Joplin Response Focus of Keynote Address at Annual Conference

In future additions of the Hotline from now until September, we will be highlighting speakers and events that will be featured at the Annual Conference. In this issue we are pleased to introduce keynote speaker, Marcia Reynolds, RN, MSN, CPHRM, Executive Director of Risk Management for Mercy Health System in St. Louis, Missouri.

Is your company prepared for a natural disaster? Come and hear from Marcia how Joplin, Missouri’s healthcare providers dealt with the aftermath of a EF-5 tornado. She will talk about how health care workers responded, how services were quickly re-established and what they learned in response to this unexpected natural disaster. Come learn from first-hand experience how to enhance risk management assessment and your safety program planning.

Marcia will be the keynote speaker on Wednesday, September 18 from 1:30 p.m. to 2:30 p.m.

Our thanks to Friendship Villages St. Louis for sponsoring this presentation.
The LeadingAge Missouri Hotline is a “resource-of-resources” for aging service providers across the entire continuum of senior care.

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If you have suggested content for a future edition of the Hotline email LeadingAge Missouri.

If you do not want to receive future editions of the Hotline email LeadingAge Missouri with your contact information so we may remove you from the distribution list.

If you wish someone else in your organization to be added to the Hotline distribution list email LeadingAge Missouri with their contact information so we may add them to the distribution list.

The inclusion of advertising in the Hotline does not constitute an endorsement of the accuracy of the ad by LeadingAge Missouri or the products or services advertised.
Remembering Allan Larson

Our thoughts and prayers go out to the family and colleagues of Allan Larson who passed away on May 3rd at the age of 46. Allan was a good friend and a great supporter of LeadingAge Missouri and will be greatly missed. The lack of his presence will be felt for some time to come.

Professional Development

Annual Conference

The 44th Annual LeadingAge Missouri Conference will be held September 18-20, 2013 at the Lodge of Four Seasons, Lake Ozark, Missouri. Exhibit space is over half sold, so if your organization is interested in exhibiting, be sure to get your reservation in before all the good booth space is gone.

A new feature at the exhibit hall this year will be Ignite! presentations. Ignite! will be a fun way for you to share information with the conference participants in a short period of time. For more information on Ignite! please contact Nancie McAnaugh at Nancie@moaha.org.

Sponsorship opportunities are still available. Contact Pat Hubbs at patricia@moaha.org to find out how you can support this conference.

Golf Tournament

The 10th Annual LeadingAge Missouri PAC Golf Tournament will be held Monday, June 3, 2013 at The Landings at Spirit Golf Club, Chesterfield, Missouri. Deadline for registering a team or individual players is May 21, 2013.

There are still sponsorship opportunities available and we are looking for items for the silent auction. Please contact Pat Hubbs at patricia@moaha.org or call 573-635-6244 if you are interested in a sponsorship or in donating an item(s) for the silent auction.

Housing Summit

LeadingAge Missouri, in response to member and industry inquiries, has put together this unique program of information sharing and networking opportunities. Providers of senior housing face daunting challenges. This one-day Housing Summit will be held Wednesday, July 24, 2013 at the Courtyard by Marriott in Columbia, Missouri. This summit will provide HUD, market rate and affordable housing providers with the latest market, financial and regulatory information. In addition, a general session on hoarding
will be presented by nationally recognized hoarding expert, David F. Tolin, PhD, ABPP and a HUD update will feature Colleen Bloom, LeadingAge National's HUD expert.

There is still exhibitor and sponsorship opportunities available. For more information, contact Pat Hubbs at patricia@moaha.org or call 573-635-6244.

In The Works – Mark Your Calendars!

LeadingAge Missouri is planning a one-day Legal Issues Facing Long-Term Care Providers seminar for Thursday, August 15, 2013. This program will cover such issues as HIPAA, FMLA, Unions and Steps to Combat Union Organizers, hot areas under wage and hour, and employment verification law. Registration information will be coming soon.

We are also planning some regional information meetings to be held during the summer. Dates and registration information will be forthcoming.

