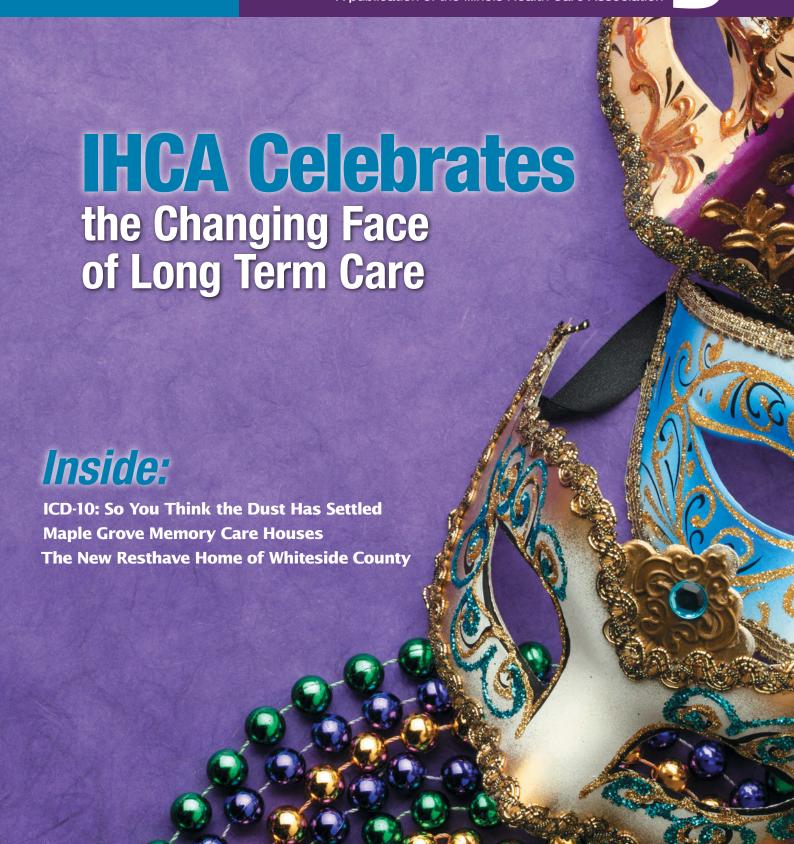
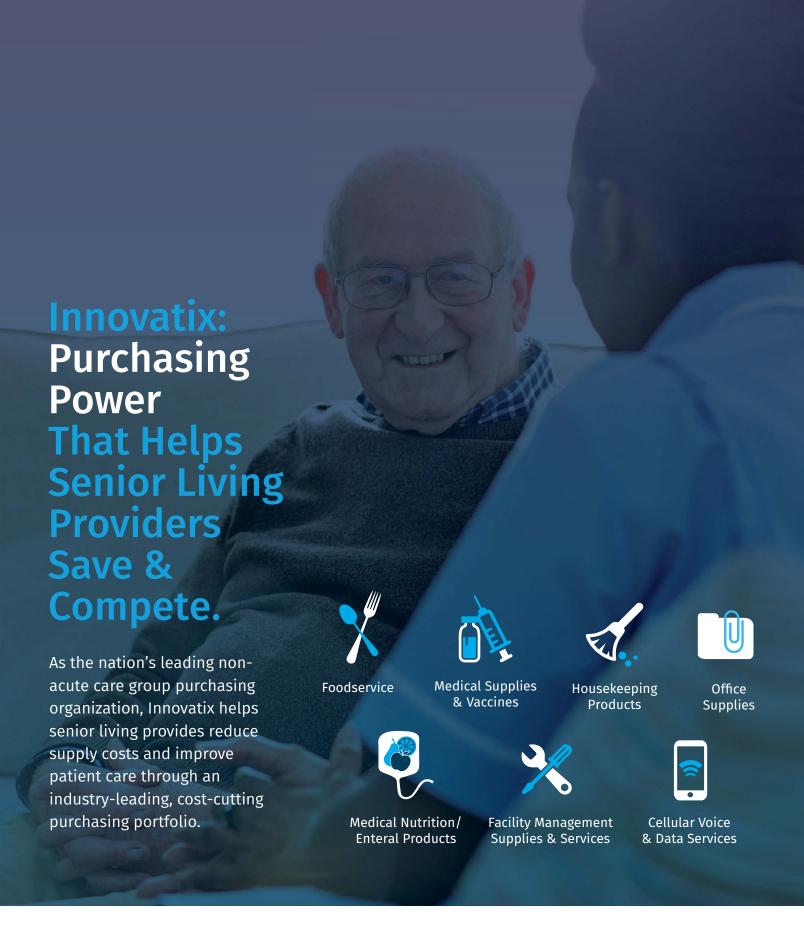
Fall/Winter 2015

