

OASIS Alert

Industry Notes: Beware Falls Problems For Patients With Poor Eyesight

You should consider putting your patients who have diminished eyesight on the watch list for falls, suggest findings from a newly published study.

In a study, researchers from **Trinity College** in Dublin, Ireland split participants into three groups: older adults who had fallen in the last 12 months, older adults who hadn't fallen, and younger adults. Then they had the participants walk a course with and without vision-impairing goggles.

The younger adult and older adult without fall groups both reduced their walking speed on the course when their vision was impaired, says the study published in the summer issue of the journal *Insight: Research and Practice in Visual Impairment and Blindness*. The fall-prone group, however, did not walk more slowly and made more errors.

"The fall-prone older adults displayed an overreliance on visual information for spatial cognition, but at the same time they did not adjust their behavior to compensate for their lack of visual information," says a release about the study. "Spatial cognition may be more greatly compromised among fall-prone older adults."

The article is at <http://www2.allenpress.com/pdf/aerj-04-03-103-111.pdf>

The home care industry's call to halt cuts for so-called case mix creep fell on deaf ears at CMS.

Medicare payment rates for home health agencies will fall 2.3 percent starting Jan. 1, the **Centers for Medicare & Medicaid Services** says in a 236-page final rule posted to the Federal Register website Oct. 31, 2011. The new base per episode rate will be \$2,138.62 in non-rural areas and \$2,202.68 in rural areas. That's down from \$2,192.07 and \$2,257.83, respectively.

CMS calculated the cut by reducing the 2.4 percent inflation update by 1 percent as required by law, then adding on a 3.79 percent cut for case mix creep -- an increase in case mix that CMS says isn't due to actual changes in patient acuity. The cut will strip \$430 million from Medicare spending on home care in 2012 compared to this year, CMS reports in the 2012 prospective payment system final rule.

The bright side: It could have been worse. In CMS's proposed rule for 2012, it set forth a 3.35 percent cut that would have slashed \$640 million from spending. The change comes largely because CMS agreed to phase in the originally proposed 5.06 percent case mix reduction over two years -- a 3.79 percent cut in 2012 and 1.32 percent cut in 2013.

"The phase-in ... is definitely a positive change," notes the **National Association for Home Care & Hospice**. "Nevertheless, that does not turn a lemon into lemonade."

"While the two-year phase in of the cuts is helpful, it fails to address the core issue of unfairness that blunt-edge, broad-brush cuts represent," adds the **Visiting Nurse Associations of America**.