



Weekly Roundup

...Reporting the state and national long term care news

Please disseminate relevant information to the appropriate department.

- Administration Nursing Dietary Activities Social Services
 Rehabilitation Housekeeping Maintenance Laundry

Friday, March 14, 2014

ANHA NEWS

Reserve Your Room for ANHA Mid-Year Convention

You may now reserve your room at the Perdido Beach Resort for the 2014 ANHA Mid-Year Convention. To ensure availability of rooms, all participants are encouraged to make overnight reservations by March 28, 2014.

The following rates have been negotiated for Mid-Year Convention Attendees:

- \$174.00 per Standard/Double Room
- \$229.00 per Gulf Front Single/Double Room

To make a reservation, call 800-634-8001 or visit www.perdidobeachresort.com. ANHA's group code is 8680. Look for convention registration details soon.

March 31 is the Deadline for 2014 ANHA Dues

Monday, March 31 is the deadline for payment of the 2014 ANHA membership dues. Facilities that have not paid their dues in full or have not established a payment plan may be dropped from the membership. Please contact Pat Williams at the Association Office at (334) 271-6214 or pwilliams@anha.org if you have any questions or want to set up a payment plan.

Online Registration Open for "AIT Preceptor Certification and Recertification" Seminar

Sponsored by Rx Advantage

Please mark your calendars for March 19, 2014, as ANHA will present a seminar entitled "AIT Preceptor Certification and Recertification Seminar" sponsored by Rx Advantage. This seminar will be held at The Hyatt Regency - Wynfrey Hotel in Birmingham. The seminar will begin at 1:30 pm and conclude at 3:30 pm. This seminar has been approved for 2 hours of continuing education for nursing home administrators. *Please see the attached flyer for more information.*

Attendees should check www.anha.org approximately one week prior to the seminar to download the handouts.

“Playing By the Rules for the Medicaid Nursing Home Program and Conducting an Effective Medical Record Audit” Educational Seminar April 2

Sponsored by Gericare Medical Supply and Senior Care Pharmacy

Please mark your calendars for April 2, as ANHA will present a seminar entitled “Playing By the Rules for the Medicaid Nursing Home Program and Conducting an Effective Medical Record Audit” sponsored by Gericare Medical Supply and Senior Care Pharmacy. This seminar will be held at Hyatt Regency- Wynfrey Hotel. This program has been approved for 6 continuing education units (CEUs) for nursing home administrators and social workers and 7.2 hours for nurses. *Please see the attached flyer for more information. Attendees should check www.anha.org approximately one week prior to the seminar to download the handouts.*

“ICD-10- CM Boot Camp for Long Term Care Providers” Educational Seminar May 12 and 13

Sponsored by Gericare Medical Supply and Senior Care Pharmacy

Please mark your calendars for May 12 and 13, as ANHA will present a seminar entitled “ICD-10-CM Boot Camp for Long Term Care Providers” sponsored by Gericare Medical Supply and Senior Care Pharmacy. This seminar will be held at The Embassy Suites in Montgomery. ANHA has a limited block of rooms at the hotel for a reduced rate of \$99. This seminar has limited seating and a registration cut-off date of April 11. This program has been approved for 11 continuing education units (CEUs) for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA).

The seminar will be conducted by Tamela S. McQuiston, RHIT, RAC-CT, AHIMA approved ICD-10-CM trainer and AHIMA Ambassador.

Participants will receive training material to include a 2013 ICD-10 Draft coding manual and ICD-10 training workbook which will be included in the cost of the seminar. At the conclusion participants will receive an AHIMA certificate of completion. *Please see the attached flyer for more information. Attendees should check www.anha.org approximately one week prior to the seminar to download the handouts.*

Call for Nominations: Alabama’s Best Practices

Will you share your Best Practice? You are invited to share your knowledge, positive ideas, creativity and communicate with other professionals as we continue to strive to meet the needs of our long-term care residents. *Attached is the 2014 Alabama’s Best Practices’ Call for Nominations.* Each facility is encouraged to look over the nomination form and submit its Best Practice. This year’s Best Practices Program is scheduled for Thursday, August 28, 2014. Nominations are due by April 18, 2014.

