



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, September 27, 2013

ANHA NEWS

Latest Edition of the Long Term Care Survey Available

The new May 2013 edition of the Long Term Care Survey manual is now available for purchase from ANHA. *Please see the attached order form for details.*



Annual Convention Attendees: Please Complete Online Evaluation Form

Your feedback is important to ANHA, and helps us plan future events. If you attended the Annual Convention and Trade Show, please take a few minutes to complete our online survey.

<https://www.surveymonkey.com/s/2013AnnualConvention>

ANHA 2013 Activity/Social Services Annual Convention

Join ANHA as we present the 2013 Activity/Social Services Annual Convention October 16-18 at The Wynfrey Hotel in Birmingham. This year's convention is packed with great educational offerings for **ALL** nursing home staff. Continuing education will be offered for activity professionals (12 hours), social workers (12 hours), nursing home administrators (12 hours) and nurses (14.4 hours).

During the convention, we will hold the Annual Activity/Social Services Auxiliary General Business Session and officers will be elected for 2014. The Activity/Social Services Auxiliary Nominating Committee is charged with the task of collecting the names of individuals interested in serving the Auxiliary Association in a leadership role.

The Committee is accepting nominations for the following positions:

Vice President, Secretary, Treasurer

If you are interested in one of the above positions, or if you have additional questions, please contact *Ina Brown* (ina@tlcnursingcenter.com) or *Gail Gunn* (mona.gunn@eamc.org). Elections will be held during the General Business Session of the Activity/Social Services Auxiliary

Annual Convention on Thursday, October 17 at 1:30 p.m. at The Hyatt Regency Wynfrey Hotel in Birmingham.

Host Hotel Reservations for 2013 Activity/Social Services Convention

The newly renovated Hyatt Regency Birmingham – The Wynfrey Hotel will be the host hotel for this year’s convention. Reservations can be made by calling the hotel at 800-233-1234, or online at www.hyattregencywynfrey.com and using code “G-AASS”.

The following rates have been negotiated with the Hyatt Regency Birmingham – The Wynfrey Hotel for our 2013 Activity/Social Services Annual Convention Attendees:

- \$140 per Standard/Double Room
- \$170 per Concierge Level Room

Based on space availability, these rates will be offered one day before and following the meeting dates. **To ensure availability of reservation space, all participants are encouraged to make their overnight reservations by OCTOBER 2.** After this date, rooms from our block which are not reserved will be released for general sales to the public and availability cannot be guaranteed. *Please see the attached brochure and registration forms for more information.*

ANHA Offers My InnerView Satisfaction Survey

ANHA is excited to announce that it will once again fund a statewide initiative to measure nursing home satisfaction in partnership with My InnerView by National Research Corporation. The initiative will focus on capturing family, resident and employee satisfaction levels. This is an excellent opportunity to discover how your most important constituents view your facility, as well as, what they are sharing with the rest of the community. Members from My InnerView will be contacting you in the coming weeks and provide instructions for signing up to take full advantage of this opportunity. ANHA encourages every facility to take part in this continued effort to drive nursing home satisfaction.

If you have any questions, contact My InnerView representatives Allison Thomas, athomas@nationalresearch.com, or Teresa Costello, tcostello@nationalresearch.com, or call 800-601-3884. You may also contact John Matson at the ANHA Office at (334) 271-6214 or jmatson@anha.org.

Please look for further details about the My InnerView program in future editions of the *Weekly Roundup* and in e-mails from ANHA and My InnerView.

NATIONAL NEWS

Employers Need to Inform Employees about Affordable Health Care Act by October 1

October 1 is the final deadline for employers to inform employees about affordable health care coverage under the Affordable Care Act. AHCA/NCAL’s webpage on the Affordable Care Act contains a checklist of requirements for employers

http://www.ahcancal.org/facility_operations/affordablecareact/Pages/ACA-Implementation-

[Checklist.aspx](#)). The U.S. Department of Labor has provided model notices for employers offering insurance coverage to employees, as well as for those not offering coverage.

