

# Provider Association Update

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# Regulation Clarifications

On Physician Visits and  
Medical Director Authority

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“In 2019, Ryskina and colleagues found that 1 in 10 nursing home patients never see a physician during their stay, and those patients are far more likely to return to a hospital or die.” *[based on 2.4 million Medicare post-acute residents]*

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In latest study...“The researchers found the risk of rehospitalization increased from 3% to as much as 35% for each additional day that a patient waited to be seen by a doctor or other clinician.”

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### New Study Findings in JAMDA

<https://www.mcknights.com/news/the-doctor-will-see-you-when-regs-reimbursement-delay-snf-patient-access/>



When  
should a  
new admit  
be seen?

**Develop written policies that are approved by the medical director** to coordinate and designate responsibility when more than one practitioner is treating a resident.

**May allow practitioners to utilize telehealth** for the performance of any task required by these regulations except those tasks which specifically require a face to face evaluation.

**All residents, within seven days of admission, receive a face to face evaluation by a practitioner** who provides the facility with sufficient information to validate the admission.

NOTE: If the resident was thoroughly assessed in the 24 hours immediately prior to the resident's admission to the facility **by a practitioner (or his/her associate) who will be involved in the resident's continuing care**, and documentation of that evaluation accompanies the resident upon admission, that evaluation satisfies the criteria required in section 8.1(A).

# Colorado Regs for Physician Visit after Admission

SECTION 8 MEDICAL CARE SERVICES

8.1 PRACTITIONER CARE

# Who has to do the physician visits?

## Comprehensive Medical Evaluation (Face-to-Face):

- ✓ 30 Days from Admission
- ✓ Yearly

*(non-skilled facilities) The comprehensive medical evaluation may be performed by either a physician or a non-physician practitioner who is not a facility employee.*

## Physician Visits:

- ✓ Every 30 days for the first 90 days after admission
- ✓ At least once every 60 days thereafter.

**24-hour practitioner coverage must be available to promptly assess any significant changes of condition.**

**Medicare Facilities:**  
The initial comprehensive medical evaluation **shall only be performed by a physician**  
(federal law)

# The medical director is responsible for:



Acting as a liaison between the facility and admitting physicians RE: prompt writing of orders and responding to requests by facility staff



Consulting on the development and implementation of resident care policies



Establishing standards governing the conduct of physicians admitting residents to the facility



Consulting on the development and implementation of a procedure to provide care in emergencies when a resident's practitioner is unavailable



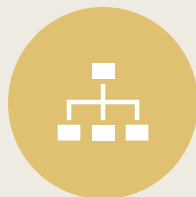
Reviewing accidents and hazards



Participating in pharmaceutical advisory committee deliberations



Participating in the psychotropic medication review committee



Chairing or co-chairing the quality management committee (QAPI)

[Federal Regulations](#) [pg. 686]  
[State Regulations](#) [Ch. 5, section 8.2]

# A Note on Facility Closures

FLATIRONS REHAB – POST-ACUTE ONLY MODEL      DEMONSTRATES  
IT'S NOT ALWAYS DUE TO FINANCIAL DIFFICULTIES OR QUALITY CONCERNS

OFTEN PROPERTY IS HELD BY ANOTHER ENTITY, AND THE OPERATION IS  
ASKED TO CLOSED SO OWNERSHIP CAN SELL TO ANOTHER BUSINESS

PRIVATE EQUITY AND REAL ESTATE INVESTMENT TRUSTS ARE UNDER A  
LOT OF SCRUTINY, BUT THIS IS OFTEN THE ONLY WAY TO FINANCE LTC

# Hot topics for State Legislation so far...

Finding accommodations for people trying to enter the workforce with criminal record (non-violent offense + professional license)

De-stigmatizing people with opioid abuse

- Placement for Methadone prescribed individuals
- Ensuring Substance Use Disorder individuals are not denied placement in LTC

Workplace violence in Healthcare settings





# Upcoming Education

