

**ISDH Long Term Care  
Newsletter Issue 2015-07  
March 16, 2015**

**In Today's Issue:**

- Pneumococcal Vaccinations - Reminder
- LTC Survey Area Maps - Update
- CMS Update
  - > SC 15-25-NH MDS/Staffing Focused Surveys Update
  - > SC 15-26-NH Nursing Home Compare "3.0" - Five Star Rating System
  - > SC 15-30-ALL Administrative Changes for Two CMS Approved Accrediting Organizations
  - > Partnership to Improve Dementia Care Update

## Pneumococcal Vaccinations - Reminder

The Advisory Committee on Immunization Practices (ACIP) updated its guidelines regarding pneumococcal vaccines. The ACIP recommends administration of two different pneumococcal vaccinations. CMS updated the Medicare coverage requirements to more closely align with the updated ACIP recommendations. An initial pneumococcal vaccine may be administered to all Medicare beneficiaries who have never received a pneumococcal vaccine. A different, second pneumococcal vaccine may be administered 1 year after the first vaccine was administered. Since the updated ACIP recommendations are specific to vaccine type and sequence of vaccination, prior pneumococcal vaccination history should be taken into consideration. Receiving multiple vaccinations of the same vaccine type is not generally recommended. Ideally, providers should readily have access to vaccination history, such as with electronic health records, to ensure reasonable and necessary pneumococcal vaccinations.

Additional information on Pneumococcal Vaccination is available:

[ISDH Long Term Care Newsletter Issue 2014-07](#)

[Pneumococcal Vaccination Update from CMS](#)

## LTC Survey Area Maps – Update

The ISDH periodically realigns its survey areas because of changes to the number of facilities in an area or changes in the location of surveyors. Long term care (LTC) survey areas will be changing effective April 1, 2015. Attached are the updated [Survey Area Map](#) and [LTC Survey Area Teams](#).

## CMS Update

### **SC 15-25-NH: MDS / Staffing Focused Surveys Update**

In 2014, the Centers for Medicare & Medicaid Services (CMS) and five volunteer States piloted a focused survey to assess Minimum Data Set Version 3.0 (MDS) coding practices and its relationship to resident care in nursing homes. A report on the findings from the pilot is attached below.

CMS subsequently announced that it would expand the MDS focused surveys to all States and include a review of nursing home staffing. The CMS memo provides an update on the pilot and the status of the expansion of these surveys including:

- Training for the next surveys will begin in early April 2015.
- States will need to assign a minimum of three surveyors to be trained.
- Training and surveys will be rolled out in two phases with Regions and States assigned to one of two groups.
- Deficiencies identified during the surveys will result in relevant citations and enforcement actions.

Attached is [SC 15-25-NH MDS / Staffing Focused Surveys Update](#) and [MDS 3.0 Focused Survey Pilot Results](#).

### **SC 15-26-NH: Nursing Home Compare "3.0" - Five Star Rating System - Expanded and Strengthened**

February 20, 2015 Improvements to Nursing Home Compare include:

- Including Quality Measures (QMs) for nursing homes' use of antipsychotic medication in residents without diagnoses of schizophrenia, Huntington's disease, or Tourette syndrome in the Five Star calculations. One measure is for the new use of these medications in short-stay residents. A second measure reflects continued use of such medications in long-stay nursing home residents.
- Raising the threshold for nursing homes to achieve a high rating on all measures publicly reported in the QM dimension on the website.
- Updating expectations for State Survey Agencies to conduct specialized, onsite surveys of a sample of nursing homes across the U.S. that assess adequacy of resident assessments and the accuracy of information reported to CMS that is used in calculating quality measures used in the rating system.

Attached is [SC 15-26-NH Nursing Home Compare "3.0" - Five Star Rating System - Expanded and Strengthened](#).

### **SC 15-30-ALL Administrative Changes for Two Centers for Medicare & Medicaid Services (CMS) - Approved Accrediting Organizations (AOs)**

CMS has announced administrative changes for two of the CMS approved Accrediting Organizations (AOs). The following are the changes:

- AO Name and Domain Changes: The new legal name for Det Norske Veritas Healthcare, Inc. (DNVHC) is DNV Healthcare USA, Inc. DNVHC's new trade name is DNV GL - Healthcare. The new acronym is DNV GL. Please use the trade name and acronym on all official documents and correspondence. The domain name for all email addresses is @dnvgl.com and was effective January 5, 2015.
- AO Name Change: The Community Health Accreditation Program (CHAP) continues to use the legal name Community Health Accreditation Program but began to do business as the Community Health Accreditation Partner effective January 1, 2015. Please use this name on all official documents and correspondence. The organization continues to use the acronym CHAP with a new logo and trade name.

Attached is [SC 15-30-ALL Administrative Changes for Two Centers for Medicare & Medicaid Services \(CMS\) - Approved Accrediting Organizations \(AOs\)](#).

### **Partnership to Improve Dementia Care Update**

The National Partnership to Improve Dementia Care in Nursing Homes is committed to improving the quality of care for individuals with dementia living in nursing homes. The Partnership has a mission to deliver health care that is person-centered, comprehensive and interdisciplinary with a specific focus on protecting residents from being prescribed antipsychotic medications

unless there is a valid, clinical indication and a systematic process to evaluate each individual's need. The Centers for Medicare & Medicaid Services (CMS) promotes a multidimensional approach that includes; research, partnerships and state-based coalitions, revised surveyor guidance, training for providers and surveyors and public reporting.

CMS is tracking the progress of the Partnership by reviewing publicly reported measures. The official measure of the Partnership is the percentage of long-stay nursing home residents who are receiving an antipsychotic medication, excluding those residents diagnosed with schizophrenia, Huntington's Disease or Tourette's Syndrome. In 2011 Q4 23.9% of long-stay nursing home residents were receiving an antipsychotic medication. There has since been a decrease of 19.4% to a national prevalence of 19.2% in 2014 Q3. Success has varied by state and CMS region with some states and regions having seen a reduction of greater than 20%.

A three-quarter measure is posted to the Nursing Home Compare website at [www.medicare.gov/nursinghomecompare](http://www.medicare.gov/nursinghomecompare). Attached is the [complete report](#).