Below are the links to the model notices that employers can use to comply:

- Model notice for employers that offer coverage to some or all of their employees
- Model notice for employers who do not offer a health plan

Both notices are available in a Microsoft Word format and can be found on the Department of Labor website at (<http://www.dol.gov/ebsa/healthreform/index.html>)

On October 1, the Health Insurance Marketplace (<https://www.healthcare.gov/what-is-the-health-insurance-marketplace/>) launches enabling qualified individuals to shop and enrollment in an insurance plan. The Open Enrollment period is Oct. 1, 2013 to March 31, 2014. Insurance can begin on Jan. 1, 2014.

In addition, it is important to note that open enrollment for the new Small Business Health Options Program (SHOP) Marketplace (<https://www.healthcare.gov/marketplace/shop/>), which is a new program for small businesses that simplifies the process of buying health coverage for your employees, begins on October 1. Starting in 2014, small businesses with generally up to 50 employees will have access to the new health care insurance marketplaces through the SHOP. In 2016, employers with up to 100 employees will be able to participate in SHOP. Employers that are eligible for SHOP can call the new Health Insurance Marketplace Small Employer Call Center at 1-800-706-7893 to get general SHOP and small business questions answered by a customer service representative. Current call center hours are Monday through Friday from 9 a.m. to 5 p.m. Eastern.

CMS Provides Guidance on Implementing Transition to New MDS 3.0 Requirements Effective October 1

The Centers for Medicare and Medicaid Services (CMS) has released a new memorandum regarding policy changes affecting MDS 3.0 in the areas of swallowing and nutritional status as well as therapy services. Changes outlined in the SNF PPS FY2014 Final Rule resulted in several new MDS 3.0 items capturing distinct calendar days of therapy and co-treatment minutes as well as the proportion of total calories a person receives through parenteral or tube feeding and daily fluid intake intravenously or through tube feeding.

The memorandum (<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPPS/Downloads/FY2014-SNFPPS-Transition-Memo-v5-final.pdf>) describes the transition process for implementation of these new items, effective October 1. The transition policies will apply to determination of RUGs for individuals with assessment reference dates between October 1 and October 13. An updated RAI manual has not yet been released. CMS indicates it will be available shortly but has not specified a date when providers can expect it.

CMS Issues New Guidance on Survey Timing for Medicare Certified Facilities that Change Ownership

Surveyors should prevent providers from being able to game the Medicare system through well-timed facility sales and purchases, the Centers for Medicare & Medicaid Services instructed in a

recent memorandum (<http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-13-60.pdf>).

When a new owner acquires an existing facility that has been certified for Medicare participation, CMS can automatically assign Medicare certification to the new owner. However, the new owner could also reject automatic assignment. In this case, the new owner generally would not be liable for reimbursing Medicare for overpayments that occurred prior to the sale. A full initial survey would be needed to reestablish the facility's Medicare certification.

If surveyors disregard CMS policy and prioritize doing initial surveys rather than complaint investigations and other "core work," they open the door for outgoing owners to take advantage of the system, according to the memo. Providers who owe CMS for overpayments or civil monetary penalties could more easily sell their facilities to escape liability if purchasers can count on quick acceptance into the Medicare program, even if they reject automatic assignment.

The memo lays out a number of "long-standing" policies regarding initial certification surveys, including that all surveys must be unannounced. An initial survey that takes place shortly after a facility changes ownership "suggests discussion" has occurred between the surveyor and the owner, according to CMS.

Any survey that takes place within two weeks of an acquisition with rejection of automatic assignment "warrants closer review" by a CMS regional office, the memo states.