What Your Association Does For You

Congratulations to Value First!

Value First, the group purchasing organization (GPO) owned by LeadingAge, and 23 other state affiliates including LeadingAge Missouri, was recently recognized as Affiliate of the Year at the MedAssets Healthcare Business Summit held at Mandalay Bay in Las Vegas on Wednesday, April 3, 2013.

The award recognizes the affiliate partner that has shown the highest growth in sales volume and revenue over the previous year. MedAssets Sr. Executive VP, Rand Ballard, praised Value First at the awards ceremony for their growth of nearly 80% over the past 12 months. Value First is also the first affiliate focusing on long-term care to win the award.

President and CEO of Value First, Jared Schei, accepted the award alongside Chet Chandler, VP of Long Term Care with MedAssets and the executive team of MedAssets.

MedAssets is the largest healthcare GPO in the county, serving more than 100,000 health care providers, which allows Value First members to access some of the most competitive contracts in the market. If you interested in learning how Value First can improve your bottom line, please contact Jared Schei at jschei@valuefirstonline.com
Hospitality: Transforming CCRCs with Strategy

How a hospitality strategy can transform a continuing care retirement community (CCRC) was the topic of a panel at the 2013 Greystone Management Symposium. The panel was moderated by Tim Mallad and included Executive Director Sam Guedouar of The Amsterdam at Harborside, a CCRC in Port Washington, NY, and Phil Jacobs, administrator of skilled nursing at The Buckingham, a CCRC in Houston. Both Sam and Phil came to senior living from the hospitality industry.

Click here for an abridged transcript on their thoughts on how best to transfer hospitality concepts to CCRCs:

CCRC Entry Fee Model Here to Stay—For Now

Thanks to the Great Recession’s impact on seniors’ net worth, some expect rental continuing care retirement communities (CCRCs) to gain market share in the next few years while others contend the diversity of the baby boomer generation will support the near-term viability of the entry fee model as well.

“Both will continue to have their places in each individual market,” says Chris Bird, senior vice president of sales at Brookdale Senior Living (NYSE:BKD). While about 80% of the nation’s 1,900 CCRCs are operated by not-for-profit organizations, the remainder are on the for-profit side.

Full Article
Article Courtesy of Senior Housing News

Communities Need Improvement in Preparing for Senior Residents

There are specific areas where communities come up short in their ability and readiness to serve an increasingly aging population. Transportation, retail accessibility and social integration are three examples cited by a MetLife Mature Market Institute study published last week—among others—that communities can target to ensure they are appealing to and meeting the needs of the aging population.

Full Article
OSHA Issues Deadline for Employee Training on Revised Hazard Communication Standard


Fund Raising / Philanthropy News

Keeping Monthly Donors Is Worth the Effort

Monthly donors have some of the strongest retention rates in the business. Retention among donors giving one-time gifts is between 41 and 50 percent, while donors enrolled in a monthly giving program are retained 70 to 80 percent of the time. Eliza Sloan, senior account director at direct marketing firm MKDM in Charlottesville, Va., along with two nonprofit monthly giving program managers, presented steps to monthly giving program success during the Direct Marketing Association Nonprofit Federation’s 2013 Washington Nonprofit Conference.

Health Care Reform

Will You Buy into Obamacare or Pay the Penalty?

There’s a lot of concern about how much it will cost to buy health insurance on the new exchanges coming online later this year. Some states are predicting double digit increases in premiums. But beginning next year, if you don’t have coverage, you’ll pay a penalty. The individual penalty under the Affordable Care Act is $95 or one percent of your income, whichever is greater. So if you earn $40,000, you’d pay $400. That’s a fraction of what insurance will cost for most people.
Resources for Employers on Responsibilities under the Affordable Care Act

Starting in 2014, employers with at least a certain number of employees will be subject to the Employer Shared Responsibility provisions of the Patient Protection and Affordable Care Act (ACA). Under these provisions, employers must offer affordable health coverage that provides a minimum level of coverage to their full-time employees or face an Employer Shared Responsibility payment if at least one of their full-time employees receives a premium tax credit for purchasing individual coverage on one of the new Affordable Insurance Exchanges. LeadingAge has compiled a variety of resources for members to utilize in determining their responsibilities under the Employer Shared Responsibility provisions of the ACA.

