

August 5, 2011

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NATIONAL ALZHEIMER'S PROJECT ACT

On January 4, 2011, President Obama signed the National Alzheimer's Project Act (NAPA) into law. The requirements of the law are:

- An annually updated national plan submitted to Congress on how to overcome Alzheimer's.
- Annual recommendations for priority actions to both improve health outcomes for individuals with Alzheimer's and lower costs to families and government programs.
- The annual evaluation of all federally funded efforts in Alzheimer's research, care and services - along with their outcomes.
- The creation of an Advisory Council on Alzheimer's Research, Care, and Services.

The national plan will be our country's roadmap to address Alzheimer's disease. For it to be effective, we must ensure that the federal government understands the challenges our families face each day as we fight Alzheimer's.

Throughout August, the Alzheimer's Association is continuing to gather feedback in communities across the country with "input sessions". They will collect thoughts and ideas which will be compiled into a report to the Secretary of Health and Human Services, Kathleen Sebelius. To find a session near you, visit the [NAPA website](#).

President Obama released a video urging people to take part in the listening sessions, and discussing the work his Administration has done to help the fight against Alzheimer's. The video can be viewed [here](#).

FROM THE ADMINISTRATION

Health and Human Services

Affordable Care Act Provisions on Women's Health Care*August 1, 2011*

On Monday, the U.S. Department of Health and Human Services (HHS) held a conference call to discuss new requirements in the Affordable Care Act that will affect women's care. HHS Secretary Kathleen Sebelius; Tina Tchen, Executive Director of the White House Council on Women and Girls; and Mayra Alvarez, Director of Public Health Policy in the Office of Health Reform at the U.S. Department of Health and Human Services spoke on the call concerning new preventive services that will be mandated by the Affordable Care Act.

These services must be offered in new health insurance plans starting August 1, 2012 without copays or deductibles. The services include annual well women screenings, breast feeding supplies and supports, domestic violence screening, screenings for gestational diabetes, counseling on STIs, and contraceptives.

These preventive services will expand services to women and will strengthen Medicaid. Through these preventive screening and services, the Affordable Care Act will allow women to live healthier and will bring fairness to women's insurance.

HHS Awards \$71.3 Million to Strengthen Nursing Workforce*July 29, 2011*

HHS Secretary Kathleen Sebelius today announced \$71.3 million in grants to expand nursing education, training and diversity.

Nursing workforce development programs, reauthorized by the Affordable Care Act and administered by HHS' Health Resources and Services Administration, are the primary source of federal funding for nursing education and workforce development. These programs bolster nursing education at all levels, from entry-level preparation through the development of advanced practice nurses. They also prepare faculty to teach the nation's future nursing workforce.

For more information, and detailed award information, click [here](#).

Centers for Medicare and Medicaid Services

Medicare and Other Health Benefits: Your Guide to Who Pays First

Centers for Medicare and Medicaid Services released a new guide: *Medicare and Other Health Benefits: Your Guide to Who Pays First*. This Guide explains how Medicare works with other kinds of insurance or coverage and who should pay your bills first. Some people with Medicare have other insurance or coverage that must pay before

Medicare pays its share of your bill. You may have more than one type of insurance or coverage that will pay before Medicare. Tell your doctor, hospital, and all other health providers about your other insurance or coverage to make sure your bills are sent to the right payer to avoid delays.

The guide includes basic information on Medicare and the different plans available, Medicare and other types of insurance or coverage, and a list of terms necessary for understanding these plans.

The guide can be found [here](#).

CMS Issues Final FY 2012 Acute Care and Long-Term Care Hospital Rule

The Centers for Medicare & Medicaid Services (CMS) today issued a final rule that will update Medicare payment policies and rates for hospitals in fiscal year (FY) 2012. The final rule, which will affect Medicare payments to general acute care hospitals and long-term care hospitals for inpatient stays, supports Medicare's efforts to promote ongoing improvements in hospital care that will lead to better patient outcomes, while addressing long-term health care cost growth, and supporting the goals of the new Partnership for Patients.

The final rule, which will apply to approximately 3,400 acute care hospitals and 420 LTCHs, will generally be effective for discharges occurring on or after Oct. 1, 2011. The final rule will increase payment rates to general acute care hospitals under the IPPS by 1.0 percent, compared with -0.5 percent in the proposed rule, and will increase payment rates to LTCHs by 2.5 percent, compared with 1.9 percent in the proposed rule.

CMS projects that the rate increase together with other policies in the final rule and projected utilization of inpatient services will increase Medicare's operating payments to acute care hospitals by \$1.13 billion, or 1.1 percent, in FY 2012 compared with FY 2011. Medicare payments to LTCHs in FY 2012 are projected to increase by \$126 million or 2.5 percent.