CDC Report on Antibiotic Resistance Categorizes Threats and Offers Recommendations

In an effort to raise awareness, the Centers for Disease Control and Prevention (CDC) released "Antibiotic Resistance Threats in the United States, 2013"

(<http://www.cdc.gov/drugresistance/threat-report-2013/>) the first report on antibiotic resistance and potential consequences of inaction.

The threats are categorized as: urgent, serious, and concerning. The report was written to be accessible to clinicians, consumers, and policymakers. It also includes technical information, references, and web links.

The third section of the report provides summaries of each of the bacteria. These summaries can aid in discussions about each bacteria, how to manage infections, and implications for public health. They also highlight the similarities and differences among the many different types of infections.

Antibiotic resistance also undermines the ability to treat people with infectious complications in patients with other diseases. Among the individuals at highest risk are those undergoing cancer treatment and joint replacements.

For more information on drug resistance, visit CDC's page Antibiotic/Antimicrobial at <http://www.cdc.gov/drugresistance/index.html>.

Escrow and Independent Informal Dispute Resolution (Independent IDR) Process for Nursing Homes – Applicable to all Civil Money Penalties (CMPs)

The Centers for Medicare and Medicaid Services (CMS) has issued S&C Letter 13-57-NH (<http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-13-57.pdf>) stating that CMPs imposed pursuant to all standard or complaint surveys that begin on or after October 1, 2013, that initiate an enforcement action in which a CMP is imposed where the highest level of deficiency is less than a “G” level, will be subject to collection and escrow in accordance with 42 C.F.R. §488.431. CMPs based on surveys in which a deficiency is cited for actual harm or immediate jeopardy (“G” or higher) are already subject to escrow.

Net Effect: Previously, CMS phased in the escrow requirement by limiting it to CMPs imposed for actual harm or immediate jeopardy. Effective October 1, 2013 every CMP imposed for a deficiency in a nursing home will be subject to escrow and the nursing home may request an independent informal dispute resolution.

Clarifying the IPPS Final Rule for LTC Providers

Last month, the Centers for Medicare and Medicaid Services (CMS) released its *FY 2014 Inpatient Prospective Payment System (IPPS) final rule*, which provided doctors and hospitals guidance on conferring inpatient status for stays that cross at least two midnights and thereby allow for coverage under the Medicare Hospital Inpatient Part A benefit. CMS believes that this change will help to reduce the use of observation days. As this final rule is implemented, we look forward to seeing if it does accomplish this objective and improves beneficiary access to post-acute care. It is important to clarify that the rules for skilled nursing care coverage currently remains exactly the same as they were prior to the release of the final CMS IPPS rule. *Medicare beneficiaries must still have a three-day inpatient hospital stay in order to access coverage for their skilled nursing care.* This has not changed.

STATE NEWS

TB Antigen Shortage – A Note from ADPH

The Centers for Disease Control and Prevention (CDC) has notified state TB programs that the nationwide shortage of tuberculin (both APLISOL® and TUBERSOL®) is expected to continue for several more months. Earlier reports were that the shortage would lessen in June of 2013, when TUBERSOL® production was expected to resume. According to CDC “The current projection for restoration of normal production of Tubersol is sometime in the fall, perhaps October.”

The Alabama Department of Public Health recommends that each facility adhere to the CDC publication: "Guidelines for preventing the transmission of *Mycobacterium tuberculosis* in health-care settings" found in the MMWR of 2005. A link to the CDC information is included at: <http://www.cdc.gov/tb/publications/slidesets/InfectionGuidelines/default.htm>

Recommendations for TB screening During the Nationwide Shortage

During the shortage, the Alabama Department of Public Health recommends that individual providers, local health departments, correctional facilities, and health care settings follow the recommendations below:

1. Do **NOT** administer TSTs (TB Skin Tests) to persons who have no risk factors for TB as documented on the TB Screening Form; this should be deferred until Tuberculin is available. Do not do any screening test for persons with a documented previous history of a positive TST or TB disease.
2. Substitute interferon gamma release assays (IGRAs) for TSTs in priority situations as outlined in #3 below. IGRAs can be used in most situations in which the TST is indicated and are preferred for people who have received BCG vaccine (2, 3). QuantiFERON®-TB Gold In-Tube and T-SPOT®.TB have FDA approval for TB testing. Each facility should contact your local hospital laboratory or laboratory vendor to arrange this testing. These tests are covered by Medicare and Medicaid.
3. The highest priorities for tuberculosis screening are:
 - a. Evaluating persons with suspected active TB disease,
 - b. TB contact investigations,
 - c. Evaluating residents and employees who are newly arrived in the USA from Asia, Africa, and Latin America, and
 - d. Persons at high risk of progressing to active TB, if infected (for example, persons who are HIV+, age <5, immunosuppressed).
4. Continue to ensure that persons with symptoms of active TB disease receive immediate medical evaluation. For suspected pulmonary TB, screening with a chest x-ray and obtaining sputum for AFB smear and culture are still considered imperative. Remember that chest x-ray screening does not diagnose TB infection or provide information about extra-pulmonary TB disease.
5. Tuberculin should be made available again in the next several months. This may become available from some suppliers or in some areas sooner than others. Facilities should continue to periodically check with their suppliers so that they can obtain tuberculin and resume, as soon as possible, routine testing of residents and staff which was postponed during this period of shortage.
6. The Bureau of Health Provider Standards is aware of the problems with obtaining PPD and will not cite any facility for deficient practice for not complying with the TB screening as currently set out in the Rules of the Alabama Board of Health.
7. The requirement that each facility take appropriate measures to individually assess each resident, evaluate symptoms, initiate appropriate testing and treatment, and protect residents from avoidable harm including TB exposure remains constant.

A sample TB Screening Form to determine TB risk to help direct screening is included.

If there are specific questions regarding these recommendations please contact Dr. Tom Geary, Bureau of Health Provider Standards at 334-206-5366 or Ms. Pam Fortner, Director of the Division of TB Control for ADPH at 334-206-6228

Medicaid Check Write Schedule for FY 2014

The release of funds is normally the second Monday after the check write (remittance advice) date. Please verify direct deposit status with your bank. *As always, the release of direct deposit and checks depends on the availability of funds.*

October 4, 2013
November 1, 2013
December 6, 2013
January 3, 2014
February 7, 2014
March 7, 2014
April 4, 2014
May 2, 2014
June 6, 2014
July 11, 2014
August 8, 2014
September 5, 2014

October 18, 2013
November 15, 2013
December 13, 2013
January 17, 2014
February 21, 2014
March 21, 2014
April 18, 2014
May 16, 2014
June 20, 2014
July 25, 2014
August 22, 2014
September 12, 2014

Submit Medicaid Cost Reports to ANHA

The Alabama Nursing Home Association is collecting cost reports for analysis by our independent reimbursement consultant, Dave Bishop. As in the past, our reimbursement consultant will provide you a detailed analysis of your costs compared to the costs of other facilities of a similar size. ANHA cannot stress enough the importance of sending in your cost report. In order to negotiate with Medicaid on various issues, we need to have accurate information concerning the profession. This information has proved very beneficial in the past.

Please send a copy of your 2013 Medicaid Cost Report to kmagdon@anha.org or by mail to:
Alabama Nursing Home Association
4156 Carmichael Road
Montgomery, Alabama, 36106
ATTN: Katrina Magdon

LPN License Renewal Began September 1

LPN license renewal began on September 1, 2013. The Alabama Board of Nursing (ABN) only has about 3,500 LPNs (out of 18,000+) who are eligible to renew.

The reasons an LPN might not be eligible to renew are as follows:

- Lack of sufficient continuing education (this is the primary reason for LPNs not being eligible to renew).
- Fees and fines owed to the Board. Payment of owed fines and fees is required before renewal can proceed.
- Citizenship/legal presence has not been verified (we are still lacking about 1/3 of LPNs who have not been verified because we have not received the documents or we've had to return documents for completion).
- Lack of mandatory CE class for those licensed by examination in the last two years (4 contact hours; 7 segments; required of newly licensed LPNs).
- Currently suspended (very low number).