Click here for resources

Home and Community Based Services News

New Report on Sequestration’s Impact on Meals on Wheels Program Recipients

On April 30, the Center for Effective Government released a new report on the potential impact of sequestration on seniors who rely on Older Americans Act (OAA) Home Delivered Nutrition Services, such as those provided through Meals on Wheels, to remain in their homes and communities. The Center projects that this funding reduction will translate into four million fewer meals being delivered to vulnerable seniors nationwide. Without access to the services and supports that allow them to live at home, the report concludes that many seniors could be forced into more costly, otherwise avoidable, Medicaid-financed nursing facilities.

Click here to access the report.
VA Releases Final Rule on Payment for Home Health Services and Hospice Care to Non-VA Providers

Final Rule: Payment for Home Health Services and Hospice Care to Non-VA Providers was published by the U.S. Department of Veterans Affairs (VA) in the May 6th Federal Register.

What the rule means for providers

The average VA reimbursement level per veteran for a 60-day period was $2,537.40 in fiscal year (FY) 2010. The average Medicare reimbursement level for skilled home care per beneficiary was $2,312.94 in FY 2010. This difference amounts to providers receiving $3.74 less per day from VA for a 60-day episode of care.

On average, each provider cares for 6 veterans at VA expense. The potential annual revenue loss will be approximately $1,346.28 per provider. This final rule is effective November 15, 2013.

Hospice News

CMS: Hospices to Receive $180 million More from Medicare Next Year

Hospices will reap a 1.1% increase in Medicare payments in fiscal year 2014, according to a proposed rule issued by the Centers for Medicare & Medicaid Services. As a result of the increase, hospices would see Medicare payments rise about $180 million, according to CMS. The 1.1% increase involves a per diem rate increase of 1.8%, minus 0.7% due to “updated wage data” and some payment reductions mandated by law.

The proposed rule was issued Tuesday and will be published in the Federal Register on May 13. The full document is available here.

False Claims Lawsuit, Government Report Raise Questions about Expensive Types of Hospice Care

A government lawsuit and a memorandum from the Department of Health and Human Services Office of Inspector General raise questions about the two most expensive types of hospice care. The Department of Justice announced the False Claims Act suit against Chemed Corp. last week, alleging that Chemed and its subsidiaries were improperly paid tens of millions of dollars by Medicare. At issue are billings for crisis care. This type of
care is associated with the highest daily hospice-related Medicare reimbursement rate, to cover treatment of acute medical symptoms. The full document is available here.

Hospice: CMS Updates Wage Index and Payment Rate

Medicare Program; FY 2014 Hospice Wage Index and Payment Rate Update Medicare Program is a proposed rule published on May 10 in the Federal Register by the Centers for Medicare and Medicaid Services (CMS) that:

- Gives an update on the analysis of possible future hospice payment models.
- Asks for comments to clarify appropriate diagnosis coding for hospice claims.
- Asks for comments concerning future quality measures.
- Proposes the implementation of a standardized patient-level data collection instrument called the Hospice Item Set (HIS).
- Discusses the center's current analysis of staff utilization and costs for hospice in nursing homes.

Full Article

Medicare Lags In Project to Expand Hospice

Despite a three-year-old order from Congress, Medicare has yet to begin an experiment to expand hospice services to allow beneficiaries to continue potentially lifesaving treatments to see if it would save money while improving the patients' quality of life. The demonstration project would eliminate one major reason that people are reluctant to take up Medicare's hospice benefit: they have to first agree to forgo curative treatments such as chemotherapy.