THE REPORT OF THE Illinois Health Care Association











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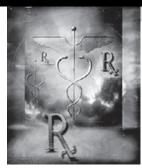
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From the Association

Welcome to this year's Fall/Winter issue of *LTC Today*! It hardly seems possible that we are already approaching the end of 2015, but here we are. And what a year it has been! So much has happened, even in the six months since our last issue.

The theme for this year's IHCA Convention & Expo was "The Changing Face of Long Term Care" – a sentiment that each of us can identify with. This past year has been full of ups and downs, twists and turns – ICD-10 implementation, a new administration at the Capitol in Springfield, a budget war that has raged on for months, and changes within our association and facilities. And, through it all, the dedicated members of our profession have continued to provide first-class service and quality care to facility residents each and every day.

For most of the past year, the transition from ICD-9 to ICD-10 has been looming over our heads, and it's finally here. Now, the official implementation date has come and gone and ICD-10 is a very real issue in each of our long term care facilities. Were your coders fully prepared? Was the transition smooth? Are you experiencing any major hurdles in the first few months of the new world of ICD-10? Our friends at Wipfli, LLP have provided an article with some excellent tips now that it is finally here. Turn to page 6 to check it out.

Aside from the major organizational and regulatory changes happening in long term care, some of our member facilities have been undergoing big changes of their own this year. Turn to page 10 to read about the huge renovation and addition construction project that the folks at Resthave Home of Whiteside County finished this past summer. In addition, take a look at the article on page 8 featuring Hancock County Senior Services in Carthage, Illinois. They recently celebrated the opening of two new Memory Care Houses at their Hancock Village campus – the first of their kind in Illinois!

In this issue you'll also find a convention wrap-up piece (page 12) and information on our new Preferred Vendor, My InnerView by National Research Corporation (page 17). You'll also find a brief bio for the new IHCA PAC Chairman, Frank Caruso from Bridgemark Healthcare.

As always, we hope you'll enjoy this issue of *LTC Today*, and if you have any questions, please don't hesitate to contact us.

Sincerely,



John Vrba IHCA President



Jani Hoyel

Dave Voepel IHCA Executive Director



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ICD-10: So You Think the Dust Has Settled...

BY CARYN ADAMS, RN, MSN, RAC-CT, C-NE, ICD-10 CERTIFIED CODING CONSULTANT AND AHIMA CERTIFIED ICD-10 CM/PCS TRAINER

ow that the October 1, 2015, deadline has passed, everyone can sit back, relax and breathe easier...right? Not exactly. While most of the long term care profession was prepared and ready, there is still work to be done. There are expected and unexpected challenges that still need to be addressed, documentation that must be refined and ongoing education to be offered for our coding professionals.

Anticipated Billing Challenges

Most likely, billing did not occur until the beginning of November. Your facility should have guidelines in place as to how to respond to denials. Know how your payors want the ICD-10 reported on bills (do you put the period in or not?). While the end-to-end testing in April showed minimal if any rejections based on ICD-10 coding, the possibility does exist. Billing staff should be monitoring for denials and identifying their reasons. The recommended steps for addressing denials and appeals has not changed, though you may want to check with a specific payor on how to appeal if there are any questions. If the facility is not performing a triple-check process involving the administrator, director of nursing, billing staff and MDS staff, as well as the coders prior to billing, now would be a great time to start. Reviewing diagnoses and supporting documentation will give the facility a head start should the record be requested for review and

will confirm the accuracy of the first listed diagnosis, as well as the supporting diagnoses.