The final rule can be downloaded from the *Federal Register* [here](#). Supplemental tables and appendices may be downloaded on the CMS website [here](#).

More details about this final rule may be found in the [press release](#) and fact sheets regarding:

- Final policy and payment changes for inpatient stays in acute care hospitals and long-term care hospitals in FY 2012;
- Medicare's FY 2012 Hospital Inpatient Prospective Payment System final rule: *Understanding the documentation and coding adjustment*; and
- Improving quality of care during inpatient hospital stays

CMS Announces New Quality Tools and Initiatives

August 5, 2011

Today, the Centers for Medicare & Medicaid Services (CMS) announced a new tool for patients and caregivers and other enhanced initiatives to empower consumers to make informed choices about their health care, and to help improve the quality of care in America's hospitals, nursing homes, physician offices, and other health care settings.

The steps announced today include:

- A Quality Care Finder to provide consumers with one online destination to access all of Medicare's Compare tools – comparison information on hospitals, nursing homes and plans.
- An updated Hospital Compare website, which now includes data about how well hospitals protect outpatients from surgical infections and whether hospitals care for outpatients who are treated for suspected heart attacks with proven therapies that reduce death.
- An enhanced Quality Improvement Organization (QIO) Program under which QIOs provide technical assistance and resources to health care providers across the country to assist them in changing how care is delivered in hospitals, nursing homes, physician offices, and across care settings.

A press release and fact sheets regarding this announcement are attached. More information is available about *Hospital Compare* online here and on the QIO Program on the CMS website here.

CMS Releases Readmission Rate Information

The national 30-day readmission rates for heart attack patients increased slightly to 19.9 percent, from 19.8 percent in 2009, even as readmissions for heart failure and pneumonia declined to 18.2 percent and 24.5 percent respectively, according to new data released Friday by CMS. Additionally, 30-day mortality rates for heart attacks continued to decline, CMS announced.

Department of Labor

DOL Announces \$1.6 Million for “Add Us In” Initiative

August 4, 2011

On Thursday, at the National Disability Forum in Washington, Secretary of Labor Hilda L. Solis announced the availability of approximately \$1.6 million in funding for the Add Us In initiative, which will fund up to three cooperative agreements with allotments ranging from \$500,000 to \$550,000 each.

The initiative is designed to increase the ability of companies to employ individuals with disabilities, particularly businesses owned and operated by African-Americans; Asian-Americans and Pacific Islanders; Latinos; members of federally recognized tribes and Native Americans; lesbian, gay, bisexual and transgender individuals; and women.

"The Labor Department is committed to ensuring that every American who wants a job can find one, including people with disabilities. The Add Us In initiative will help businesses develop strategies to provide a broader range of employment opportunities for this underutilized group of workers," said Secretary Solis.

Eligible applicants are consortia having representation from each of the following four organization types: 1) An association of targeted businesses, a business association located in a target population community, or other similar entity; 2) a disability-serving organization; 3) a local workforce investment board or other organization with demonstrated experience in providing training and employment-related support services, such as a One-Stop Career Center; 4) and a youth-serving organization.

In addition to developing models, strategies and policies to improve employment opportunities for people with disabilities, a consortium must also form and strengthen connections among the four organization types by building a network of disability and diversity experts.

The full announcement for this grant opportunity can be found [here](#). Applications will be accepted until September 2.

2011 National Disability Employment Awareness Month Posters Now Available

Held each October, National Disability Employment Awareness Month (NDEAM) is a national campaign that raises awareness about disability employment issues and celebrates the many and varied contributions of America's workers with disabilities. The theme for NDEAM 2011 is *Profit by Investing in Workers with Disabilities*, which promotes the valuable contributions people with disabilities make to America's workplaces and economy. 2011 NDEAM posters are now available to [download](#) or [order](#).

Social Security Administration

Social Security Benefits Paid on Time

August 2, 2011

Michael J. Astrue, Commissioner of Social Security, announced on Tuesday that Social Security payments for August 3rd will be made on time and as scheduled. Payments for August 10th, 17th, and 24th also will be made as scheduled.

“I am happy to announce there will be no delay in the payment of August Social Security benefits,” Commissioner Astrue said, “which should be a relief to those people who were concerned about their benefits. I’m pleased the President and Congress were able to come together in a bipartisan fashion to avoid an interruption in payments.”

People still receiving paper checks from Social Security should consider signing up for Direct Deposit, the secure and convenient way to receive Social Security payments. All current beneficiaries must switch to electronic payments by March 1, 2013.