STATE NEWS

Montgomery Medicaid District Office Moving

ANHA has been notified that the Alabama Medicaid's Montgomery District Office will be moving on April 1, 2014, and will be closed during that week. ANHA will provide information regarding new address as soon as it is available.

Medicaid Update

Expedite Online Web Portal:

1. In order to be accepted, all applications submitted on Expedite must be accompanied by the following two separately attached forms to the Sponsor, Legal and Veteran Status page:
 1. Attachment 1: a completed **Form 202 Appointment of Representative** document assigning Appointment of Representative to the Nursing Home Facility submitting the online application (if you are assisting the family by submitting the application online, submit the signed family sponsor form too at this time)
 2. Attachment 2: a signed **Agreement and Affirmation** signature page.

If you indicate in the *status* of a page that a form *is* attached, make sure you attach the 202 and agreement/affirmation forms to that page as separate pdf attachments.

2. Status matters! "Saved" status just means you have saved it in the queue to return to later. "Submitted" status means you have submitted the application to Medicaid for processing.
3. Only works with Internet Explorer version should be IE-9 or newer.
 1. If you have an old operating system, you may have to use work-arounds or update the operating system.
4. If you are submitting for more than one nursing home facility, remember that you will need multiple facility codes so that Expedite will route the application to the appropriate Medicaid District Office. You may want to have different user names to keep up with the different facilities. E.g. first initial of your name, last name, and short name for nursing facility.
5. Mr. Paul McWhorter, Medicaid's Policy Director will be happy to answer any questions. His direct line is 334 242-5660. If your nursing home changes ownership, please let Medicaid LTC know.

Annual Renewals:

Beginning in September 2013, facilities began to receive a letter addressed to the *Medicaid Application Counselor* that contains a list of the residents in the facility whose annual renewals are coming due the next month. Please make sure that letter goes to the staff who track and monitor Medicaid eligibility and assist families with applications and renewals. The application counselors may assist the family in gathering any information needed to submit the annual renewal; remind family sponsors that Medicaid is up for renewal; or assist in other ways to ensure continued eligibility and care.

Trouble with SSI cases?

You may have noticed that patients who are eligible for Medicaid because of SSI status sometimes get terminated when they are actually still eligible? It isn't uncommon for SSI to

suspend status when a SSI check is returned undeliverable or for other reasons when the recipient is still eligible for Medicaid. When SSI places a recipient in *suspended* status, their Medicaid *terminates*. (It happens via a nightly file transmission from SSI to Medicaid). If a patient is SSI eligible and their Medicaid terminates but you know they are still Medicaid eligible, contact Patricia Swain at Medicaid. She can submit a form 8036 to the Social Security Administration to find out the suspended status reason and request appropriate actions. Her phone number is 334.353.3690.

ADPH to Implement Electronic Plan of Correction – Update

On February 11, 2014, information about the ePOC process and how to enroll was mailed to all certified nursing homes. **It is extremely important that all certified nursing homes enroll now.** The Centers for Medicare and Medicaid Services (CMS) requires that all providers enroll at the beginning of implementation of the ePOC process. States who have implemented this process tell us the hardest part is getting all providers to enroll. Enrollment is fully explained in the information sheet previously sent.

A big thank you to all the certified nursing homes that have already enrolled. As of February 26, 2014, a total of fifty providers have successfully enrolled and have their ePOC activated. This activation will allow the providers to receive and send the plan of correction electronically.

We encourage the remaining providers to enroll **NOW**. Once you receive your ePOC login and password from the QIES system for providers please email us at epoc.signup@adph.state.al.us so that we can activate your account. If you have any questions about the enrollment process please contact Pamela Carpenter or Mia Sadler at 334-206-5111. *Please see the attachment for more details.*

RCO Meetings Announced - Update

A series of regional meetings for physicians, hospital officials and other interested parties who want to know more about Alabama Medicaid's plans to implement Regional Care Organizations will be held in February and March. An online session is planned in March for those unable to attend in person.