Loss of Productivity

The impact on productivity was also anticipated when gearing up for the transition from ICD-9 and has most likely not returned to normal. Some argue that, because of the increased specificity, productivity will likely never return to normal. However, a study in Australia after its roll-out of ICD-10 showed a return in productivity after six months. From a facility management perspective, the impact of this on their bottom line is important. Management should be monitoring productivity as a performance improvement project. If there is no discernable increase in productivity after several months, perform a root cause analysis. Do the coding professionals require more education? Are they focusing on the right things? Do the providers require education on documentation to support coding? Is there too much volume and will an additional coding professional be needed?

Provider Documentation

Implementing the necessary improvements to provider documentation was a huge hurdle for all settings, but is particularly impactful in long term care. Now that we are in implementation mode, in order to provide the most specific diagnoses coding professionals should be querying the providers to clarify diagnoses, comorbidities and cause-and-effect relationships. It is important for the coders to code the most specific diagnoses possible. The facility may wish to audit the diagnosis codes to ascertain what percentage of "not otherwise specified" codes are being used. Yes, NOS is an option in ICD-10, but should be used as a last resort after all attempts at further clarification have been exhausted. CMS has stated that there will be no denials in the first year of implementation for "unspecified" codes, but getting it right now will save rework in

the future. Periodically auditing all documentation is always a good practice. Implementing a documentation improvement program that involves the providers may be a way to bring everyone to the same table.

Coding Guidelines

It is important that coders, billers and management be familiar with the coding guidelines. The first listed diagnosis is defined per the Uniform Hospital Discharge Data Set as "The condition established after study to be chiefly responsible for occasioning the admission of the patient to the hospital for care." This definition applies to all non-outpatient settings. Review the first listed diagnosis prior to submission to ensure this is the reason the resident is in the facility. For example, if the resident is admitted with a hip fracture, this should be the first listed diagnosis if the resident is receiving treatment for it. If that resident is unable to return home after the completion of therapy, the first listed diagnosis will need to change to the reason that the resident is unable to return home. It is also important to remember that only current, active diagnoses that impact the resident's current care and treatment should be coded. Also ensure that the 2016 ICD-10 code set is being used. There has been a code freeze to this point, but the thaw will occur next year.

Electronic Health Records and Technology

EHRs may have been a big help to the facility during transition or a continued source of frustration. ICD-10, like ICD-9, has coding guidance that states to "Code First" or "Code Also." This is not possible if the EHR automatically sequences diagnoses in alphabetical or numerical order. The coder may need to work closely with the biller when submitting diagnosis codes.

The use of EHR encoders, apps, General Equivalency Mapping, Google or Siri (yes, she ICD-10s) may be helpful to your coders. ICD-10 has

much more specificity, and the best way to get the correct code is to look up the term in the alphabetical index and verify in the tabular. If using an electronic route, be aware that you may get to the right family, but only by verifying in the tabular list will you be sure that you have the right code.

Continuing Education and Training

Ongoing education will continue to be needed. ICD-10 is new for all of us, and as the health care profession runs into snags, further guidance will be forthcoming. Sign up for ICD-10 industry emails through Coding Clinic, AHIMA or any other association that speaks to your needs. Keeping abreast of the most current information is one way to ensure ICD-10 is being done correctly in your facility. Facilities may want to consider hiring an external coding consultant after the first quarter of coding and billing ICD-10. If all looks good, only a brief annual check-up will be needed to ensure your ongoing peace of mind. For case-by-case situations, most consultants charge a nominal fee for telephone or email consultation. Having an expert available can be a good resource for coders.

Although the transition is over, there are likely still obstacles ahead in ICD-10. Our goal should be to be as prepared as possible to clear the hurdles with minimal stumbling. And should you stumble, we can code that:

- W18.49XA Slipping, tripping and stumbling without falling initial encounter;
- Y93.02 Activity, running;
- Y93.128 Other place in nursing home as place of the external cause;
- Y99.0 Civilian activity done for income or pay.

Caryn Adam is a senior consultant for Wipfli LLP, an IHCA associate member. For more information about Wipfli CPAs and Consultants, visit www.wipfli.com.



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New Memory Care Houses at Hancock Village

Offer Residents with Cognitive Impairment a

Safe and Comfortable Home

BY ASHLEY CALDWELL, MA

ancock Village, part of Hancock County
Senior Services Association, is located in
Carthage, Illinois. One of the few facilities
that provides services for the rural area of Hancock
County, Hickory Grove (a 22-unit supportive living
facility) opened in 2009 and has consistently had
a waiting list of more than 50 people for the past
several years. In order to accommodate the growing
needs of the area, while also taking current long
term care trends into consideration, the board of the
Hancock County Senior Services Association, along
with the management of Hancock Village, decided



to add on to the campus. On June 28, 2015, after years of planning and almost a year of building and furnishing, they celebrated the opening of Maple Grove, their two new memory care houses – the first of their kind in Illinois.

"The senior team and the board are visionaries when it comes to watching for the next wave of what's coming in long term care and trying to find ways to better serve our community," said Leia Morrison, executive director of senior services. "We always knew we wanted to do something with memory care, and we wanted to have the best."

In researching the best options, they came upon the small house concept for memory care, which really struck a chord with their group. After speaking with Jude Rabig, PhD, a national long term care consultant and expert in the small-house model of care, Morrison and company CEO Ada Bair worked with the architects for the project to come up with a design that would please everyone and accomplish their main goal – to provide the community with a memory care option where

residents can feel safe and secure in a comfortable environment.

Each of the 9,198-square-foot facilities is made up of 10 studio apartments surrounding a large center common area. The open design, complete with a generous kitchen area, dining area and several cozy seating areas, is warm and inviting and gives residents with a tendency to wander a wide open path and easy access to their rooms. Both houses at Maple Grove offer activity space, laundry facilities and a full-service salon. There is also a courtyard outside each building where residents can enjoy the outdoors and get some fresh air. In addition, each memory care house has specially trained staff on-hand 24/7 to ensure that the residents are getting the care they need.

Every single detail of these buildings, from the closet doors to the bathroom fixtures, from the paint colors and the floor layout to the furniture, the pillows and the massage table in the salon, was chosen with the residents in mind. The focus throughout the Maple Grove project was to create a home - one where individuals with memory problems and other cognitive impairments could feel safe and calm and well cared for. And, as the residents and their loved ones would be happy to assure you, they have absolutely succeeded.

"It's all about making it easier and less stressful for our residents," said Morrison.

For more information about Hancock Village, please visit www.hgtlc.com. ■



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Welcome to the new Resthave Home of Whiteside County

BY ASHLEY CALDWELL, MA

n 1955, a home for the aged in Whiteside County was just an idea being developed by the leaders of the local churches. They recognized the need for a nursing home in their community, a comfortable place for local seniors to get the care they needed, and formed a committee to get the ball rolling. In 1961 the facility, Resthave Home for Senior Citizens (now Resthave Home – Whiteside County), officially opened for business. In the years since it has undergone numerous changes, but the mission has remained steady: to provide quality nursing care for the chronically ill and elderly in a home-like atmosphere.

In the spring of 2011 the board of Resthave Home began contemplating another change - a major renovation of the facility. They started by considering the changing needs of the community - more complicated medical conditions to contend with, new health care technologies, the growing desire for private rooms, the consistent waiting list for the facility, etc. After taking a close look at their options, the board worked with facility management, including Executive Director Tami Tegeler, to develop a plan to bring new life to the home.

Once the design was in place, the real fun began – taking what was a 21,174-square-foot facility with 49 ICF nursing beds and 22 sheltered care units and transforming it into what is now a 71,798-square-foot long term care center with





70 SNF beds and 37 one-bedroom assisted living units. This massive renovation and construction project took three years to complete and proved to be a learning experience for everyone involved.

"There were a lot of challenges," explained Tegeler. "You have to be

sure to meet all of your life safety code regulations while making sure you don't impede your residents' quality of life. There were a lot of things that we had originally planned to do one way, and then as we moved through the project we figured out it wouldn't work so we had to switch gears."

The facility now offers some fantastic new features like a courtyard, more activity space, a library, several cozy lounges and other social areas, as well as a chapel...

One of the biggest challenges of a project of this magnitude, she explained, was balancing the work that needed to be done with the best interests of the residents. As areas of the old facility were gutted and renovated, and new construction was completed, residents had to be relocated and extra efforts had to be made to ensure their comfort and care. The Resthave Home board was very hands-on throughout the project, and Tegeler and other facility managers worked closely with the staff to keep everything running smoothly.

"There was some anxiety among the staff in the beginning," Tegeler said, "but when it came to caring for the residents and moving them to different areas as the project progressed, they really stepped up to the plate and remained positive about it all. They embraced it really well."

Now, after three years of renovation and construction, of noise and dust and shaking floors, the renovation and expansion project is complete, and life at Resthave Home is getting back to normal - the new normal. The facility now offers some fantastic new features like a courtvard, more activity space, a library, several cozy lounges and other social areas, as well as a chapel, which has been a favorite among the residents. The board and staff of Resthave, as well as the local community, are thrilled with the end results of the project, and the residents couldn't be happier with their new home, which, explained Tegeler, is really what makes it all worth it in the end.

"That's what we focused on these past three years," she stated, "what we're giving our residents and what it will do to improve their quality of life. That's what it's all about."

For more information about Resthave Home, please visit www.resthave.net.



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IHCA Convention and Expo Celebrates Ongoing Transformation of Long Term Care

he 65th Annual IHCA Convention and Expo – The Changing Face of Long Term Care – was held September 14-17, 2015, in Peoria, IL. The theme this year honed in on what it is like to live and work in a long term care facility – a perpetual state of change. Long term care is rarely static. It is a profession that keeps those who choose it as their career on their toes at all times, requiring them to be on the lookout for advances in care techniques and technologies, as well as changes in rules and regulations, while always keeping the needs and desires of the residents in mind.

There are a lot of pieces to the long term care puzzle - and the Illinois Health Care Association (IHCA) strives to continually offer the support, training and services that providers need to make sure those pieces fit together seamlessly. The IHCA staff is always looking for ways to improve upon the services they offer, and convention is no exception. This year the event reflected its theme as a number of changes were put into place. And, if feedback from the 1,100 attendees (representing 116 facilities), exhibitors from more than 150 companies and the IHCA Board of Directors is any indication, the work has not been in vain.

"It's such a privilege for us to put together this convention and expo for the dedicated professionals who attend each year," said David Voepel, IHCA's executive director. "The positive energy and the camaraderie among those present are second only to the excellent educational opportunities!"

On Monday, September 14, the four-day event started off with the annual IHCA PAC/The Center PAC Golf Outing at WeaverRidge Golf Club. The 86 golfers who took to the links that day enjoyed the gorgeous weather while taking part in some friendly competition with their peers. Later that evening, IHCA President John Vrba greeted those attendees already in town at the President's Welcome Reception at the Peoria Civic Center.

Tuesday morning started off with the two-hour General Opening Session and Awards Ceremony, where Mr. Vrba presented the Annual Volunteer and Staff Awards, recognizing the nearly 100 outstanding staff members, volunteers and specialty programs that were nominated this year from IHCA member centers. Awards were given in 16 categories, including staff



Monday, September 14, proved to be a gorgeous day for the annual PAC golf outing.



The Peoria Honor Guard was present to start off this year's General Opening Session.



Former IHCA President Holgeir Oksnevad led the way at this year's 5K.



The 2015 Expo was a great opportunity for LTC professionals to see the latest and greatest in technology and services.



Representatives Tom Demmer and Brandon Phelps received 2015 Legislator of the Year awards from IHCA's Public Policy team.



IHCA's 2015 Volunteer of the Year Dicksie Blankenship received a standing ovation for her more than 50 years serving in long term care.

awards ranging from Housekeeping Professional of the Year to Administrator of the Year, as well as specialty awards such as Associate Member of the Year and Photograph of the Year. The sheer amount of experience, dedication, compassion and innovation represented by these award winners, as described by the individuals who nominated them, was incredible. Following the awards, this year's keynote speaker, Allison Massari, moved the audience with her first-hand experience of the importance of compassionate care.

"Inspiring," said Vrba. "That is the one word that immediately comes to mind after listening to Allison kick off our convention. You could have heard a pin drop throughout her presentation."

The expo (formerly trade show) opened that afternoon, with new hours, a new floor plan and a new manager running the show. Kelli Showalter, IHCA's education, conference and event manager, took over the expo duties in April when the former trade show manager, Chris Gergeni, left IHCA to pursue a new opportunity. Showalter, who has previous experience running trade shows and has been involved with other aspects of the annual convention throughout her tenure at IHCA, was thrilled to have the opportunity to take on this new role and jumped right in to make sure this year's event went off without a hitch.

"I'm exciting to continue to become more involved with this side of convention and our association," stated Showalter. "It has been a pleasure working with our vendors and getting to know them through this process. I look forward to working on next year's expo, as well as some of our smaller events throughout the year."

After educational sessions wrapped up for the day it was time for the 3rd annual PAC 5K, which was named for former IHCA President Holgeir Oksnevad to pay homage to his ongoing battle with leukemia. The race gets bigger and better each year, and this year more than 60 individuals gathered at the Peoria Riverfront to take part. It has since been announced that the race will no longer be called the Holgeir Oksnevad 5K, but will now be known as the Oksnevad 5K, to honor both Holgeir and his wife, Karen, who is facing her own battle with cancer. In addition to the name change, IHCA PAC has donated \$1,300 to the Leukemia Research Foundation in support of these two kind and generous individuals.

Wednesday morning IHCA and the Long Term Care Nurses Association (LTCNA) celebrated the outstanding efforts of long term care nurses at the Ovations breakfast. The 2015 Nursing Awards were presented by LTCNA President Becky Wallace, followed by a keynote address by motivational speaker Kelly Swanson. Swanson's unique blend of humor and inspiration was the perfect way to commend these nurses for their dedication and hard work.

The expo concluded later that day and the Legislative Reception was held that evening at the Peoria Marriott Pere Marquette. Representatives Tom Demmer. Brandon Phelps and Elgie Sims, Jr., and Senator Dave Syverson were honored at the reception for their commitment to long term care issues. Educational sessions ended Thursday afternoon, bringing the 65th Annual Convention & Expo to a close.

IHCA would like to offer its gratitude to everyone who helped make this year's event a success. Thank you to the IHCA Board of Directors, the IHCA Education, Convention and Trade Show Committee, the IHCA staff, all of our session speakers, expo exhibitors, sponsors and attendees. IHCA would also like to thank the staff at the Peoria Civic Center, the Peoria Area Convention and Visitors Bureau and the Peoria Marriott Pere Marquette, the Courtyard Peoria Downtown and other local hotels for their assistance with this event. \blacksquare

IHCA Appoints New

PAC Chairman

HCA President John Vrba recently appointed a new chairman of the IHCA Political Action Committee (IHCA PAC) to help coordinate their activities throughout the year. Frank Caruso, director of post-acute services for Bridgemark Healthcare, was chosen to chair the IHCA PAC in July. His extensive health care knowledge and leadership experience has allowed him to slip seamlessly into the new role.

Caruso began his career in longterm care/health care more than 25 years ago and has held a variety of positions in the years since. From wheel-chair pusher to assistant controller, from nursing home administrator to chief financial officer, he's done it all. "It is an honor to be appointed to serve in this capacity for the IHCA PAC. Now is a very challenging time for our profession in Illinois, and the IHCA PAC is committed to working collaboratively with the owners/ operators and our partners to secure solid footing for our future."

Caruso has worked in both skilled nursing facility and hospital environments, as well as for-profit and not-for-profit organizations.



Additionally, he is a member of the board of the Illinois Medical Directors Association, and he currently serves as the treasurer for the board of Bald Knob Cross of Peace, a non-profit organization in Alto Pass, Illinois.



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IHCA Standing Committees & Task Force Groups play a key role in the operation of our association. They are tasked with the responsibility of reviewing the policy of all IHCA functions may submit policy recommendations to the Board of Directors for review and resolution.

