

Long-Term Care Survey Alert

Industry Notes: Know What Surveyors Will Look for in Dementia Care

You have some new resources to guide you in getting an A-plus on your facility's dementia care and services.

CMS has posted a Quality Indicator Survey checklist for surveyors to use with F309 Interpretive Guidance when reviewing care and services provided to residents with dementia. You can access the checklist at https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/QIS-Dementia-Care-Checklist.pdf.

You can also take a look at the overall Quality Indicator Survey checklist, which CMS revised and posted on April 10: https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/QIS-Checklist.pdf.

And CMS posted a new Fact or Fiction document at

www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Fact-Fiction.pdf.

Stay Updated on New CMP Guidance

On April 25, CMS released a new transmittal that revises and expands current Medicare and Medicaid guidance regarding civil money penalties (CMPs). The transmittal specifically focuses on imposing CMPs when nursing homes are not in compliance with federal participation requirements under Section 6111 of the Affordable Care Act of 2010.

Among other changes, the transmittal outlines new guidance on Independent Informal Dispute Resolution (Independent IDR). The transmittal, which displays changes in red italics, is available at www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R113SOMA.pdf.

Watch Out SNFs: HIPAA Penalties Will 'Set Records'

Now that the HIPAA audits are back in full swing, you need to be on your guard. And according to government officials, skilled nursing facilities (SNFs) are especially at risk for record-breaking HIPAA penalties.

The **U.S. Department of Health and Human Services**' (HHS) chief regional civil rights counsel **Jerome Meites** warned that HIPAA penalties during the next 12 months should "set records," reported Christopher Froeb in a June 26 **Nixon Peabody LLP** blog posting. Meites made these comments during an **American Bar Association** conference in Chicago on June 12 and 13.

Meites urged SNFs and other providers to perform comprehensive risk analyses, particularly now that HIPAA audits have recommenced after the temporary suspension in 2012.

"SNF operators should take note of this increased enforcement and, if necessary, perform internal audits to confirm policies are in place regarding HIPAA compliance," Froeb advised.

Avoid These 4 Infection Control Breaches

If you don't want to get on a surveyor's bad side, make sure your procedures are not causing infection control breaches. The **Centers for Medicare & Medicaid Services** (CMS) is cracking down on these types of poor practices.

On May 30, CMS issued guidance to state survey agencies on what kinds of infection control breaches warrant referral to public health authorities. The guidance targets infection control breaches that pose a risk of blood-borne pathogen transmission.



CMS is asking surveyors to notify public health authorities in certain situations so that they can conduct a risk assessment and, if necessary, notify residents, reported **Evvie Munley**, senior health policy analyst for Washington, DC-based Leading Age, in a June 4 analysis. Specifically, when a surveyor identifies one or more of the following infection control breaches, the surveyor must report the deficient practice to your state public health authority:

- 1. Using the same needle for more than one individual.
- 2. Using the same syringe, pen or injection device (pre-filled/manufactured/insulin or any other type) for more than one individual
- 3. Re-using a needle or syringe which has already been used to administer medication to an individual, subsequently entering a medication container (e.g., vial, bag), and then using contents from that medication container for another individual.
- 4. Using the same lancing/finger-stick device for more than one individual, even if the lancet is changed.

Link: To read the guidance (S&C: 14-36-All), visit

 $\underline{www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Let}\\ \underline{ter-14-36.pdf}.$

Summer Reading: Brush Up on Your Alzheimer's Know-How

If you like to stay abreast of Alzheimer's disease developments and how to best care for your residents who suffer from it, you can find a plethora of new eBooks from the **National Institute on Aging** (NIA), part of the **National Institutes of Health** (NIH). You can download these eBooks to your desktop computer, laptop, tablet, smartphone or Kindle.

The new eBooks are part of the NIA's Alzheimer's Caregiving Tips series:

Coping with Agitation and Aggression:

www.nia.nih.gov/sites/default/files/caregivingtips_agitationagression-final_7-12-12_0.pdf Rummaging and Hiding Things:

www.nia.nih.gov/sites/default/files/caregivingtips rummaging-final 7-20-12 0.pdf

Hallucinations, Delusions, and Paranoia:

www.nia.nih.gov/sites/default/files/caregivingtips_hallucinations-final_7-18-12_0.pdf Sundowning:

www.nia.nih.gov/sites/default/files/caregivingtips sundowning-final 13jun24 0.pdf.

Catch Up On Changes To Appendix B, Data Submission Specs & Item Sets

On June 20, the **Centers for Medicare & Medicaid Services** (CMS) released an updated version of the RAI Manual's Appendix B. The update includes changes to the list of state RAI coordinators, MDS automation coordinators, RAI panel members, and regional office contacts. You can view the revised Appendix B at https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/MDS-RAI-Manual-Appendix-B-6132014.pdf.

Also, on May 22, CMS released a new version (V1.14.1) of the data submission specifications for the MDS 3.0, as well as the final revised version V1.12.0 of the MDS item sets. This is a final version that will become effective on Oct. 1, 2014.

Among the updates and changes the most notable is delaying the requirement for using ICD-10 diagnosis codes in item I8000 [] Additional active diagnoses. CMS will continue to require you to submit ICD-9 diagnosis codes in item I8000, due to the delay in the ICD-10 implementation.

To view the new data submission specs, go to

www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/MDS-30-Submission-Specs-V1141-for-the-October-1-2014-Release.zip. The direct link for the item subsets V1.12.0 www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/Revised-MDS-30-Item-Subsets-V1120-for-the-October-1-2014-Release-updated-5-8-2014.zip.

Or you can view these documents by visiting