Disability.gov

Disability.gov’s Civil Rights Section Updated

Disability.gov’s Civil Rights section was recently updated with information about several actions taken by the U.S. Department of Justice (DOJ) and the U.S. Equal Employment Opportunity Commission (EEOC) to enforce the Americans with Disabilities Act. DOJ has announced several agreements under its [Project Civic Access](#) initiative. A recent action taken by EEOC involved the [Pepsi Bottling Group, Inc.](#) (Pepsi), which settled a disability discrimination lawsuit because it fired and did not provide reasonable accommodations to an employee.

Self Employment/Entrepreneurship Update: Resources on Becoming Self-Employed & Starting a Home Based Business

Disability.gov was recently updated with several new resources, [tips and tools](#) for people interested in becoming self-employed or starting a [home based business](#). You’ll also find information about writing a business plan and financing to get a small business off the ground.

More information can be found [here](#).

FROM CONGRESS

Debt Ceiling Agreement Reached

August 2, 2011

On Tuesday, August 2, President Obama signed into law a bipartisan compromise to increase the nation's borrowing authority and achieve long-term deficit reduction, the [Budget Control Act of 2011 \(S 365\)](#). The bill will increase the current \$14.3 trillion ceiling on federal borrowing by \$2.1 to \$2.4 trillion, an amount presumed to be sufficient to allow the federal government to operate into 2013. According to the nonpartisan Congressional Budget Office (CBO), the measure will trim at least \$2.1 trillion off the deficit over the next ten years.

To do so, the legislation puts in place a two-step process, the first of which will raise the debt ceiling by \$900 billion, an increase that will be offset by ten-year discretionary spending caps, enforceable by sequestration. Entitlement programs, including Medicare, Medicaid, Social Security, and Supplemental Security Income (SSI), are protected from this first round of cuts, and there is new spending embedded in the legislation that Congress believes will lead to more savings, such as through initiatives that target fraud and abuse in health care programs.

The second step calls upon a newly-authorized joint congressional committee to recommend more than \$1 trillion in further cuts to counter the second large increase of \$1.2 to \$1.5 trillion. If the joint committee's recommendations are insufficient, or are not enacted by Congress, automatic budget cuts will take effect beginning in 2013. Some programs, including Social Security, Medicaid, and several entitlements targeting low-income individuals and families, would largely be exempt from these cuts; Medicare benefits could not be cut, but provider payments could be reduced by up to two percent.

The legislation does not specify how various discretionary programs, including those authorized by the Older Americans Act (OAA), will be impacted. Instead, for FY12, discretionary spending will be determined through the regular appropriations process. In future years, discretionary spending will continue to be subject to the appropriations process, but the levels will also be impacted by either the congressionally-approved recommendations of the joint committee, or by the automatic cuts that will otherwise be triggered. Similarly, details as to how entitlements will fare in the coming years remains unknown. While these programs are exempt from the initial long-term savings through discretionary spending caps, entitlements may be targeted by the joint committee, or, as in the case of Medicare provider payments, impacted through a triggered sequestration. NASUAD will continue to monitor these developments, and our most recent analysis can be found [here](#).

FROM NASUAD**NASUAD Announces New Executive Board***August 1, 2011*

NASUAD is pleased to announce the newly-elected Executive Officers to NASUAD's Board of Directors for 2011-2012. Charged with providing strategic guidance to the Association, NASUAD's Executive Board will be led by President Carol Sala, the Administrator of the Aging and Disability Services Division within Nevada's Department of Health and Human Services. Joining Ms. Sala on the Executive Board is Vice President Lance Robertson, Director of the Oklahoma Aging Services Division; Secretary Gloria Lawlah, Secretary of Aging for the Maryland Department on Aging; and Treasurer James Bulot, Director of the Georgia Division of Aging Services. Ms. Sala's most recent predecessor, Irene Collins, Commissioner of the Alabama Department of Senior Services, remains on NASUAD's Executive Board as the Association's Immediate Past President.

Welcoming Ms. Sala to her new role, Martha Roherty, Executive Director of NASUAD, said, "Carol has spent her career improving the quality of life for some of Nevada's most vulnerable citizens. As President of the NASUAD Board of Directors, her experience, leadership, and dedication will help guide state agencies, as well as the association, in continuing to advance the needs of older adults, individuals with disabilities, and their caregivers."

Ms. Sala has been with the Nevada Department of Health and Human Services for over 25 years, and with the Aging and Disability Services Division (ADSD) since 1992. During this time, she has served as Chief of the Community-based Care program, as a Social Work Supervisor, and is the current ADSD Administrator, a position to which she was appointed in 2003. In this capacity, she oversees nearly 180 employees, and is responsible for an annual budget of approximately \$40 million. Prior to transitioning to the ADSD, she was the Department of Health and Human Services Welfare and Child and Family Services Divisions.

