

Table of Contents

- Page 1 · Congratulations 2015 LLTCF Scholarship Recipients
 · LNHA Welcomes Rita Finn, Regulatory Director
- Page 2 · Number of Americans Living Past 100 Jumps 44%
 · National Nursing Home Week Theme Announced
- Page 3 · Congratulations LLTCF Scholarship Recipients
- Page 4 · CMS Finalizes 60-Day Report & Repayment Rule
- Page 5 · CMS Finalizes 60-Day Report & Repayment Rule (cont.)
 · Data, Culture Change Crucial to New Payment Models
- Page 6 · LNHA's Upcoming Events and Trainings
 · LNHA Facilities Earn Deficiency-Free Survey

Congratulations 2015 LLTCF Scholarship Recipients

LNHA would like to congratulate the 2015 Louisiana Long Term Care Foundation (LLTCF) Scholarship recipients. Each year the Foundation raises money through member donations, raffles and other fundraising activities and awards a number of scholarships to nursing school students across the state. To be awarded this scholarship, applicants must work in the long term care industry and show a caring attitude and scholastic aptitude.



This year 17 applicants who displayed a passion for serving Louisiana's elderly and frail were selected. Please join us in congratulating the following scholarship recipient winners. (Continued on page 3)

LNHA Welcomes Rita Finn, LNHA's Regulatory Director



Ms. Rita Finn, MSN, RN, has served in the nursing profession for more than 45 years. She has gained a variety of experience from working as a Director of Nursing at Jefferson Healthcare in New Orleans to managing a skilled nursing facility and rehabilitation unit at Elmwood Medical Center.

In the interest of providing the highest quality care to the patients she served, Rita recognized the need to continue her education. While working full-time, she earned a master's degree in health care systems management from Loyola University. After Hurricane Katrina devastated the New Orleans area, Ms. Finn was forced to relocate to Baton Rouge where she briefly taught at Our Lady of the Lake College. She decided to reside in the capital city and most recently served as the executive director of the Louisiana State Nurses Association. Rita's extensive knowledge and hands-on experience will

prove helpful in her new position of Regulatory Director for LNHA. In the coming weeks, join us in welcoming [Ms. Rita Finn](#).

Join the conversation and connect with LNHA today!

Number of Americans Living Past 100 Jumps 44%

The number of American centenarians — people who live past 100 years old — has increased by 44% since 2000, according to the Centers for Disease Control and Prevention report released in January. More than 72,000 people age 100 and older lived in the United States in 2014. That's up from 50,281 centenarians in 2000, and around just 15,000 in 1980.

Women make up the majority of those who live past 100, representing more than 80% of centenarians in 2014. The report also notes that death rates for those older than 100 have slowed over the past six years, thanks in part to advances in healthcare, a bigger emphasis on health and wellbeing and better training for healthcare professionals who care for the elderly.

Heart disease has remained the leading cause of death among those over 100. Alzheimer's disease became the second-leading cause with a 119% increase in deaths since 2000. Death rates for influenza, pneumonia and stroke have all fallen over the past 14 years. Experts expect the number of centenarians to continue to skyrocket in the coming years as baby boomers age.

Article from McKnight's Long Term Care News.



Once a year, always beginning on Mother's Day, skilled nursing facilities nationwide take pride in publicly honoring the indomitable spirit of residents and recognizing staff accomplishments. Called National Nursing Home Week®, May 8 to 14, 2016, nursing facilities will coalesce under the theme, "It's a Small World with a Big Heart."

This theme underscores the bond between staff, older adults, and individuals receiving therapies or people with developmental disabilities. Staff and residents view each other in the spirit of family. For staff, this reality is often a calling to a special mission and a life's work.

This year's theme puts your facility square in the middle of the daily pursuit of health and happiness. What better way to promote community outreach and awareness during the week than by sponsoring a good old, street-style fair. For more information on planning ideas and receiving a free product catalog, click [here](#).

Congratulations 2015 LLTCF Scholarship Recipients

The need for quality nursing staff in Louisiana is more critical than ever. This LLTCF nursing scholarship provides a real boost to staff, helping them to complete the education required to reach their professional goals.

