OUR FOUNDATION
By Victoria Hann, MPA, CFRE

Donor Recognizes the Unique Benefits of Giving to the Foundation for PALTC

"Example is not the main thing in influencing others. It is the only thing." — Dr. Albert Schweitzer

Ken Brubaker, MD, CMD, often references Dr. Schweitzer’s sentiment when contemplating his own personal and professional values and actions in leadership. Dr. Brubaker exemplifies this annually through his philanthropic support of the Foundation for Post-Acute and Long-Term Care (PALTC) Medicine.

Dr. Brubaker donates a portion of his annual required IRA distribution to the Foundation’s Legacy Fund each year, thereby benefiting an organization whose mission aligns with his values while reducing his tax burden. “Each year I must take my annual IRA distribution, and the benefit of reaching 70½ years of age is that I can donate this to a cause I feel strongly about while alleviating the 20%-30% taxes I would incur otherwise,” he explains. “It’s a win-win, and I can’t help but feel others would benefit from the knowledge and practice.”

When Dr. Brubaker began his geriatrics fellowship in the 1980s, he was in search of like-minded professionals serving the older adult population. He discovered the wonderful world of peers at AMDA – The Society for Post-Acute and Long-Term Care Medicine and began his long journey with the Society and now with the Foundation as a volunteer leader. Dr. Brubaker dedicated seven years of service to the Society’s Board of Directors; then, on the invitation of Paul Katz, MD, CMD, he joined the Foundation’s Board of Directors.

At the Foundation Dr. Brubaker embraced his role as a generous donor, recognizing the unique mission that the Society and the Foundation serve in supporting educators and practitioners to improve the care of patients and residents in PALTC. “I believe, like many others, that AMDA’s mission in providing education to improve patient care in this unique field, coupled with a focus on advocacy, makes a critical difference and will continue to provide a legacy of better care through well-trained and engaged practitioners.”

Dr. Brubaker is involved with several worthy nonprofit organizations but recognizes that supporting the Foundation, on behalf of himself and his wife, uniquely contributes to a legacy of excellence in PALTC. The Foundation is the only philanthropic entity dedicated to the PALTC clinician, with goals of expanding the geriatrics workforce, demonstrating the value of well-trained and engaged PALTC clinicians, and improving quality of care for our vulnerable population by supporting PALTC education, research, and clinical guidance.

Dr. Brubaker and his wife are proud of their support of the Foundation and are encouraged that it is making a meaningful difference through the projects it funds. He hopes that, by their example, this philanthropic support will grow and continue to shape a strong resource base for the clinicians and practitioners serving those in need in PALTC.

The Foundation has funded these projects:

* The Futures Program, offering over $1 million in support of 1,262 graduates over the last 20 years

* PALTC physician quality measure development

* AMDA mobile phone app

* “Drive to Deprescribe” initiative

* AMDA COVID-19 Vaccination Toolkit

* AMDA Annual Conference speakers

* Yearly awards recognizing PALTC leadership

For more information on how you may use your IRA or other giving opportunities to benefit the PALTC field, please visit www.paltcfoundation.org. All gifts are gratefully received.

Ms. Hann is the director of the Foundation for Post-Acute and Long-Term Care Medicine.

SPOTLIGHT ON POLICY

MIPS 2021 Data Submission Period Is Now Open

The Centers for Medicare & Medicaid Services (CMS) has opened the data submission period for Merit-based Incentive Payment System (MIPS) eligible clinicians who participated in the 2021 performance year of the Quality Payment Program (QPP). Data can be submitted and updated until 8:00 p.m. ET on March 31, 2022.

Clinicians can follow the steps outlined below to submit their data:

2. Sign in using your QPP access credentials (see below for directions).
3. Submit your MIPS data for the 2021 performance year, or review the data reported on your behalf by a third party.


Note: Clinicians who are not sure if they are eligible to participate in the QPP can check their final eligibility status using the QPP Participation Status Tool: https://qpp.cms.gov/participation-lookup. Clinicians and groups who are opt-in eligible will need to make an election before they can submit data. (No election is required for those who don’t want to participate in MIPS.)

CMS Makes Nursing Home Staffing Data Available

For the first time ever, the CMS has begun posting staff turnover rates and weekend staffing levels for nursing homes on the Medicare.gov Care Compare website: https://www.medicare.gov/care-compare/search.

CMS calculates staff turnover as the percentage of nursing staff and number of administrators who stopped working at a nursing home over a 12-month period. The nursing staff included in this measure include licensed nurse staff such as registered nurses (RNs), licensed practical and vocational nurses, as well as nurse aides who work under the direction of licensed nurse staff and provide much of the day-to-day care for nursing home residents such as eating, bathing, grooming, and toileting. Weekend staffing is the level of total nurse and RN staffing on weekends provided by each nursing home over a quarter.

CMS has explored the relationship between staff turnover and quality of care, and a preliminary analysis indicates that as the average staff turnover decreases, the overall star rating for facilities increases, suggesting that lower turnover is associated with higher overall quality.

Facilities with lower nurse turnover may have more staff who are familiar with each resident’s condition and may be more able to identify a resident’s change in condition sooner. The facility may be able to implement a plan to avoid an adverse event such as a fall for a patient. Lower administrator turnover may have a positive impact on leadership stability, direction, and operations, which may help the staff provide more care consistently and effectively to residents.

For more than 10 years, CMS has been posting information on facility staffing measures on the Medicare.gov website, including the average number of hours worked reported for nursing staff per resident per day. These staffing measures are also used to calculate each nursing home’s star rating for the staffing rating domain as part of the Nursing Home Five-Star Quality Rating System (https://data.cms.gov/provider-data/).

Posting this new information will not create any additional reporting requirements for nursing homes. There is nothing new that nursing homes need to do or report. CMS is using the same data that facilities have been reporting since 2016 as part of the Payroll-Based Journal Program (https://go.cms.gov/3p3W7rA). The data are submitted to CMS electronically, and most nursing homes export their data directly from their automated time-keeping or payroll systems.

AMDA – The Society for Post-Acute and Long-Term Care Medicine encourages all members to review their data. The Society continues to work with CMS to improve transparency around medical direction information. Despite previous requests, CMS has not made any public information available in terms of medical director education, training, or hours spent in the facility. The Society believes this information is vital to consumers and therefore must be included on the Care Compare website.

The January 7, 2022, CMS guidance memo “Nursing Home Staff Turnover and Weekend Staffing Levels” can be found here: https://go.cms.gov/3tNVFEo.