LPNS and RNs can check to see if their citizenship has been verified by going to <https://www.abn.alabama.gov/abnonline/MyprofileLogin.aspx> and using the license number and last 4 digits of the social security number, signing in to the profile.

If you have LPNs in your facility or LPNs that you know, please advise them to get their required CE, pay any outstanding fees or fines, submit citizenship/legal presence documents, watch the mandatory CE class if licensed during the past two years and this is their first renewal. ABN will mail a notice to all LPNs next week. *Editor's Note: This article was provided by the Alabama Board of Nursing.*

New CE Video Available for Nurses

A new online continuing education (CE) course has been added to the Alabama Board of Nurse's course listing available at www.abn.alabama.gov. The 60-minute video, worth 1.2 contact hours, is about monitored practice. Two of the legal nurse consultants, Cathy Boden, MSN, RN, and LaDonna Patton, MSN, RN, CEN, present case studies in substandard nursing practice and drug diversion. They walk the viewer through the time of the complaint received by the Board through the discipline imposed by the Board. Mary Ed Davis, MSN, RN, the Director of VDAP, addresses monitored practice for both VDAP and probation. Specific stipulations in the agreement/order are covered including narcotic restrictions. Finally, Patrick Samuelson, Assistant General Counsel for the Board, addresses administrative hearings and when the Chief Nursing Officer, nurse manager, charge nurse, or general witness might be called upon to testify at an administrative hearing.

Nurses in VDAP or on probation present challenges to employers and the Board wanted to cover items for employers to hopefully improve both the communication and the monitoring of nurses.

ADPH Technical Services ALERT

It has come to the ANHA's attention that ALL correspondence, specifically the 2567, from ADPH/Technical Services (Life Safety) is being sent to a facility's e-mail with a receipt request/verification. Technical Services has indicated to ANHA that many facilities are not replying to the receipt request and that they will "eventually" not be placing a physical call to a location to confirm receipt. Technical Services has asked that each facility send in a current and valid email address in order to ensure correct correspondence and timely POC's.

*It s **STRONGLY** recommended that each facility send an email address, contact designee, facility name and phone number to: lifesafety@adph.state.al.us*

FACILITY NEWS

Westside Terrace Earns Deficiency Free Survey!

Westside Terrace Healthcare Center & Rehab First recently earned a deficiency free health survey! The Administrator if Kristie Hughes and the Director of Nursing is Stella Barnes. The facility is located in Dothan, and is owned by Turenne & Associates. Congratulations to the staff of Westside Terrace Healthcare Center & Rehab First on this outstanding accomplishment!

ANHA Expresses Sympathy

The Alabama Nursing Home Association wishes to express deepest sympathy to the family of Ellen C. Briley. Ms. Briley was administrator of Elba Hospital and Nursing Home for 22 years prior to her retirement in March 2012. Ms. Briley also served as a member to the Alabama Board of Examiners for Nursing Home Administrators from 2008–2011. Ms. Briley was a strong advocate for seniors in Coffee County and surrounding areas. She will be missed by all who came in contact with her.

Hanceville Nursing & Rehab Center Residents Attend County Fair



Nineteen residents of Hanceville Nursing & Rehab Center recently attended the Cullman County Fair. Pictured is Resident Robert Wilbanks high atop the ferris wheel. It was the first time in his life to ride a ferris wheel. "I've always wanted to do this," Mr. Wilbanks said. "I'll never forget this."