The one-hour sessions will update participants on the progress the Agency has made in complying with state legislation enacted in May 2013 to better control costs while improving patient care. A brief update on the RCO implementation effort will be given although most of the time will be allocated to participants' questions and comments. Registration is not required.

Session	Date	Time	Location
Online	Monday March 24	12:00 p.m.	Call-in information to be provided closer to time

Questions?

Contact: Robin Rawls, Director, Communications, Alabama Medicaid Agency
(334) 353-9363 or robin.rawls@medicaid.alabama.gov

For more information please visit

http://www.medicaid.alabama.gov/CONTENT/2.0_newsroom/2.7.3.2_RCO_Meetings_grid.aspx

NATIONAL NEWS

CMS Five Star Users' Guide Updated

The Centers for Medicare and Medicaid Services (CMS) Five Star Quality Rating System Technical Users' Guide has updated the state level health inspection cut point table for 2014. The table provides the data for the state-level cut points for the star ratings included in the health inspection domain. Cut points for the staffing ratings and for the QM ratings have been fixed and do not vary monthly. Data tables giving the cut points for those ratings are included in the Five Star Quality Rating System: Technical Users' Guide.

CMS' Five-Star quality ratings for the health inspection domain are based on the relative performance of facilities within a state. This approach helps to control for variation between states. Facility ratings are determined using these criteria:

- The top 10 percent (lowest 10 percent in terms of health inspection deficiency score) in each state receive a five-star rating.
- The middle 70 percent of facilities receive a rating of two, three, or four stars, with an equal number (approximately 23.33 percent) in each rating category.
- The bottom 20 percent receive a one-star rating.

A copy of the Users' Guide is attached.

OIG Releases Report on Adverse Events in SNFs

The HHS Office of Inspector General (OIG) this week released a report entitled "Adverse Events in Skilled Nursing Facilities: National Incidence Among Medicare Beneficiaries." The study was modeled after previous work done in the hospital setting, using similar methods to identify, define and categorize adverse events, determine the extent to which these events were preventable, and measure the cost of these events to the Medicare program. The OIG defines "adverse event" as harm to a patient or resident as a result of medical care, including failure to provide needed care. The report also states that, "adverse events do not always involve errors, negligence, or poor quality of care and are not always preventable."

The current study was based on medical record reviews for a sample of 653 Medicare beneficiaries discharged from hospitals to SNFs for post-acute care with SNF stays of 35 days or less. The data collected were from stays ending in August 2011. A number of beneficiaries had multiple SNF stays during the review period. Study results include data representing 692 stays. Findings include:

- 22 percent of Medicare beneficiaries experienced adverse events during their SNF stays.
- An additional 11 percent of Medicare beneficiaries experienced temporary harm events during their SNF stays.
- 59 percent of these adverse events and temporary harm events were likely preventable.
- Preventable harm was attributed to factors including substandard treatment, inadequate resident monitoring, and failure or delay of necessary care.
- Over half of the residents who experienced harm returned to a hospital for treatment, with an estimated cost to Medicare of \$208 million in August 2011. This equates to \$2.8 billion spent on hospital treatment for harm caused in SNFs in FY 2011.

The OIG recommends that the Agency for Healthcare Research and Quality (AHRQ) and the Centers for Medicare & Medicaid Services (CMS) should raise awareness of nursing home safety and seek to reduce resident harm through methods used to promote hospital safety efforts, including collaborating to create and promote a list of potential nursing home events to help nursing home staff better recognize harm. They also recommend that CMS should instruct State agency surveyors to review nursing home practices for identifying and reducing adverse events. AHRQ and CMS concurred with the recommendations.

The complete report can be found at <http://oig.hhs.gov/oei/reports/oei-06-11-00370.pdf>.