IHCA Standing Committees & Task Force Groups

- Administration/Finance & Operations Committee
- Education, Convention & Trade Show Committee
- IHCA PAC (Political Action Committee)
- Awards Task Force (IHCA Annual Awards Program)
- Legal Committee
- Public Policy Committee

For more information about these committees, or to fill out the standing committee and task force commitment form, please visit the committees page on our website www.ihca.com. Contact our office (800-252-8988) if you have any questions or want to serve on any of our committees. Sign up today and become a more active member of IHCA!



From IHCA's New Development Director

Hitting the Ground Running

September 1, 2015, was a big day for me. Starting as the development director for IHCA was exciting, scary and sure to be a challenge. After serving in state government for 12 years, I wasn't really certain what to expect. I was used to the ups and downs of budget battles, managing large staffs, fielding questions from elected officials, planning high-profile events and "special projects" (code for whatever everyone else in the agency didn't want to do), but what would life be like at IHCA?

I've hit the ground running and so far...it's FANTASTIC! I jumped right into convention preparations, started getting to know the inner workings of the association, experienced my first convention and expo – an exhilarating and exhausting four days – and met many of you, the members who make this organization such a strong voice for the LTC community.

I would be remiss if I didn't mention the IHCA staff and board. The commitment, enthusiasm and passion I've seen these past weeks is beyond impressive. I might be new to this profession, but I know dedication and love for the job when I see it. Being associated with such a professional group of people is a privilege.

On a personal level, I'm the very proud mother of a great little guy named Stanley. In my spare time, I'm active in the PTO, serve on the board of the Central Illinois March of Dimes, am obsessed with food (growing, cooking and eating), enjoy traveling whenever and wherever possible and love spending time with my family and friends. I've worked in various industries across the country, from Hollywood to Chicago, and think I've found my home here at IHCA.

Thanks to everyone for the very warm welcome! If we haven't met yet, expect a phone call or email from me in the near future. I'll be traveling the state to meet as many of you as possible. In the meantime, please feel free to call me at 217-527-3609 or via email at kdicenso@ihca.com. I look forward to working with you!



Best regards,

Kristin DiCenso IHCA Development Director

Kristin DiCenso brings a wealth of knowledge and experience to the IHCA staff. She comes with a varied background that includes several positions in state government and the political arena. DiCenso's strong work ethic and drive to succeed will make her a wonderful addition to the association. For more information about Kristin's duties at IHCA, or any other member of the staff, visit www.ihca.com/home/staff-contacts/.

My InnerView Offers IHCA Members New Opportunities to Improve Resident Care

n today's long term care environment, providers are constantly working



to navigate a stormy sea of rules, regulations, evolving care techniques and changing technologies. To help providers find their way, Illinois Health Care Association (IHCA) works closely with a select group of vendors that offer significant discounts on key services for member centers.

IHCA's Preferred Vendor program provides exclusive agreements for products and services that help facilities save dollars as well as improve their operations. My InnerView by National Research Corporation was approved by the board of directors in June to join the ranks as IHCA's preferred vendor for data measurement and quality improvement.

"We feel strongly that our measurement and improvement solutions will enable providers in Illinois to gain a better understanding of their care and appreciate that their experience and service delivery is the number one priority of the health care system," said Rich Kortum, director of strategic partnerships at National Research. "We look forward to joining IHCA on this journey to help their members provide quality care to their seniors."

For more than 30 years, National Research has been at the forefront of patient-centered care. Today, the company's focus on empowering customer-centric health care across the continuum extends patient-centered care to incorporate families, communities, employees, senior housing residents and other stakeholders.

National Research understands that unless tools are designed to measure what truly matters to patients, the data collected may not lead to effective improvement of the quality of care.

My InnerView by National Research helps improve quality in facilities across the care continuum, including skilled nursing homes, assisted living communities, continuing care retirement communities and independent living communities. They provide educational resources, action plan templates and easy-to-use prescriptive reporting tools. They also offer their customers access to their dedicated team of professionals with expert knowledge of long term care who can help customers reach specific strategic goals in the quality improvement process.

"My InnerView will help our member centers to improve quality of care and care transitions, as well as increase their partnerships with hospitals and other providers, which is a huge benefit in the current long term care environment," stated IHCA Executive Director David Voepel. "We are very excited to join forces with National Research and look forward to strengthening this partnership for the benefit of our members." ■



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