Henry County Health & Rehab Resident Donates to Locks of Love



Mrs. June Tallman a resident of Henry County Health and Rehabilitation and breast cancer survivor of over 8 years, recently made a donation to Locks of Love. Mrs. Tallman has been growing her hair out for over a year in order to help others battling cancer. She said that following her stroke, she felt she had nothing left to give of herself, but her hair. Henry County staff members say the 62 year old is a wonderful example of strength, courage and kindness. She encourages others to pass love on with the song "May the Circle Be Unbroken".

Wesley Manor Honored by AQAF at Annual Convention



Alabama Quality Assurance Foundation project manager Teresa Fox, right, presents a plaque to Methodist Homes' Sherri Eason in recognition of Wesley Manor being named Alabama's first Certified Gold Team in the Patient Safety and Clinical Pharmacy Services Collaborative (PSPC). The PSPC is a breakthrough effort to improve the quality of health care across America by integrating evidence-based clinical pharmacy services into the care and management of high-risk, high-cost, complex patients. Wesley Manor is located in Dothan.

Golden Living Oneonta Recognized for Work on National Quality Project



The Centers for Medicare & Medicaid Services (CMS) has recognized two Golden Living Center Oneonta staff members for their work on the Initiative to Reduce Avoidable Hospitalizations among nursing home residents. Executive Director Suzy Shelton and Director Nursing Amanda Horton received the CMS Outstanding Achievement Award. This facility is one of 23 working with the Alabama Quality Assurance Foundation (AQAF) on the CMS project. Pictured from left to right are Shelton, AQAF Care Pathways Coach Jeff Harris and Horton.

OTHER NEWS

Estimate Your FY2014 SNF PPS Rates: New Rate Calculator

The American Health Care Association (AHCA) updated their Medicare Part A SNF PPS rate calculator (http://www.ahcancal.org/research_data/funding/Pages/MedicareRateCalculator.aspx) to assist members in examining and estimating the impact of payment changes to SNF PPS rates. Using information on your distribution of Part A days by RUG category, the calculator will allow you to simulate and understand the impact of SNF PPS payment policy changes for FY 2014 on a facility.

The rate calculator has been updated to reflect Medicare payment policy changes found in the SNF PPS notice for fiscal year 2014 that was issued on August 6, 2013. The final rule and the rate calculator illustrate the net impact of a 2.3% increase in rates for the market basket update, a 0.5% reduction in rates due to a forecast error adjustment, and a 0.4% reduction in rates due to the Accountable Care Act (ACA) mandated productivity adjustment, for a net 1.3% increase in SNF PPS rates for FY 2014. (Please note that the individual adjustments may not add to the total adjustment due to rounding.)

To prepare the rate estimates, please take the following steps on the “Inputs and Results” tab of this Excel spreadsheet:

1. Enter your facility name.
2. Select your facility location in the drop-down menu on the line “Facility Location (CBSA)”.
3. Enter the time period that covers the Medicare patient days by RUG category for your facility.
4. Enter the Medicare patient days by RUG category under the RUG-IV payment system.

The difference between the average Medicare rate for fiscal year 2014, effective October 1, 2013, and the average Medicare rate for fiscal year 2013, effective October 1, 2012, will be expressed in dollar and percentage amounts. You will be able to estimate the impact of the per diem payment changes effective October 1, 2013. For your information, the average Medicare rate for fiscal year 2012, effective October 1, 2011 is also provided.

The information contained in the “Inputs and Results” and “Rate Calculation” tabs may be printed.

Please note that the rates provided in this calculator are the same as those published in the Federal Register. It has been determined that discrepancies may exist between the rates in this calculator and the SNF PPS PC Pricer due to rounding.

AHCA Releases Customer Fact Sheet Regarding Antipsychotics

As part of the American Health Care Association’s (AHCA) Quality Initiative, AHCA is proud to release our new, antipsychotic consumer fact sheet. The fact sheet provides family members and others involved in a resident's care background on the off-label use of antipsychotics, as well as frequently asked questions regarding loved ones living with dementia. It also gives family members suggestions on how they can partner with providers to get the best possible care for their loved one. Centers and communities are encouraged to use this fact sheet whenever they deem it to be suitable in interactions with residents and families. Download in English or Spanish (the first of its kind!) and find them on the antipsychotics page of the Quality Initiative website at http://www.ahcancal.org/quality_improvement/qualityinitiative/Pages/Antipsychotics.aspx.