President Obama Releases 2015 Budget

President Obama released his FY2015 budget proposal. As it regards our profession according to the American Health Care Association (AHCA), this budget looks similar in many ways to past years. We are happy to see that the President did not propose any cuts to the provider tax, as had been proposed in some previous years. This year's budget does propose significant cuts to Medicare, including reducing the market basket, cutting bad debt reimbursement and more. AHCA will continue to strongly oppose the arbitrary, deep Medicare cuts suggested in this budget. The proposed cuts are particularly outrageous given the recent MedPAC report that verified our centers operate on a thin 1.8 percent margin. AHCA/NCAL will continue to oppose these arbitrary, deep cuts and we don't expect them to become law.

It is important to note that introducing budgets such as this is largely a formality in the legislative process, but the President's budget does signal Administration priorities and priorities for many Congressional Democrats. In addition, many of the provisions that affect our profession have little detail to analyze and are broadly worded.

Below is a short summary of the budget provisions in the President's FY2015 budget that have direct impact on our profession.

- *Post-acute care market basket cuts*
 - The budget reduces the home health, IRF and LTCH market basket update by 1.1% each year 2015 through 2024, with the floor set at a rate freeze. The budget reduces market basket updates for SNFs, but accelerates SNF cuts beginning with a -2.5% update in FY2015 and a reduction to -0.97 % in FY2022. This is projected to save \$97.9 billion from 2015-2024.
- *Reduce Medicare coverage of bad debts*
 - The President proposes reducing bad debt payments from 65 percent generally to 25 percent for all eligible providers over three years beginning in 2015. This proposal will save approximately \$30.8 billion over 10 years.
- *Hospital Readmissions*
 - The budget connects SNF payments to reduced hospitalizations. Beginning in 2018, payments to SNFs with high preventable readmission rates would be cut by up to 3 percent. This is projected to save \$1.9 billion in the next 10 years.
- *Therapy multiple procedure payment reduction and therapy caps*
 - The President's budget notes the already-enacted reduction to Medicare payments to physicians when multiple therapies are provided to the same patient on the same day. The budget notes that reduction is estimated to save \$2.4 billion over 10 years.

- The budget also notes the already-enacted extension for the exceptions process for outpatient therapy caps.
 - While both items are noted, nothing new is proposed for either area.
- *Equalize payment for certain conditions commonly treated in IRFs and SNFs*
 - The budget's proposals include adjusting payment updates for certain post-acute care providers and equalizing payments for certain conditions commonly treated in IRFs and SNFs, which is estimated to save \$1.6 billion over 10 years.
 - Specifically, the President's budget proposes to reduce payment disparities in the IRF and SNF settings for three conditions beginning in 2015: hips and knees, pulmonary conditions, and other conditions as determined by the Secretary.
- *Implement bundled post-acute care payment*
 - Beginning in 2019, at least half of the payments for LTCHs, IRFs, SNFs and home health services would be bundled. Payments would be bundled for at least half of the total payments for post-acute care providers. A permanent and total cumulative 2.85 percent cut would be applied by 2021. This is projected to save \$8.7 billion from 2015-2024.
- *Value-based Purchasing*
 - While it is budget neutral, it is important to note that the President's Budget implements a value-based purchasing program for several additional provider types, including home health, SNFs, ambulatory surgical centers and hospital outpatient departments beginning in 2016. At least two percent of payments must be tied to the quality and efficiency of care.
- *Strengthen the Independent Payment Advisory Board*
 - The budget requires IPAB cuts to take effect when Medicare spending growth exceeds Gross Domestic Product (GDP) +.5%. Current law is GDP +1%. This is estimated to save \$12.9 billion over 10 years.
- *Medicaid*
 - As was the case last year, there are no proposals to reduce or eliminate the provider assessment authority in the President's budget.

CMS Issues S&C Letter: Emergency Preparedness Checklist Revision

Late last week the Centers for Medicare and Medicaid Services (CMS) issued a Survey and Certification Emergency Preparedness Initiative: S&C Emergency Preparedness Checklist Revision. The revisions were made to the *recommended* CMS Emergency Checklist. According to the Survey & Certification Memorandum, the information is current policy and is in effect for all healthcare facilities. Highlights of the changes:

- Detailed guidance for patient/resident tracking, to include that the facility should have a plan for when a patient/resident is determined to be missing during an evacuation
- Quantity of water a facility should transport during an evacuation
- Expectation of collaboration with Healthcare Coalitions and Local Emergency Personnel
- Reference is made to use FEMA in updating existing emergency plans and using FEMA's best practices and guidance when updating emergency plans.