Full Article
Article Courtesy of Kaiser Health News

OIG Investigates Hospice Use of General Inpatient Care

Medicare Hospice: Use of General Inpatient Care is a new report from the Office of the Investigator General (OIG) investigates the use of hospice general inpatient care (GIP) in inpatient units. CMS staff have expressed concerns about possible misuse of GIP, such as care being billed for but not provided, long lengths of stay, and beneficiaries receiving care unnecessarily. The Office of the Investigator General (OIG) found the following:

- Medicare paid $1.1 billion for GIP in 2011, most of which was provided in hospice inpatient units, as opposed to hospitals or SNFs.
**Service Animals: HUD Issues Guidance for People with Disabilities**

*Service Animals and Assistance Animals for People with Disabilities in Housing and HUD-Funded Programs* is a notice released by the U.S. Department of Housing and Urban development on April 25. The notice explains the circumstances under which the Fair Housing Act (FHA), Section 504 of the Rehabilitation Act (Section 504), and the Americans with Disabilities Act (ADA) may require housing providers to allow tenants to live with "service" and "assistance" animals. The notice will be used by HUD staff to enforce federal fair housing laws as they apply to persons with disabilities who have a disability-related need to live with animals in both public and private housing.

**Seniorhomes.com Launches “Zagat Guide” of Senior Living**

As the first ratings system of its kind, SeniorHomes.com today launched a numerical system for rating senior living communities across the United States. SeniorHomes.com, the online directory and resource for those seeking senior care or housing options, has first launched its rating system in Seattle, Portland and Phoenix, and will be in 50 markets in the coming months.

“From hospitals to business schools, consumers are looking for expert guidance to help them make the best choice possible,” says SeniorHomes.com CEO Chris Rodde. “This is especially true for senior living communities where there are often many choices but a dearth of objective information.”

**Japan to Subsidize Senior Care Robot Research, Expects Market to Boom**

Japan’s government is providing incentives toward the development of robots to care for its aging population. The push for robotic care aims to serve those who need assistance...
with activities of daily living in addition to specific nursing care tasks, writes a report from the Japan Daily Press.

Full Article
Article Courtesy Senior Housing News

Workbook: Everything You Need to Know about the Oregon Health Study

Wondering why everyone seems to be talking about some health-care study out of Oregon? Here’s why: The Oregon Medicaid experiment is a unicorn. A beautiful, rare unicorn. But it shouldn’t be. The study gets so much attention because it’s the gold-standard of experimental design: A randomized-controlled trial. In this case, that means the people who got Medicaid were chosen randomly. The people who didn’t get Medicaid were chosen randomly. And so researchers can be pretty sure that the differences between the two groups actually speak to the effect of Medicaid. This isn’t just the first randomized trial testing the effects of Medicaid against being uninsured. It’s the first randomized-controlled trial testing any kind of health insurance against being uninsured — period.

Full Article
Article Courtesy of The Washington Post

SEIU Keeps Kaiser Workers in Second Showdown with Calif. Rival

The upstart National Union of Healthcare Workers failed for a second time to win the prize of representing 45,000 workers at Kaiser Permanente hospitals in California.

In a do-over election ordered after NUHW disputed the results three years ago, the incumbent SEIU-United Healthcare Workers West retained representation rights. On Thursday the National Labor Relations Board tallied 18,894 votes for SEIU and 13,002 votes for NUHW, according to a NUHW news release, while 334 voted for neither union. The unions have a seven-day period to challenge the results.

Full Article
Article Courtesy of ModernHealthcare.com

Stone Phillips Documents Tough Choices When Caring for Elderly Parents

Grace Phillips looked around her apartment and burst into fits of confused laughter.
It seemed incomprehensible to her, then 88 years old and in the early stages of dementia, that she and her husband were going to leave their lives in St. Louis in two days and move to North Carolina to be near their daughter. Their son, former NBC “Dateline” anchor and Parkway West graduate Stone Phillips, asks his mother, as gently as he does throughout this hour long documentary, how she feels about the inevitable move. “If the rest of the family is behind it, then I’ll go,” she says.

Full Article
Article Courtesy of the St. Louis Post Dispatch

Healthcare Providers, Workers’ Unions Divided on Recently Passed Bill to Swap Pay with Time Off

The House of Representatives has passed the “Working Families Flexibility Act.” The bill, H.R. 1406, would allow employers to offer paid time off in place of overtime pay, and has put healthcare providers at odds with workers’ unions.

