Denver — If federal stimulus money to the tune of $44,000 per physician has warmed more solo and small group practices to the idea of adopting electronic health record systems, the new Health Insurance Portability and Accountability Act has put them on hold.

“Government spending, however, doesn’t guarantee a positive return on investment,” said Mr. Hinkley. “We’ve seen practices completely abandon their plans.”

In the wake of the HITECH law, the American Medical Directors Association (AMDA) has warned that the new security regulations could “short circuit” electronic health record (EHR) systems.

“Effective enforcement of HIPAA regulations takes time,” said Mr. Hinkley. “If the regulations are implemented fully, our members’ practices will have to reassess their decision to buy EHRs.

The Health Information Portability and Accountability Act (HIPAA) guidelines were designed to ensure that patient health information could be shared among authorized health-care providers, while still providing personal privacy. The law requires health-care providers to adopt new standards for the electronic transmission and storage of personal health data.

However, the regulations also include severe penalties for any unauthorized use of health information.

Mr. Hinkley noted that the new rules pose a significant challenge to long-term care providers.

“Long-term care providers were not included in the HIPAA regulations,” said Mr. Hinkley. “We’ve been told that if a breach occurs, we will have to deal with similar regulations as if we were doctors.”

The new regulations will affect all practices covered by HIPAA, which includes nearly every medical practice.

“Many practices may find that the new regulations make EHRs too expensive,” said Mr. Hinkley. “In the meantime, they’ll have to continue using paper records.”

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The Truth About Psychotropic Drugs

Psychotropic medications are those that affect the mind and emotions. They include antipsychotics, antidepressants, and anti-anxiety drugs. When most people talk about psychotropics, they are referring to the antipsychotics. These medications generally are used to treat serious mental illnesses, such as psychosis. Sometimes these drugs are needed in long term care facilities to treat behaviors that are dangerous to residents/patients and caregivers.

It is important to know the truth about these medications so that you can work with the physician to decide whether they are right for your family member/friend. First, nursing facility staff cannot give a psychotropic drug without a physician’s order and an appropriate diagnosis. No one can give your family member/friend these drugs just because he/she is restless or upset.

Your family member/friend and/or his/her legal decision maker (e.g., an adult child with power of attorney) must be told about the medication’s risks. The doctor will explain that some psychotropics can make a person dizzy, drowsy, and confused. Some of these drugs can cause tardive dyskinesia, movement such as rocking or chewing that the person can’t control or stop, and Parkinson’s disease-like symptoms (trembling, drooling, and rigidity). The person or his/her decision maker may be asked to sign a consent form stating that he/she/they understand(s) the risk and approves the drug’s use.

By working with the doctor, you can make sure that your family member/friend only gets the medications he/she needs and only for the time period he/she needs them.

Questions to Ask Your Physician:

• Are there any treatments besides drugs that might help my family member/friend? How can I help?
• Why is this drug needed? How will it help?
• What would/could happen if my family member/friend doesn’t take this medication?
• What non-drug treatments have been tried?

What You Can Do:

• Talk with the physician and facility staff about what might be causing behavior problems and how to solve them. (For example, if dad is wandering during the day, it may help staff to know that he was a postal carrier and spent his days delivering mail.)
• Bring pictures and other life mementos to the facility; help staff to know your family member/friend—hobbies, likes/dislikes, fears, etc.
• Work with staff to make sure your family member/friend gets foods, activities, etc. that bring them pleasure. Bring him/her gifts and things you know will make him/her happy.
• Watch for/report any medication side effects you see to the nurse or physician.

For more information:

• Psychotropic Drug Use in Nursing Homes: www.globalaging.org/health/us/2005/ednatri.png
• Mr. EF, Who Throws Things at Staff in Anger: www.caringfortheages.com/article/S1526-4114(09)60233-X/fulltext
• Patient-Centered Approach Sharpens AD Care: More Facilties Balance Pharmacologic and Nonpharmacologic Methods to Slow Cognitive Decline: www.caringfortheages.com/article/S1526-4114(07)60088-2/fulltext

Caring for Consumers

Lory Bright-Long, MD, CMD, shares some facts about psychotropic drugs

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