The link to the S&C letter can be found here:

<http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-14-12.pdf>

New QAPI Tools

We have been informed that in a collaborative effort with the University of Minnesota and Stratis Health, subject matter experts, consumer groups, and nursing home stakeholders, the Centers for Medicare and Medicaid Services (CMS) created “process” tools that may be used to implement and apply some of the basic principles of QAPI. A Process Tool Framework has been created to crosswalk each CMS Process Tool to the QAPI Five Elements. This framework includes a description of the purpose or goal for each tool that is hyperlinked within the framework.

For more information: <http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/NHQAPI.html>, click on tools.

FACILITY NEWS

Facility News is now posted on ANHA’s news website: news.anha.org.

Here are some of the articles posted this week:

- Ms. Alabama Nursing Home Visits Career Fair, Nursing Home Residents
- Capitol Insider: Medicaid RCO Update and Interesting Fact

To submit stories from your facility, contact John Matson at the Association Office at (334) 271-6214 or jmatson@anha.org.

ANHA Senior State Games: Posters Mailed to Facilities



Posters announcing the ANHA Senior State Games have been mailed to the Activity and Social Service Departments of each nursing home. More information about the games will be sent to facilities at a later date. If

you have any questions, please contact John Matson at the Association office at (334) 271-6214 or jmatson@anha.org. For additional posters, you may contact the ASF Foundation at 800-467-0422, or visit www.alagames.net.

OTHER NEWS

National Partnership to Improve Dementia Care in Nursing Homes MLN Connects™ National Provider Call Resources

The National Partnership to Improve Dementia Care in Nursing Homes held a call on February 26, 2014. As a result of the call, the following helpful resources have been posted:

Nonpharmacologic Approaches to Care and Effective Pain Assessment & Management

<http://www.nursinghometoolkit.com/>

<http://www.geriatricpain.org/Pages/home.aspx>

http://www.nhqualitycampaign.org/files/Ask_the_DON-KLynch_11_18_13.pdf

<http://www.youtube.com/watch?v=RT0Ut3NQipU>

<http://www.apa.org/pi/aging/resources/guides/long-term-care.pdf>

<http://www.ncbi.nlm.nih.gov/books/NBK54971/>

[http://texasqio.tmf.org/Portals/0/Resource%20Center/Healthcare-](http://texasqio.tmf.org/Portals/0/Resource%20Center/Healthcare-Acquired%20Conditions%20in%20Nursing%20Homes/AntipsychoticAlternatives.pdf)

[Acquired%20Conditions%20in%20Nursing%20Homes/AntipsychoticAlternatives.pdf](http://texasqio.tmf.org/Portals/0/Resource%20Center/Healthcare-Acquired%20Conditions%20in%20Nursing%20Homes/AntipsychoticAlternatives.pdf)

Reminder: ADPH SouthernLINC Emergency Phone Call Down

Please remember to answer the Alabama Department of Public Health's weekly call down of the SouthernLINC emergency phones. The call down takes place every Wednesday at 10:00 a.m. If you have any questions, contact John Matson at the Association office at (334) 271-6214 or jmatson@anha.org.

Get Recognized for Meeting Quality Initiative Goals



The American Health Care Association (AHCA) has opened submissions for the 2014 Quality Initiative Recognition Program. Nursing homes have the opportunity to be recognized for demonstrating achievement of the AHCA/NCAL Quality Initiative goals. Members have until Thursday, May 1, 2014, to submit their data qualifying them for recognition. All members recognized through the program will be honored at AHCA/NCAL's 2015 Quality Symposium in Austin, Texas, and additional honors will be bestowed to those achieving multiple goals.

[Learn more about the recognition levels, eligibility requirements and submission steps on AHCA's website.](#) E-mail qualityinitiative@ahca.org with any questions about the Recognition Program.