End of Life Care: Advance Directives Manage Issues and Reduce Medical Costs

A new article available online in the American Journal of Public Health by two Johns Hopkins Bloomberg School of Public Health faculty makes a compelling case that end-of-life care issues need to become an integral part of the public health agenda. Dan Morhaim, MD, and Keshia Pollack, PhD, point out that the low rate of completion of advance directives in the minority population can be identified as another health care disparity.

Full Article
Article Courtesy of Medical News Today

Medicaid News

House Bill Would Tighten Medicaid Eligibility for Long-Term Care
A new House bill would reduce the amount of home equity that is exempted when determining Medicaid eligibility for long-term care. The “Medicaid Program Integrity Act of 2013” would give states the option of setting the home equity exemption as low as $50,000.

Click here to read the bill.

Medicare News

Advocates Head to Court to Overturn Medicare Rules For Observation Care

After Lois Frarie, a 93-year-old retired teacher from Monterey, Calif., spent four days at a local hospital while being treated for a broken elbow and pelvis, she went to a nearby nursing home to build up her strength. But her family was stunned to find out that they would have to pay thousands of dollars up front since two of the days she spent in the hospital were considered "observation care." She wasn't an admitted patient for at least three consecutive days and therefore she didn't qualify under federal law for Medicare's nursing home coverage. "I assumed I was under the hospital's care," said Frarie.

Full Article
Article Courtesy of Kaiser Health News

Medicare Seeks To Limit Number of Seniors Placed In Hospital Observation Care

Medicare officials have proposed changes in hospital admission rules that they say will curb the rising number of beneficiaries who are placed in observation care but are not admitted, making them ineligible for nursing home coverage. "This trend concerns us because of the potential financial impact on Medicare beneficiaries," officials wrote in an announcement April 26. Patients must spend three consecutive inpatient days in the hospital before Medicare will cover nursing home care ordered by a doctor.

Full Article

CMS Data Show Wide Variation in Hospital Billing

The CMS released data showing U.S. hospitals charge widely varying amounts for the same services and also illustrating the significant variation in how much Medicare pays for those services. The database, posted on the CMS website, includes hospital charges for 100 most frequently billed discharges by the more than 3,000 hospitals reimbursed under the inpatient prospective payment system. The numbers reflect $66.7 billion in
Medicare spending during fiscal 2011 and represent 7 million discharges, or 60% of the total Medicare IPPS discharges that year. Patients are rarely billed or pay a hospital's nominal charges. Nor do the charges or their variation indicate the rates hospitals negotiate with insurers.

Full Article
Article Courtesy of ModernHealthcare.com

Senior Care Industry: Expect More Medicare Fraud Scrutiny
The senior care industry can expect increased Medicare fraud scrutiny in the next couple years as the Obama administration seeks to recoup program dollars to help fund health insurance coverage expansion, according to a senior member of a law firm's Healthcare Practice Group.

Full Article

Doctors and Nurses Among Nearly 100 Charged in $223 Million Medicare Fraud Busts in 8 Cities
Nearly 100 people, including 14 doctors and nurses, were charged for their roles in separate Medicare scams that collectively billed the taxpayer-funded program for roughly $223 million in bogus charges in a massive bust spanning eight cities.

Full Article
Article Courtesy of The Washington Post

Nursing Facility News

CMS Seeks 1.4% Payment Hike for SNFs
The CMS has proposed a 1.4% hike in Medicare payments to skilled-nursing facilities for fiscal 2014, which the agency estimates would increase payments to these providers by about $500 million from 2013 payment levels.

Released Wednesday, the regulation proposes to rebase and revise the skilled-nursing facility marketbasket index for next year. Currently, the marketbasket reflects data from fiscal 2004, and the CMS has suggested using data from fiscal 2010 instead.

Full Article
Article Courtesy of ModernHealthcare.com
Review of Antibiotic Usage Needed in Long-Term Care Facilities, Expert Urges

Long-term care administrators and directors should have an antibiotic stewardship program that takes the entire facility into account, an infection control expert said Thursday. "If you don't look, you don't know," warned Gail Bennett, MSN, RN, CIC, co-founder of ICP Associates. Use of antibiotics has resulted in new strains of multi-drug resistant organisms (MDROs) affecting long-term care. These include Methicillin-resistant Staphylococcus aureus (MRSA) and Carbapenem-resistant Enterobacteriaceae (CRE).

Full Article
Article Courtesy of McKnight's Long Term Care News and Assisted Living

Nursing Homes' Strong Negotiating Position with ACOs Will Not Last Long, Legal Expert Says

Skilled nursing facilities that delay joining an Accountable Care Organization will likely be losers in the healthcare marketplace, according to John Durso, a partner and senior member of the Healthcare Practice Group at the law firm of Ungaretti & Harris LLP. He is also the "Ask the Legal Expert" columnist for McKnight's. Speaking at the Life Services Network conference in Chicago on Thursday, Durso offered tips for nursing homes that are negotiating to join an integrated care network.

Full Article

MDS Update Will Expand use of Modifications to Make Changes

The Minimum Data Set manual will be revised to reflect a new correction policy, the Centers for Medicare & Medicaid Services recently announced. The revision affects which records can be changed through modification and which need to be changed through inactivation. Currently, an inactivation request is necessary to address errors such as type of provider, type of assessment, entry date, discharge date and assessment reference date. Modifications can be requested for errors on clinical items, including data entry errors.

Details about the changes are provided in a CMS PowerPoint presentation, including information about what constitutes a typographical error. Click here to access the slides.

Article Courtesy of McKnight’s Long Term Care News and Assisted Living
OIG Issues New Guidance for Nursing Homes on Hiring People Excluded from Medicare and Medicaid

Nursing homes can now refer to newly updated government guidelines on hiring or contracting with people excluded from participating in federal health programs. The issue is important for long-term care facilities, where excluded individuals often are hired in non-caregiving roles, according to Susan Gillin, deputy chief in the Administrative and Civil Remedies Branch of the Department of Health and Human Services Office of Inspector General (OIG). “We see a lot of employment of excluded individuals in nursing homes,” Gillin told McKnight’s. HHS has received many questions on the issue from nursing home operators, she added.

Full Article

Career Center

Lutheran Senior Services

Registered Nurse- Home Health (PRN)

Job Description
Lutheran Senior Services is seeking an experienced RN for a PRN opportunity in our In Home Services department. The chosen candidate will conduct comprehensive OASIS initial nursing assessments, including physical, emotional and mental needs. This position is great for an RN with home health experience.

About Lutheran Senior Services
Home isn’t a place; it’s a feeling, created and shared by people who care for One another. That’s what Lutheran Senior Services (LSS) is all about. LSS is a faith-based, not-for-profit network that specializes in enhancing life for seniors. With 19 locations in Missouri and Illinois, we offer quality choices and exceptional support for retirement living. Through senior living communities, in-home services and affordable housing sites, we provide a person-centered approach to a comprehensive continuum of life choices. Building upon a tradition of excellence for more than 150 years, Lutheran Senior Services is fulfilling its Christian mission of “Older Adults Living Life to the Fullest”. An equal opportunity employer, LSS has twice been named one of the “Best Places to Work” in St. Louis, as well as being named a finalist in the 2012 “Healthiest Employers” competition, by the St. Louis Business Journal.

Overview of Duties
A few highlights of the Home Health Nurse include....
• Determines eligibility for services related to homebound status and need for skilled services.
• Develops an individualized plan of care in consultation with the patient’s physician and other agency personnel as appropriate.
• Completes review of medications, pain management, risk status
• Provides intermittent skilled services, as ordered by the physician, and maintaining the highest quality of care for the patient in the home environment.
• Provides direct nursing care procedures to patients, Updates primary physician when necessary and at least every 60 days.
• Completes OASIS at all points of care as required under PPS.
• Responsible for thorough and complete documentation to ensure continuity of care, professional services and the maintenance of accurate legal documents.
• Teaches family members, and/or significant others, patient care skills, accurately assess patient’s physical and emotional status, and perform services in compliance with physician orders.
• Participates in on-call duties as defined in the On-Call Policy.
• Maintain CONFIDENTIALITY of all pertinent client and employee information to assure their privacy is protected.
• Support and uphold all federal, state and local regulatory laws and standards.
• Support and uphold all Lutheran Senior Services Policies and Procedures.