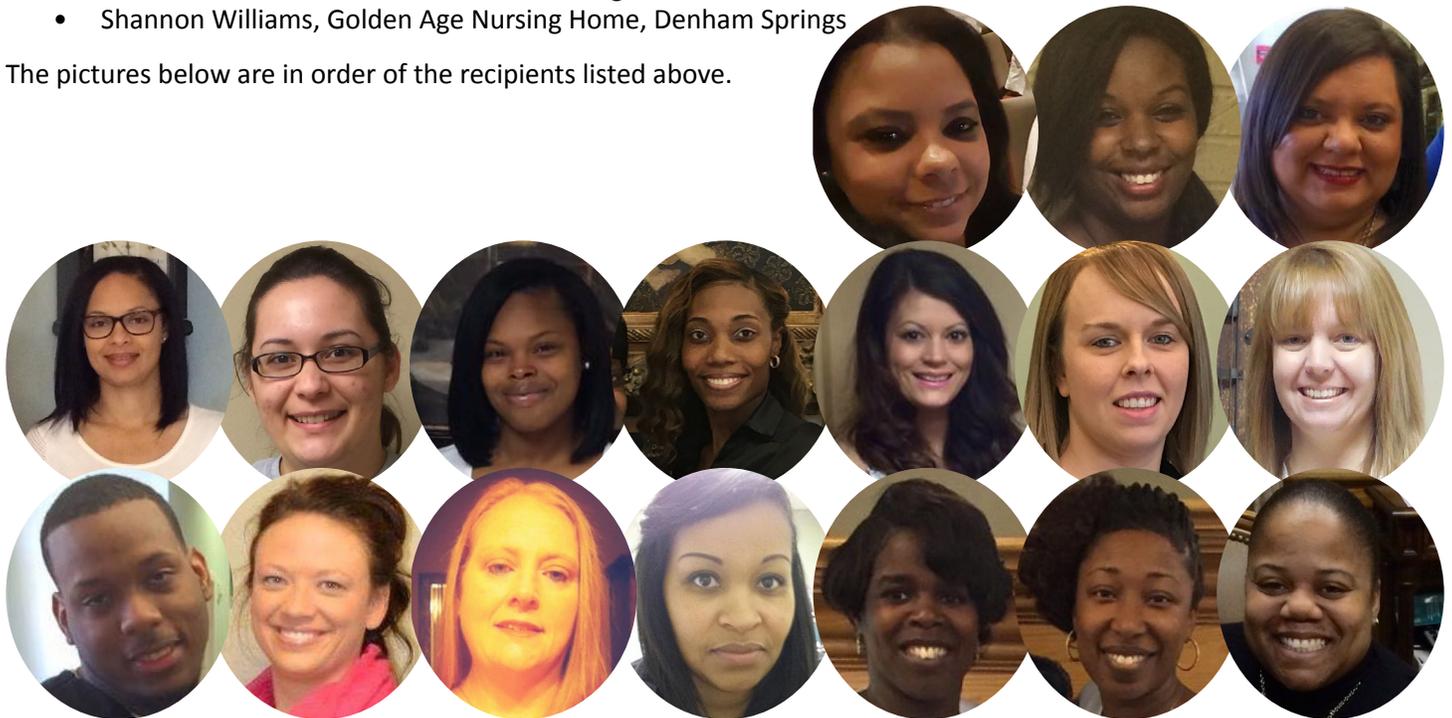
This year's class of 17 recipients displayed an exemplary amount of drive to achieve academic excellence and dedication to providing Louisiana's frail and elderly with high-quality care. It is vitally important to provide support to encourage these individuals to continue to pursue a rewarding nursing career.

The Louisiana Long Term Care Foundation is committed to providing annual scholarships to encourage nursing students of high academic and care-giving caliber to continue to pursue a career in the long-term care profession. This program is funded through the generosity of long term care providers and related organizations, supporting the Foundation's mission to promote the development of a skilled and quality-centered workforce.