Please see the attached document for more information.

Update from ADPH on Alabama Healthcare Coalitions

Healthcare Coalitions (HCC) are being formed around the state as a part of the Hospital Preparedness Program grant from the Assistance Secretary for Preparedness and Response at the US Department of Health and Human Services.

The HCC is a partnership of state, public and private agencies pursuing a common healthcare challenge. The goal of the HCC is to provide the concerted effort of the whole community in meeting the healthcare challenges presented by natural and man-made disasters, terrorist attacks, pandemics and mass casualty events. Coalitions provide an efficient mechanism to accomplish

common goals among healthcare partners through the continuum of planning and preparedness before events occur, response during events, and recovery after an event.

The HCC includes a diverse mix of disciplines. Nursing homes, hospitals, doctor's offices, assisted living facilities, EMS, EMA, pharmacies, coroners, businesses, law enforcement, and many more can be included in a coalition. Each coalition member brings a capability to the table that adds to the combined ability of the community to meet the healthcare challenges that emergencies and disasters impose. Like the Alabama Department of Public Health's (ADPH) "Get 10" program prepares individuals for basic self-sufficiency in an emergency, the HCCs prepare communities to be self-sufficient until outside help arrives or the event is over. Whether it be a large metropolitan hospital or a small ambulance company, each member is vitally important to the overall success of the HCC program in Alabama. If your agency is not involved in a HCC, you are encouraged to get involved. There is no long term commitment, but there are long term benefits. If you are interested in becoming a HCC Member Organization, or need more information, contact your ADPH Public Health Area Office's Emergency Preparedness (EP) Coordinator. You may also contact Randy Branson at APDH at (334) 206-3986 or randy.branson@adph.state.al.us.

Quality Improvement Videos

The Agency for Healthcare Research and Quality (AHRQ) invites you to attend a series of 4 CE Webinar presentations on: Improving Patient Safety in Long-Term Care Facilities

After participating in the Webinars, learners will be able to:

- **Utilize** effective engagement strategies to present an audience-appropriate training program for nursing assistants, licensed nurses, and other staff.
- **Utilize** the AHRQ patient care training resources to effectively train staff in how to recognize changes in a resident's condition, effectively communicate change, and prevent falls among residents.
- **Present** relevant case studies as examples of how best to detect change, communicate change, and prevent falls among residents.

Join AHRQ for these live Webinar presentations on Improving Patient Safety in Long-Term Care Facilities:

1. **Introduction to the Webinar Series:** Wed., March 12, 12:00 – 1:00 p.m.
2. **Detecting Change in a Resident's Condition:** Wed., April 23, 12:00 – 1:00 p.m.
3. **Communicating Change in a Resident's Condition:** Wed., June 18, 12:00 – 1:00 p.m.
4. **Falls Prevention and Management:** Wed., August 13, 12:00 – 1:00 p.m.

No cost registration: <https://ahrq.ethosce.com/content/improving-patient-safety-long-term-care-facilities-introduction-webinar-series>>

Participate in AHCA's Staffing Survey

The American Health Care Association (AHCA) is conducting its annual, nationwide staffing survey to examine retention and turnover rates for nursing center employees. The 2013 Staffing Survey is being sent to all nursing centers in the United States. All centers are asked to complete

and return the survey by Thursday, May 1, 2014. Individual center and company responses to the survey will be kept confidential. Published results will appear in the aggregate form only.

How to Access the 2013 Survey - www.ahcancal.org/research_data/staffing

As a multi-facility company, you may:

- Opt to direct your centers to fill out individual surveys ([xls-zipped](#)) or ([PDF](#)), or
- Have your corporate office complete the multi-facility survey questionnaire ([xls-zipped](#)), which is designed specifically for multi-facility operations. *Please note that the corporate survey, like the individual center survey, also collects relevant data for each of your centers. AHCA changed the format for ease of use by corporate staff that may complete the survey.*

AHCA will notify all nursing homes about this survey through a direct mailing. If you prefer to have your corporate office complete this survey on behalf of all your centers, then you may wish to let your centers know they do not need to fill out this information.

