherlifeways.com/re_leap_1.asp).

## HSAG Nursing Home Team Contact Information

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This material was prepared by Health Services Advisory Group, Inc. (HSAG), the Medicare Quality Improvement Organization for Arizona, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy.