



Anti-Psychotic Drug Reduction in Skilled Nursing Facilities Through Telepsychiatry

Encounter Telepsychiatry, a division of Encounter Telehealth LLC, provides behavioral and mental healthcare in long term care communities.

A study of 40 partner Skilled Nursing Facilities showed a reduction in the off-label prescribing of anti-psychotics from over 18% in 2015, prior to working with Encounter, to approximately 12%.

About Anti-Psychotics



The Centers for Medicare and Medicaid (CMS) estimates that only a small fraction of long-term residents will ever have a condition warranting the use of anti-psychotics, however they are repeatedly over-prescribed.

Elderly patients with dementia-related psychosis who are treated with anti-psychotics are at a largely increased risk of death. Moreover, anti-psychotics do not improve functionality, care needs, or quality of life.

Reasons for High Percentages

Without access to regular, specialized psychiatric care, residents may be administered anti-psychotics off-label to treat their symptoms. The nurses, caretakers, and staff that work in these facilities are constantly exposed to physical and emotional exhaustion, leading to staff burn-out. Turnover rates in long-term care are over 55% for nurses, and up to 100% for CNAs, annually.

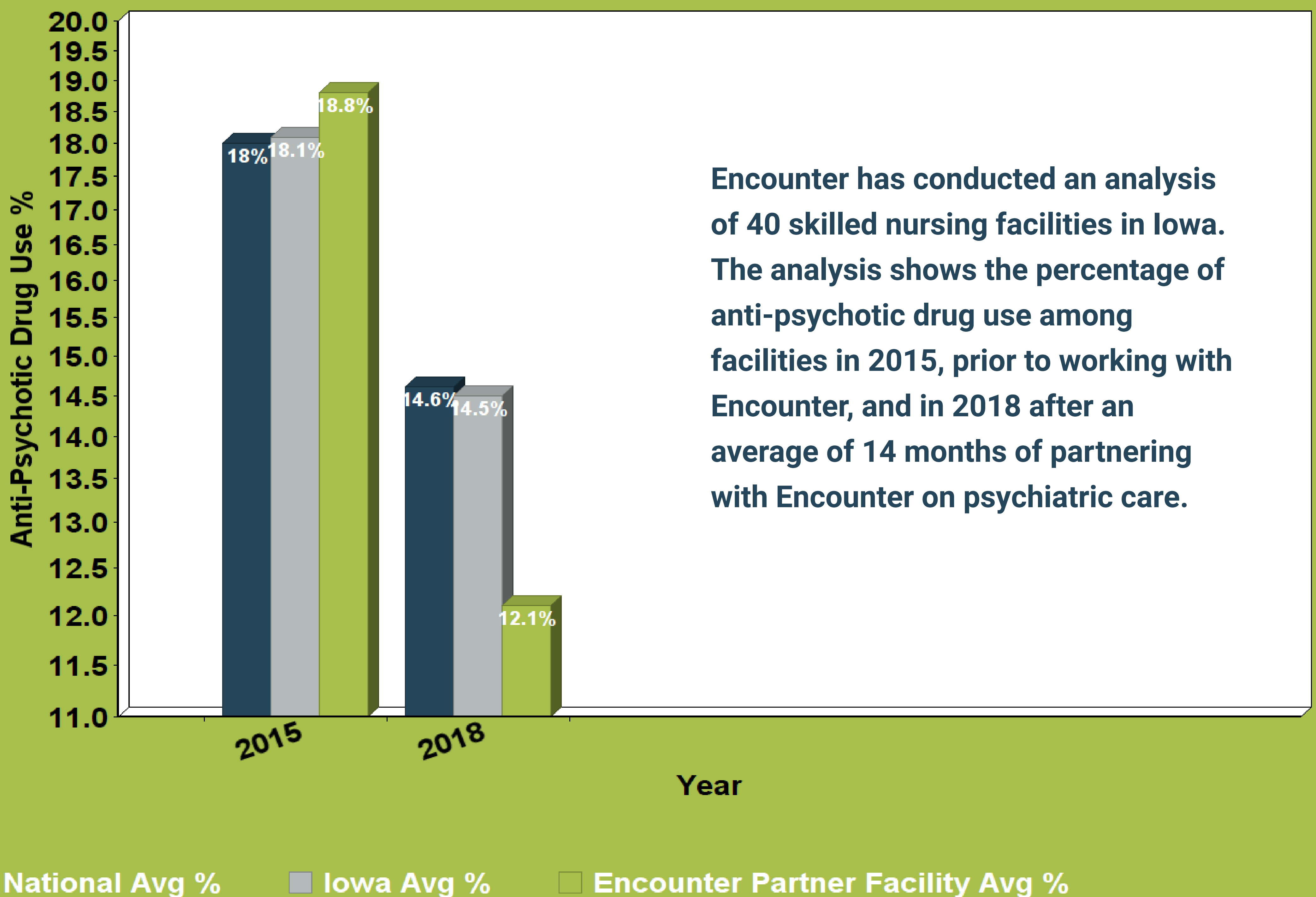
There is an ever-growing gap between supply and demand for Skilled Nurses, and the stress that comes with under-staffing is notable.

In an industry already strained, anti-psychotics have been used for decades as a first resort in aggressive and physically violent patients and patients in cognitive decline.



Anti-Psychotic Reduction in Iowa

Anti-Psychotic Drug Reductions 2015-2018

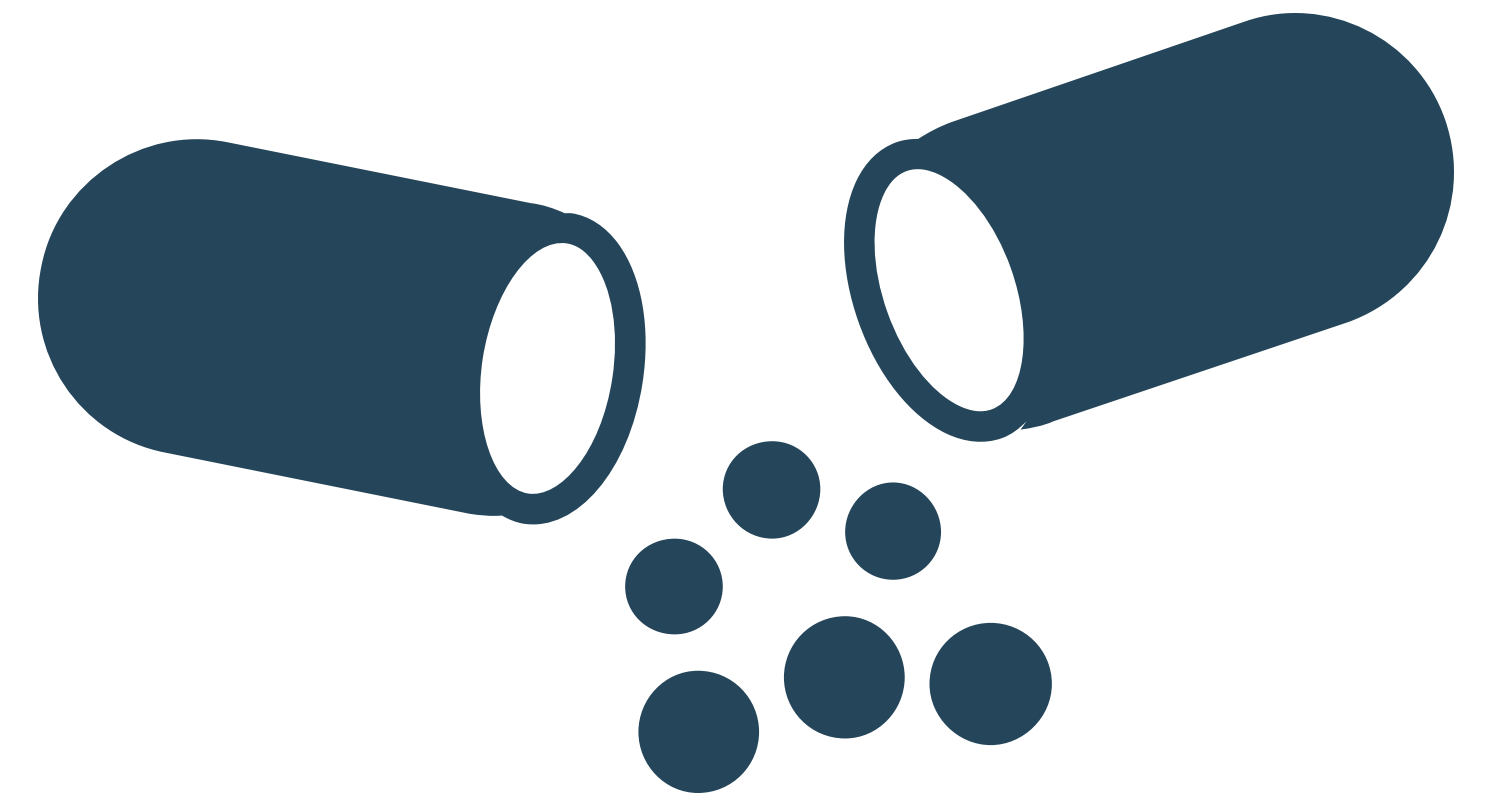


Of the 443 nursing homes in Iowa, the 40 facilities that Encounter partners with have shown an average 6.7% reduction in the use of anti-psychotics from 2015 to 2018. Some facilities have shown large reductions, including one facility that went from 28.6% of anti-psychotic drug use in 2015 to a low 7.3% in 2018. That is a 21.3% decrease in the usage of anti-psychotics, and nearly one half of the current national average.

Encounter's partner facilities in Iowa had an average 12.1% of residents on anti-psychotic medications as of 2018, which is 2.4% below the average of total Iowa nursing homes.

PENALTIES & INCENTIVES

In 2011, CMS reported that 83% of atypical antipsychotic drug claims were for elderly nursing home residents diagnosed with conditions for which the drugs' use was not approved by FDA. 88% of those drug claims were for residents with dementia.



In October of 2012, CMS partnered with federal and state agencies, nursing homes, other providers, advocacy groups, and caregivers to improve comprehensive dementia care. This is known as "The National Partnership to Improve Dementia Care in Nursing Homes", and facilities were notified that there would be a penalization for lack of reduction in anti-psychotic medication distribution. The maximum penalty is a 2% Medicare reduction.

However, facilities that prove a reduction in their use of anti-psychotics are eligible for an incentive, adding a maximum bonus of 1.6% to Medicare payouts.



WHAT WE OFFER

Our providers are focused on administering compassionate, consistent, and quality care.

Many of the facilities we service are skilled nursing facilities with patients suffering from dementia, Alzheimer's, and schizophrenia.

EASING STAFF STRESS

Encounter reduces staff stress by providing healthcare within the convenience of the facility.

Care providers are no longer required to organize transportation, be removed from the facility for hours, wait in traffic or in doctor's offices, etc.

PSYCHIATRIC MEDICATION MANAGEMENT

Through Encounter, patients receive medication management services by Psychiatric Mental Health Nurse Practitioners. This ensures proper medication management from the convenience of the facility.

EVALUATIONS

Evaluations provide patients with proper diagnoses, and can therefore help treat their issues accordingly.

THERAPY

Many studies have indicated that patients do better when medication and talk therapy are used together, than when either one of them is used alone.

Therapy has been proven to be beneficial to patients with dementia and cognitive decline.

STAFF TRAINING

Proper training of staff can ensure quality healthcare and safety for everyone.

When staff is trained to use alternative, non-pharmacological interventions, studies have shown statistical benefits in patients with dementia.

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/National-Partnership-to-Improve-Dementia-Care-in-Nursing-Homes.html>

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