Overview of Requirements:

To be successful in this role, one must…..

• Be a graduate of an accredited school of nursing
• Hold a Current Missouri State license in good standing
• Have One year home health experience (preferred)

Requisition # 13-3833
For more details or to apply for this position, visit www.LSSLiving.org/employment

Lutheran Senior Services
1150 Hanley Industrial Court
Brentwood, MO 63144

Hospice RNs (FT, PT, & PRN)

Job Description
Lutheran Senior Services is seeking experienced Hospice RNs full time, part time, & PRN opportunities in our In Home Services department. The chosen candidate will provide skilled nursing services in accordance with the orders of a physician and under
a plan of care in a patient’s home and has the responsibility for the observation, assessment, nursing diagnosis, counsel, care and health teaching of the hospice patient and family. This position is great for an RN with hospice experience.

About Lutheran Senior Services
Home isn’t a place; it’s a feeling, created and shared by people who care for one another. That’s what Lutheran Senior Services (LSS) is all about. LSS is a faith-based, not-for-profit network that specializes in enhancing life for seniors. With 19 locations in Missouri and Illinois, we offer quality choices and exceptional support for retirement living. Through senior living communities, in-home services and affordable housing sites, we provide a person-centered approach to a comprehensive continuum of life choices. Building upon a tradition of excellence for more than 150 years, Lutheran Senior Services is fulfilling its Christian mission of “Older Adults Living Life to the Fullest”. An equal opportunity employer, LSS has twice been named one of the “Best Places to Work” in St. Louis, as well as being named a finalist in the 2012 “Healthiest Employers” competition, by the St. Louis Business Journal.

Overview of Duties
A few highlights of the Hospice Nurse include:

• Performs, completes and documents initial and ongoing assessment of the impact of the terminal diagnosis on the patient’s physical, functional, psychosocial and environmental needs and activities of daily living
• Initiates IDT Plan of Care with consultation from the basic IDT members, attending physician and medical director. Reviews and revises the plan as necessary.
• Applies specific criteria for admission and re-certification to hospice care to establish appropriate levels of care and the patient’s eligibility.
• Assesses the ability of the caregiver to meet the patient’s immediate needs upon admission and throughout care. Shall evaluate and document the appropriateness and ability of the patient or family member’s administration of medications.
• Provides those services requiring substantial specialized nursing skill based on the physician’s orders and the nursing diagnosis related to palliative and end-of-life care. Examples of such services include, but are not limited to; appropriate preventive and rehabilitative nursing procedures, physical assessment, managing discomfort and providing symptom relief, patient and family teaching, urinary catheter insertion and care, venipuncture and administration of IV fluids or medications, sterile and nonsterile dressing changes.
• Uses the case management approach and acts as the coordinator of the interdisciplinary team in order to maintain the proper linkages with a continuum of care.
• Utilizes the medical record software system via laptop or agency desktop for patient documentation. Initiates documentation in the patient’s home on the laptop, and completes after the visit.
• Participates in in-service programs and staff meetings including provision of specialized hospice training to other staff, family members and informal caregivers to insure adequate care.
• Evaluates own needs for support and using identified system(s) to meet the need.
Maintain CONFIDENTIALITY of all pertinent client and employee information to assure their privacy is protected.

- Support and uphold all federal, state and local regulatory laws and standards.
- Support and uphold all Lutheran Senior Services Policies and Procedures.

Overview of Requirements:
To be successful in this role, one must…..