AHCA Complimentary Webinars Now Available

F309 & Antipsychotics?! Compliance?! QAPI?!: Your Integrated Pathway to Dementia Care. Part Six: “Quality is Our Business Model”

Registration Link: <http://webinars.ahcancal.org/session.php?id=11700>

Session Description: The new guidance at F-309 recognizes the importance of a nursing center's QA&A process and encourages surveyors to examine the systemic approaches used to deliver care and services for a resident with dementia. This session will validate your current QA&A efforts and support your transition to QAPI with practical tips and useful pointers.

Learning Objectives:

- Relate current QA&A practices to QAPI principles
- Consider ways to organize your current QA&A work and committees to transition to a QAPI approach

Speaker: Stacey Rose Hord, LNHA, MCD, CCC-SL

Implementing the Affordable Care Act: Understanding Employer Requirements and Compliance Issues

Date & Time: Thursday, November 14, 2013 – 1:00pm – 2:00pm(CST)

Speaker: Nicole Fallon, Healthcare Consultant, CliftonLarsonAllen

Registration Link: <http://webinars.ahcancal.org/session.php?id=11729>

Session Description: The Affordable Care Act (ACA) implementation is in high gear with Health Insurance Exchanges opening October 1, and the individual mandate to obtain coverage looming. In this webinar, learn what steps providers as employers should be taking in the coming months to prepare to comply, and new ways of evaluating benefit offerings. Please join AHCA/NCAL and Nicole Fallon of CliftonLarsonAllen for an update on several areas that are critical to the new health insurance marketplaces and what this will mean for providers as employers and from a business perspective. We encourage you to attend this webinar on

Thursday, November 14, at 1 p.m. Central Time which will cover critical health reform deadlines and implications for providers.

Learning Objectives:

- Understanding the affordability and look-back measurement safe harbors and what they mean to you as an employer.
- Understanding various reporting and notification requirements under the ACA.
- Considering the tax implications for the business and employees of benefit decisions going forward.

Understanding what plans will meet minimum essential coverage and minimum value under ACA.

AHCA Quality Improvement Toolkits/Webinars

The 4 Key Strategies to Retain New Hires and Reduce Employee Turnover (toolkit and webinar) and the *Clinical Considerations of Antipsychotic Management* (Toolkit and webinar) are available (free) to all AHCA members at: <http://qualityinitiative.ahcancal.org>. This resource uses a process framework, based on the Nursing Process, to identify care objectives and expectations. It identifies tools and resources to help providers successfully manage antipsychotic medication use at the resident and facility level. The guide focuses on 7 critical steps needed to ensure quality outcomes that are successful and continuous.

Members will need to log-in to access the toolkits, as it is a member-only benefit. If log-in information is needed, please contact your facility Administrator or State Association and they can give you the information you need.

CALENDAR OF EVENTS

<u>Date</u>	<u>Event</u>	<u>Location</u>	<u>Time</u>
September 27	ANHA Region VII Act/SS Auxiliary Meeting & Election RSVP: Janet Daughdrill (251) 471-5431, ext. 5011	Felix's Fish Camp Mobile	11:30 a.m.
October 2	ANHA Region VIII Act/SS Auxiliary Meeting & Election RSVP: Shelia Dunn (334) 347-9541	Enterprise Health & Rehab Enterprise	2:00 p.m.
October 31	ANHA Region III Meeting RSVP: Kevin Ball (205) 788-6330 or kball@ballhealth.com Guest Speaker: Bill O'Connor, ANHA Executive Director	Hanover Health & Rehab Birmingham	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>