In recognition of her commitment to improving the quality of life for older Nevadans, Ms. Sala received the Thelma Clark Community Service Award in 2005; in that same year, she was selected as a delegate to the 2005 White House Conference on Aging. In addition to providing staff oversight for the Nevada Commission on Aging and the Strategic Plan for Senior Services Accountability Committee, Ms. Sala serves on several local, state, and national boards, including the Board of Examiners for Long-Term Care Administrators; the Trust Fund for Public Health; the Assistive Technology Council; the Rural/Frontier Women's Health Coordinating Centers Advisory Committee; and the Workforce Investment Board Subcommittee on the Employment of Persons with Disabilities. A graduate of the University of California, Berkeley, Ms. Sala is a licensed social worker and has done postgraduate work in Social Work at the University of Nevada, Reno. A full press release is available [here](#).

Memo on Nursing Facility Reimbursement Changes

On July 29, the Centers for Medicare & Medicaid Services (CMS) announced a final rule reducing Medicare skilled nursing facility (SNF) Prospective Payment System (PPS) payments in FY 2012 by \$3.87 billion, or 11.1 percent lower than payments for FY 2011. At the same time, driven by budget crises, many states have frozen or reduced Medicaid payments to SNFs and LTCHs.

Of interest to state aging and disability agencies is that historically SNFs have relied upon Medicare payments to offset any possible shortfalls in Medicaid lines of business. While nursing home providers were bracing for a Medicare reduction, trade association officials indicated that most were not anticipating a reduction on the scale of 11 percent. One trade association indicated that CMS' SNF rule "makes reductions beyond what is necessary for budget neutrality. This will threaten our ability to provide quality care to America's seniors. Coupled with changes in group therapy definitions, this drastic reduction will be especially challenging for skilled nursing facilities to manage."

Such possible impacts on nursing facility quality of care could have implications for State Long-Term Care Ombudsman and State Aging and Disabilities Agencies with other nursing home roles and responsibilities. [This memorandum](#) offers more detail on the SNF reimbursement landscape and offers insights on possible state agency implications.

[The memorandum can be found here.](#)

NASUAD Seeks a Policy Associate

The National Association of States United for Aging and Disabilities seeks a policy associate. The policy professional will have the lead responsibility for www.nasuad.org including development of policies regarding updating of content and the formulation of new web-based tools. The policy professional will also have responsibility for supporting a number of key programs and will prepare issue briefs and policy analyses; analyze proposed legislation and regulations; and provide consultation and support to members in developing state-specific policy agendas. Policy Associate must have familiarity with federally financed, state administered programs such as the Older Americans Act that support community services and elder rights programs; knowledge of Medicare and Medicaid policies related to home and community based services programs and state implementation; strong written and oral communication skills; demonstrated analytical capability; interest in and willingness to be trained in the use website software; strong interpersonal skills necessary to work effectively with a variety of state officials, and partners; minimum of 2 years of experience. Master's degree in public policy or related field preferred.

To apply please send a resume and cover letter to: eristeen@nasuad.org NASUAD is committed to providing equal opportunities for all applicants for employment. We are an Equal Opportunities Employer.

FROM OTHER ORGANIZATIONS

The John J. Heldrich Center for Workforce Development and the Kessler Foundation

Asset Development and Wealth Creation for People with Disabilities

The John J. Heldrich Center for Workforce Development and the Kessler Foundation developed this research brief on successful asset-building strategies. The report discusses "asset pathways" that states can use to increase the employment and financial independence of persons with disabilities.

The report can be found [here](#).

Health Affairs

Proportion of Antidepressants Prescribed without a Psychiatric Diagnosis is Growing

A new study showing that the prescription of antidepressants without a psychiatric diagnosis was published in Health Affairs. These results are likely due to the substantial increase in antidepressant prescriptions by nonpsychiatrist providers without an accompanying psychiatric diagnosis. Between 1996 and 2007, the prevalence of this increased from 59.5 percent to 72.7 percent. While the results do not clearly indicate a rise in inappropriate antidepressant use, they do highlight the need to gain a deeper understanding of factors driving this national trend and to develop effective policy responses.

The article can be found [here](#).

I&R/A Training and AIRS Certification, September 12-13, Hyatt Regency Capitol Hill, Washington, DC



UPCOMING EVENTS FROM OUR PARTNERS

National Association of State Head Injury Administrators State of the States in Head Injury Meeting, October 3-6, 2011, Kansas City, MO.

National Association of Medicaid Directors Fall Conference, November 7-9, 2011, Washington, DC

Archived Friday Updates are available on NASUAD's website here.