- Be a graduate of an accredited school of nursing
- Hold a Current Missouri and Illinois State license in good standing
- Have One year hospice experience (preferred)

Requisition # 12-3125, 12-2640, 12-2639
For more details or to apply for this position, visit www.LSSLiving.org/employment

Lutheran Senior Services
1150 Hanley Industrial Court
Brentwood, MO 63144
## 2013 SPECIAL OCCASIONS CALENDAR - $25.00

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<table>
<thead>
<tr>
<th>E-Mail:</th>
<th>Phone:</th>
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<tbody>
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</table>

| Payment Type: |  |  |
|---------------|  |  |
| □ Check – Check #: | □ Visa | □ MasterCard |

<table>
<thead>
<tr>
<th>Credit Card Number:</th>
<th>Exp. Date:</th>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Print Name on Card:</th>
<th>Billing Address for Card:</th>
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</thead>
<tbody>
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</table>

<table>
<thead>
<tr>
<th>City/State/Zip:</th>
<th>Total Payment:</th>
</tr>
</thead>
<tbody>
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</table>

Credit card payments (Visa or MasterCard only) may be e-mailed to [diana@moaha.org](mailto:diana@moaha.org), or faxed to (573) 635-6618. Make checks payable to **LeadingAge Missouri**. Payments by check should be mailed to LeadingAge Missouri, 3412 Knipp Drive, Suite 102, Jefferson City, Missouri, 65109.

For Office Use Only: Total Amount: _________ Date Received: _________ Check #: __________
LeadingAge Missouri Hotline Newsletter Advertising Opportunities

Advertising Opportunities
Reach the decision-makers in your target market through the LeadingAge Missouri Hotline. The twice monthly newsletter of LeadingAge Missouri reaches CEO's, administrators, managers, and other corporate officers from retirement, long term care and home and community based providers throughout Missouri. Each edition of the Hotline reaches about 1500 aging service professionals. This is the perfect opportunity to gain greater name recognition and awareness for your products and services.

Space is Limited
Advertising space in the Hotline is limited. Advertisements will be published first-come, first-served on a space available basis. Ad placements will be made at the sole discretion of LeadingAge Missouri. Advertising is limited to LeadingAge Missouri members. LeadingAge Missouri reserves the right to refuse to publish an ad.

Advertisement Sizes, Rates, and Artwork Requirements

<table>
<thead>
<tr>
<th>Item Ordered (X)</th>
<th>Item</th>
<th>Size – across</th>
<th>Size – down</th>
<th>Price per Insertion</th>
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</thead>
<tbody>
<tr>
<td>Banner</td>
<td>5”</td>
<td>1.5”</td>
<td></td>
<td>$75*</td>
</tr>
<tr>
<td>¼ page</td>
<td>3.5”</td>
<td>4.5”</td>
<td></td>
<td>$75*</td>
</tr>
<tr>
<td>½ page vertical</td>
<td>3.5”</td>
<td>9.5”</td>
<td></td>
<td>$125*</td>
</tr>
<tr>
<td>½ page horizontal</td>
<td>7.5”</td>
<td>4.5”</td>
<td></td>
<td>$125*</td>
</tr>
<tr>
<td>Full page</td>
<td>7.5”</td>
<td>9.5”</td>
<td></td>
<td>$175*</td>
</tr>
</tbody>
</table>

*10% discount if ad is pre-paid to run three consecutive months.

Camera ready artwork must be emailed in a jpg format to Nancie@moaha.org.

Advertisement Request Form
Please place our advertisement in the ____________ (month) edition of the LeadingAge Missouri Hotline. Enclosed is payment in the full amount of ____________ for the advertising space.

Company: __________________________________________ Telephone: __________________________

Address: __________________________________________ City/State/Zip: ______________________

Contact: __________________________________________

I have read this form, understand its contents, and agree to its terms.

Signature of Authorized Representative: ___________ Date: ___________

☐ Check ☐ MC ☐ Visa Card Number: __________________________

Expiration Date: __________________ Name on Card: ______________________

Billing Address for Credit Card: _____________________________

LeadingAge Missouri Use Only: Total Amount: ___________ Date Received: ___________ Check #: ___________