Model HIPAA Privacy Notices Now Available  
By Tammy Schroeder

The Office for Civil Rights (OCR) and the Office of the National Coordinator (ONC) for Health Information Technology teamed up to develop 3 models for Notice of Privacy Practices for health care providers to utilize and to communicate with their residents to maintain HIPAA compliance.

HIPAA gives residents the fundamental right to know what a health care providers privacy practices are and to be informed of just what their privacy rights are when it comes to their personal health information. Because of this, health care providers are required to develop and distribute a Notice of Privacy Practices. The Notice must describe how the provider ensures that the residents’ privacy is protected and they know rights under HIPAA. The Notice has to be made available to anyone who asks to see it and it must be prominently posted on any website maintained by the health care provider.

OCR and ONC developed the three models after receiving feedback from many entities asking for guidance on how to develop a notice that their residents and patients can understand. The models also reflect recent HIPAA regulatory changes in the Omnibus Rule. The options are:

- Notice in the form of a booklet;
- A layered notice with a summary of the information on the first page and then the full content on the following pages;
- A notice with the design elements in the (continued on pg. 2)

New Healthcare Laws Take Effect  
By Charles E. Wilbrand

On September 6, 2013 most of the laws the Nebraska State Legislature passed during the 2013 legislative sessions became effective. Among those bills were LB 459 and LB 326. In order to prevent several communicable diseases, LB 459 requires acute hospitals, intermediate care facilities, nursing facilities and skilled nursing facilities to offer on-site vaccinations of diphtheria, tetanus, and pertussis prior to a patient or resident’s discharge. LB459 does not require the facilities to pay for the cost of the vaccinations; it can be passed onto the resident.

Legislative Bill 326 amended the Automated Medication Systems Act to allow long-term care facilities to register and operate automated medication systems which will be licensed as a separate pharmacy. In order for a nursing home to have an automated medication system, a pharmacist in charge of a (continued on pg. 3)
According to the Centers for Disease Control and Prevention (CDC), between 19 and 21 million Americans- 1 in 15 people - are infected each year with the norovirus (aka the winter vomiting bug) which causes sickness and diarrhea. Most people make a full recovery within a few days, but as many as 800 die each year in the United States, according to the CDC.

The virus is highly contagious and can spread from person to person through infected food or water or contaminated surfaces. Significant outbreaks occur in health care facilities and other places where people are in close quarters. The best prevention is proper hand washing, but the norovirus is so contagious that people can become ill even through contact with viral particles in the air. Outbreaks typically occur from November to April, peaking in January.

Researchers have announced that clinical tests indicate that a potential norovirus vaccine is highly effective in reducing symptoms of the infection. The study involved 98 people who drank water dosed with norovirus, 50 of whom received (continued on pg. 3)

Bill Could End the Three Day Requirement
By Tammy Schroeder

Rep. Jim McDermott (D-WA) has introduced a bill that would eliminate the requirement under Medicare Part A for a patient to have had a three day hospital stay prior to receiving skilled nursing care. The bill would also eliminate issue of hospitals keeping patients for extended stays under observation status.

McDermott’s bill would give the doctor or other qualified health provider authority to certify that there is a need for skilled nursing care. It would give the Department of Health and Human services the task of developing a uniform set of requirements that would outline for the physician how to determine if the patient is in need of skilled nursing.

The American Health Care Association is one of several organizations critical of the three-day rule and the AHCA is praising McDermott for talking the issue with this legislation.
the injected vaccine, according to the Infectious Diseases Society of America. Among those who received the vaccine, 26 people were infected, the researchers said. In the other group, 29 people were infected. However, only 10 people who were vaccinated developed mild, moderate or severe vomiting and/or diarrhea, compared with 20 people in the placebo group. The vaccine achieved a 52% reduction in symptoms.

Long-term care facilities bore the brunt of a norovirus outbreak that began a year ago, according to the Centers for Disease Control and Prevention.

There is also a less-intrusive and potentially highly effective treatment for Clostridium Difficile (C. diff). C. diff causes diarrhea linked to 14,000 American deaths each year. Those most at risk are people, especially older adults, who take antibiotics to treat other infections, which eventually wipe out good or beneficial gut bacteria. A microbiota or fecal transplantation can reduce the effects of C. diff.

Pills are made by putting fecal matter through a centrifuge and filling capsules with the resulting substance. These tiny capsules containing healthy microbes extracted from stool samples of family members or donors can now be used as opposed to the more intrusive method of handling tubes down the throat or enemas.

According to Thomas Louie, M.D, the Canadian physician who created this process, patients with C. diff take dozens of the pills that he currently makes exclusively as needed. He said that out of 27 C. diff patients who have received this treatment, no one has had a recurrence, The Associated Press reported.

“The small cheer and great welcome makes a merry feast.”

William Shakespeare

Clinical Treatments on the Horizon (continued from pg. 2)

Long-Term Care Workers Don’t Get Shot By Mary T. Carey

The flu shot, that is. The Centers for Disease Control reported last month that while 72% of healthcare workers overall were vaccinated against the flu last year, only 59% of long-term care workers received flu shots.

High incidence of flu cases hit in late 2012, about a month earlier than anticipated. Seniors were hit the hardest. The hospitalization rate for those 65 and older was the highest recorded in eight years.

Although the flu vaccine doesn’t guarantee complete protection from the virus, seniors who get vaccinated are more likely to have milder symptoms. Less sick time for employees, less sick time for seniors. The flu shot is a win-win.

New Laws (continued from pg. 1)

licensed pharmacy must annually license the automated medication system. It is the responsibility of the pharmacist to ensure that the automated medication system complies with Federal Drug Enforcement Administration and State Law. The long-term care facility must comply with the policy and procedures that the pharmacist puts in place. If a long-term care facility has an automated medication system the residents are not forced to receive their prescriptions from the automated pharmacy, they still have the choice to choose their pharmacy.