

LTC Gains Ground: Reform Debate

Five-Star Study Included In House Proposal

Members of Congress will return from their August recess to pick up where they left off on health care reform—with a lot of negotiating still left to do.

Legislation in the House and Senate aiming to make a major overhaul of the country's health care system remained in limbo as lawmakers left for their respective states in August, although there were some early victories for long term care.

The House Energy and Commerce Committee approved an amendment by Rep. Chris Murphy (D-Conn.) that helps Medicaid provider rates. The amendment reinstates a 1990 law that requires states to submit their Medicaid provider rates for the coming year to

the Centers For Medicare & Medicaid Services (CMS) as part of state plan amendments. This law had been eliminated in 1997.

The amendment also requires states to tell CMS how they are making rate determinations and how they have included providers and beneficiaries in those decisions.

The committee also approved an amendment by Rep. Bart Stupak (D-Mich.) to have the Government Accountability Office conduct a study of CMS' Five Star Quality Rating System.

AHCA had requested the study to bring to light the problems it sees with the Five-Star program, which CMS unveiled late last year.

Stupak's amendment was included with an amendment from Rep. Bruce Braley (D-Iowa) that aims to improve food safety and dementia care.

Braley's amendment requires the food services director of a Medicaid nursing facility to be either a qualified dietitian, certified dietary manger, dietetic technician, or have other similar qualifications.

It also asks the Department of Health and Human Services, in conjunction with the Agency for Healthcare Research and Quality, to develop a core set of quality indicators for the provision of medical services to people with Alzheimer's disease and other dementia conditions.

—Suzanne Struglinski

Nurse Council Collaborates On Influenza Campaign

The Nurse Executive Council (NEC)—a coalition of nurse executives representing more than 3,100 nursing facilities across the nation—recently teamed up with Roche Laboratories on the influenza campaign for 2009-2010.

Members of NEC, led by Karen McDonald, senior vice president of Fundamental Clinical Consulting, participated in this important campaign by reviewing the materials and information provided in Roche's toolkit on influenza in long term care.

NEC members made recommendations for revisions and incorporated important components required for a facility to manage an influenza program.

Members of NEC provided guidance

to Roche to ensure their resource was practical, yet comprehensive, and met the needs of facilities and adhered to their requirements.

The toolkit, called "Influenza in Long Term Care: Toolkits to Manage This Threat," includes the following resources:

- A CD-Rom with downloadable tools;
- A DVD with video scenarios of an actual facility that experienced a flu outbreak, as well as a facility that avoided an outbreak using appropriate systems and processes;
- A DVD with four-part training for staff education about the flu that can satisfy in-service requirements; and
- A written program that includes educational materials and information on the impact of influenza on elderly



residents, vaccination recommendations for long term care, preparing for seasonal influenza, and guidelines for managing an influenza outbreak.

"This program will change the way influenza is managed in nursing facilities across the nation and make a significant impact on the lives of patients who reside in those facilities," said McDonald.

"This is one of many projects the NEC has partnered with other groups to provide their expertise and knowledge to make a difference in caring for residents served in facilities nationwide," she said.

Contact Maude Babington at maude@babingtonconsulting.com for a copy of the toolkit. Please indicate "Influenza Toolkit" in the subject of the message.

—Meg LaPorte