The Louisiana Long Term Care Foundation is proud to announce the following 2015 scholarship recipients:

- Danae Ancar, Riverbend Nursing and Rehabilitation Center, Belle Chasse
- Sheneria Broussard, J. Michael Morrow Memorial Nursing Home, Arnaudville
- Natasha Cabarubio, Village Health Care at the Glen, Shreveport
- Rochelle Cousin-Batiste, Greenbriar Community Care Center, Slidell
- Brittany Evans, Village Health Care at the Glen, Shreveport
- Taviontae Farris, Harmony House Nursing and Rehabilitation, Shreveport
- Ekharra Freeman-Sturkey, Our Lady of Prompt Succor Nursing Home, Opelousas
- Meagan French, Natchitoches Community Care, Natchitoches
- Jennifer Gaspard, Riviere de Soleil Community Care Center, Mansura
- Allyson Gunn, Plantation Oaks Nursing and Rehabilitation, Wisner
- Joshua Issac, Village Health Care at the Glen, Shreveport
- Julie James, Wyatt Manor Nursing and Rehabilitation Center, Jonesboro
- Tanya January, Golden Age of Welsh, Welsh
- Portia Lyons, Golden Age of Welsh, Welsh
- Mona Miles, Jefferson Manor, Baton Rouge
- Sinitra Tillman, Jefferson Manor, Baton Rouge
- Shannon Williams, Golden Age Nursing Home, Denham Springs

The pictures below are in order of the recipients listed above.



View more photos of the LLTCF recipients receptions on the [LNHA Facebook album](#). Join us in congratulating these hard-working students on achieving this great accomplishment. If your organization or facility would like to help fund a scholarship for a deserving nursing student, call Karen Miller at 225.927.5642.

CMS Finalizes 60-Day Report and Repayment Rule

In February, CMS released its final rule (Final Rule) on the reporting and returning of Medicare Parts A and B overpayments by providers and suppliers pursuant to Section 1128J(d) of the Social Security Act (Section 1128J(d)). This Final Rule implements and clarifies Section 1128J(d) with respect to Medicare Parts A and B, even though the Section 1128J(d)'s statutory reporting and repayment obligations have been effective since it was enacted by the Affordable Care Act in March 2010. The Final Rule became effective on February 12, 2016.

The Final Rule departs from the 2012 proposed rule in several key regards. Some of these changes offer clarity and needed flexibility for providers, but others create potential new risks for providers.

The Final Rule includes the following key provisions:

- **Shorter 6-Year Lookback Period.** The final rule provides for a 6-year lookback period for reporting and returning overpayments, a reduction from the 10-year period previously proposed.
- **“Reasonable Diligence” Rather than Proposed Constructive Knowledge Standard.** The Final Rule requires that providers exercise reasonable diligence, which includes both “proactive” compliance activities and timely “reactive” investigations in response to credible information of a potential overpayment. Previously, CMS had proposed using the concept of actual knowledge, reckless disregard, and deliberate indifference to determine when a false claim has been identified, based on the definition of “knowing” and “knowingly” in Section 1128J(d) and the Civil False Claims Act. The Final Rule no longer seeks to interpret the terms “knowing” and “knowingly.”
- **Benchmark Six-Month Investigation Period.** While the Final Rule does not contain a time limit for investigations, CMS does note that, except in “extraordinary circumstances,” reasonable diligence would require not more than 6 months for a timely, good faith investigation of credible information. “Extraordinary circumstances” may include unusually complex investigations, natural disasters, and a state of emergency.
- **Implication for Stark Self-Disclosures.** In the perambulatory language, CMS states that providers and suppliers reporting overpayments through the CMS Stark Self-Referral Disclosure Protocol (“SRDP”) after the effective date of the Final Rule will be subject to a 6-year lookback period. However, providers and suppliers reporting SRDP overpayments prior to the effective date of the Final Rule will be governed by the 4-year lookback period currently applicable to the SRDP process, and will not be expected to return overpayments from the fifth and sixth years through other means.
- **Quantification is Part of the Overpayment Identification Process.** The Final Rule clarifies that identification requires both the determination that an overpayment was received and quantification of the amount of the overpayment. This explicit acknowledgement that a reasonably diligent provider does not identify an overpayment until it has been quantified addresses a key omission in the proposed rule.
- **Affirmative Obligation for Proactive Compliance Activities.** The proposed rule emphasized provider’s obligations to investigate suspected overpayments, but the Final Rule introduces the notion that reasonable diligence includes proactive compliance activities conducted in good faith by qualified individuals to monitor for the receipt of overpayments. This shift in emphasis underscores the importance of robust compliance activities, which may vary based on the setting size or provider type.
- **Accommodating Payment Plans.** The Final Rule offers pragmatic relief to providers facing particularly burdensome repayment obligations by suspending the deadline for returning overpayments when the provider requests an extended repayment schedule, which are subject to the CMS rather strict rules on qualification.
- **Underpayments Not Covered.** Although providers sometimes seek to incorporate underpayments to reduce the amount of an overpayment, CMS explicitly excludes the treatment of underpayments from the scope of the Final Rule.