If you prefer each of your centers to complete individual facility surveys, you may wish to forward the instructions for completing/returning the survey to each center's Administrator, Human Resources Manager, or other appropriate contact, as many of the survey questions pertain to payroll data.

It is preferred that completed surveys may be emailed to research@ahca.org. However, you may also fax: (202) 454-1299; or mail:

AHCA 2013 Nursing Facility Staffing Survey
c/o American Health Care Association
1201 L Street, NW
Washington, DC 20005

Why Participate?

Participation in this survey is of benefit to your organization. Reporting your 2013 staffing trends can help your company identify areas of improvement and assist you on your quality journey. AHCA member may also be recognized for their staff turnover results through the 2014 Quality Initiative Recognition Program. *Note that for the AHCA 2014 Quality Initiative Recognition Program Staff Stability component, achievement will be based on the data submitted in this staffing survey. In order to be considered for this goal, you must complete the survey by the May 1, 2014, deadline. Survey data submitted after this deadline will not be considered.*

In addition, AHCA members can access their survey results online through LTC Trend Trackersm. Members can compare their staffing data to national and state averages, as well as local peers in aggregate.

If you participated in the 2012 Staffing Survey and you are a user of LTC Trend Tracker, you may access that information now. You may also access the 2012 Staffing Survey Report on the AHCA website through the Research - Staffing page.

Please note: If your organization is a registered user of LTC Trend Tracker, retention and turnover information for your company's individual centers can be made available to users within your organization for quality improvement and benchmarking purposes. No one else will be able to see your individual center data. If your organization uses LTC Trend Tracker, and you

do not wish to allow users within your organization to have access to the retention and turnover information submitted by your organization, please check the check box on the survey form.

Please email any questions that you may have regarding AHCA's 2013 Staffing Survey to research@ahca.org.

Thank you in advance for completing and returning the survey by May 1, 2014.

CALENDAR OF EVENTS

<u><i>Date</i></u>	<u><i>Event</i></u>	<u><i>Location</i></u>	<u><i>Time</i></u>
March 14 NEW DATE	ANHA Region II Meeting RSVP: Jim Walker (256) 927-7408, jimwalker@earthlink.net Guest Speaker: ANHA's John Matson Topic: How to Share Good News about Nursing Homes	Catfish Cabin Albertville	12:00 p.m.
March 19	Seminar: AIT Preceptor Certification & Recertification	Hyatt Wynfrey Birmingham	1:30 p.m.
March 28	ANHA Region VII Act/SS Auxiliary Meeting RSVP: JoAnn Smily (334) 636-5614 or (334) 637-3239	Felix's Fish Camp Mobile	11:30 a.m.
March 28	ANHA Life Safety Code/Physical Plant Committee Meeting	ANHA Offices Montgomery	10:00 a.m.
April 2	Seminar: Playing by the Rules for the Medicaid Nursing Home Program & Conducting an Effective Medical Record Audit"	Hyatt Wynfrey Birmingham	8:30 a.m.
April 2	ANHA Region IX Act/SS Auxiliary Meeting RSVP by March 31: Debra Dixon (205) 932-1173 Speaker Topic: Caring for Combative Patients Lunch will be provided	Hospice of West Alabama Tuscaloosa	12:00 p.m.
April 3	ANHA Region III Meeting RSVP: Kevin Ball (205) 788-6330, kball@ballhealth.com Guest Speaker: ANHA's John Matson Topic: How to Share Good News about Nursing Homes Lunch will be provided	Arlington Rehab & Health	12:00 p.m.

Alabama Nursing Home Association

4156 Carmichael Road ♦ Montgomery, AL 36106 ♦ PH: (334) 271-6214 ♦ FAX: (334) 244-6509

Links:

Alabama Nursing Home Association <http://www.anha.org>

AL Board of Examiners of Nursing Home Administrators <http://www.alboenha.state.al.us>

AL Dept. of Public Health <http://www.adph.org>

CMS <http://cms.gov>