LNHA Agency Liaison Meeting | MINUTES

August 16, 2017 | 2:00 pm | LNHA Office

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| Committee members present: Jamie Shelton  (Central Management), Scott Broussard  (TrustCare Management South), Phyllis Chatelain  (Lakeview Manor), Wayne Plaisance (Chateau de Notre Dame), Dave Rambo (Zachary Manor Nursing and Rehab), Lannie Richardson (Central Control) | Staff members: Mark Berger, Wes Hataway, Nancy Russell and  Karen Miller  Guests: Cecille Castillo, Margie Huguet, Stephen Russo and Jenna Young (Louisiana Department of Health), Myron Chatelain (LNHA Service Corporation) |

Call to order  
Committee Chairman Jamie Shelton called the meeting to order and the following topics were discussed.

Judicial Commitments to Nursing Facilities

* **Facilities receiving residents via judicial commitment:** The Louisiana Department of Health (LDH) explained that judicial commitments can result from either a civil or criminal commitment. Once a petition for commitment is filed, a hearing is held. If the judge feels a commitment is in order, the person can be committed to the “care and custody” of LDH for placement into a nursing facility or another appropriate medical facility. Once placed in a nursing facility, LDH defers to the nursing facility for any and all psychiatric care. Often, a person is committed “for a period not to exceed six months.” LDH stressed that such wording does not mean a person **will** be there for six months but rather the person **can** be there for six months.
* **LNHA voiced a facility’s experience:** A resident was committed and placed in a nursing facility for up to six months. Prior to the completion of six months, the Office of Aging and Adult Services (OAAS) determined that the individual no longer met the criteria to be placed in a nursing facility. The person was notified; however, the facility was not, and the person remained a resident. The facility eventually learned of the determination and had concerns about receiving reimbursement after the determination was made. LDH and OAAS will examine their protocols to create a more effective method to notify facilities if a resident no longer meets the criteria to receive nursing facility care.

* **The process of filing for “recommitment”:** LDH noted that because the resident was originally committed to their “care and custody,” the responsibility would most likely be LDH’s responsibility. LDH will follow up regularly with the nursing facility for the sole purpose of reporting to the court and filing a petition to recommit if needed.
* **Restrictions for a person committed to a nursing facility:** LDH noted that a resident enjoys the same freedoms as the public unless the treatment team agrees that restrictions are needed to improve the residents’ health.

LDH and LNHA will create a plan that standardizes the notification to nursing facilities if a person no longer meets the nursing facility level of care. LDH and LNHA will also create a plan to standardize requests for re-commitments.

Mandatory Balance Billing Disclosures

[Act 306](http://www.legis.la.gov/legis/ViewDocument.aspx?d=1051916) was passed during the 2017 Louisiana regular legislative session requiring health care facilities to perform mandatory balance billing disclosures. The law went into effect in August 2017 and LDH recently disseminated a memo reminding nursing facilities to comply with its provisions. Questions arose after the memo was distributed because nursing facilities rarely—if ever—provide out-of-network care.

LDH acknowledged that most nursing facilities do not provide out-of-network care; however, because nursing facilities meet the definition of “health care facilities” as defined in Act 306, they are technically required to adhere to its provisions. LDH stated that if the potential exists for a resident to receive out-of-network care, the facility should adhere to the disclosure provisions.   
  
Impact of Opioid Limitations

[Opioid restrictions](http://files.constantcontact.com/513b9959001/6cbbe5bb-8e8f-4f85-962a-4e7670bc980a.pdf) limit the amount of opioids that can be filled by a pharmacy. A question was raised regarding delays in receiving additional amounts for residents with chronic pain. LDH reminded facilities that quantity overrides are permitted. Facilities should request that their pharmacists contact the Prior Authorization Unit housed at the University of Louisiana (ULM) to request a variance or override of the quantity limit. The override request will be granted if the situation is warranted.

Certification of CNA working hours

The question was raised as to who has the responsibility of certifying the working hours of a certified nursing assistant (CNA) contracted through a staffing agency. LDH answered that it is ultimately the facility’s responsibility. The facility and the staffing agency should contractually agree that the staffing agency will only provide qualified CNAs. In addition it was suggested that the contract should also state that the staffing agency will certify the hours worked.

Qualification of Activity Personnel  
LDH is in the process of developing a rule pertaining to the qualifications of a resident activity director (RAD). LDH will consider LNHA’s suggestions as LNHA has a long history of providing activity director certification.

Medicaid Eligibility Requirements for Residents with Serious Mental Illness

Despite the Department of Justice (DOJ) [letter of finding](https://www.justice.gov/opa/file/920141/download), no changes have been implemented for determining Medicaid eligibility. LDH is in discussion with the DOJ regarding any adjustments to assessments and placement of those with serious mental illnesses.

LDH Approval for Facility Curriculum for CNA training courses  
Facilities have reported a delay in receiving LDH approval for CNA training courses curriculum used in facilities. LDH noted that the delay is often due to communicating the revisions needed because of errors in the facilities’ paperwork. Once the paperwork is correct and complete, approval occurs in six to eight weeks.

LDH Commends Quality Improvement

LDH representatives recently attended the Region VI CMS meeting where [cited deficiencies statistics](http://files.constantcontact.com/513b9959001/c03bc5bb-26f3-4d9a-a7f4-5782f69004b8.pdf?ver=1503956093000) were highlighted for Region VI states. LDH commended Louisiana facilities on their performance and quality improvements.

Wind Speed Requirements

A question was raised regarding [Act 540](http://www.legis.la.gov/Legis/ViewDocument.aspx?d=405758) and its mandate to report wind speed requirements and whether all facilities must report that information. LDH stated that no changes have been made. The only facilities that are required to provide this information are those covered by Act 540 (Acadia, Ascension, Assumption, Calcasieu, Cameron, Iberia, Jefferson, Jefferson Davis, Lafayette, Lafourche, Orleans, Plaquemines, St. Bernard, St. Charles, St. James, St. John the Baptist, St. Martin, St. Mary, St. Tammany, Tangipahoa, Terrebonne, and Vermillion). These facilities should continue to provide this information.