(Continued on page 5)

CMS Finalizes 60-Day Report and Repayment Rule (cont.)

- **Applicable Reconciliation Limited to Cost Report Filing.** The Final Rule also finalizes CMS' proposed policy to limit "applicable reconciliation," which affects the creation of a report and return obligation, to cost report reconciliation, i.e., in situations where CMS makes interim payments to a provider throughout the cost reporting year and the provider reconciles those payments with covered and reimbursable costs at the time the cost report is due. Under the Final Rule, CMS considers "applicable reconciliation" to occur when the cost report is filed, with the exception of reconciliation related to Supplemental Security Income ratios used in the calculation of disproportionate share hospital payment adjustment and related to the outlier reconciliation.

The Final Rule sets forth CMS' policy with respect to provider and supplier overpayments from durable medical equipment Medicare administrative contractors, or Part A/Part B Medicare administrative contractors. While CMS had previously finalized a separate rule for Medicare Part C and Part D plans at 42 C.F.R. sections 422.326 and 423.360, it still has not proposed a rule with respect to Medicaid overpayments. Nonetheless, CMS emphasizes that despite the absence of rulemaking as to the implementation of Section 1128J(d) with respect to Medicaid, the requirements of Section 1128J(d) are currently effective with respect to Medicaid overpayments.

Article from by [Hooper, Lundy & Bookman, PC](#).

Data, Culture Change Crucial to New Payment Models

Providers will need to undertake a drastic culture change and refocus on data to prepare for upcoming post-acute payment changes. Data will be critical as new advanced payment models (APMs), including bundled payments and accountable care organizations, are tested out by the Centers for Medicare & Medicaid Services. Facilities that know their Nursing Home Compare data, as well as the public data for their competitors and even home health agencies, will have a leg up on landing care coordination partnerships with hospitals. If your facility's scores aren't competitive in your marketplace, you need to address those things head on and early on.

Each facility's data "story" should have cost analysis, payments, length of stay, outcomes and discharge site for specific diagnosis codes, comorbidities and physicians. The skilled nursing facilities that use data to positively differentiate themselves will perform best under advanced payment models.

Once providers have their data story ready to share, experts advise sharing it with the hospital's chief nursing officer, chief financial officer or other high-ranking hospital official who can "steer you down" to other decision-makers.

As payment models evolve, avoid thinking of patients as "mine" only for the time they are in a skilled nursing facility. Instead, providers must focus on the continuum of care through transition points. Providers who bring that mindset will be highly valued in care partnerships.

LNHA's Upcoming Events and Save the Dates!



New events have been added to the [News and Events web page](#) and to the e-calendar. To register for an event, visit www.lnha.org and click the calendar icon on the home page and select the appropriate event.

UPCOMING EVENTS:

- March 8-11: Resident Activity Director Certification Workshop, Marksville

SAVE THE DATES:

- May 3-4: LNHA Spring Conference, Baton Rouge



LNHA Facilities Earn Deficiency-Free Survey

LNHA congratulates Willow Wood at Woldenberg Village in New Orleans for achieving a deficiency-free annual survey.

LNHA appreciates your hard work, compassionate care and unyielding commitment to provide quality services to your community.

If your facility achieves a deficiency-free annual survey and would like to be recognized in the *Lagniappe* newsletter, contact Karen Miller at kmiller@lnha.org.



LNHA 2016 Event Calendar

LNHA has compiled an event calendar that includes education events, conferences, conventions, AHCA events, as well as various other events and health care observances. Click [here](#) to download the calendar. It will also be included in this year's LNHA Membership Directory and Buyer's Guide.



The *Lagniappe* newsletter is published twice a month by the Louisiana Nursing Home Association, 7844 Office Park Blvd., Baton Rouge, LA 70809, 225.927.5642. *Lagniappe* is provided as a membership benefit. Executive Director: Joseph Donchess; Communications Director: [Karen Miller](#).