

# MONDAY

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ONLINE

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# MAILING

Posted:06-30-2008

## Top Stories

### Planning Is Key To EHR Transition

By Jan. 1, 2015, all hospitals and healthcare providers must have in place an interoperable electronic health record system. In the viewpoint of **Peter Schuna**, the administrator and CEO of **Cerenity Care Center** of St. Paul, the plan has many positive benefits for long-term care and assisted living personnel. For example, patients will be able to access their own health record from any location at any time of the day, the system will avoid medication and other errors due to illegible or misinterpreted handwriting, and individuals can receive reminders about preventative services they should be receiving.

And even before Jan. 1, 2015, the law requires that all healthcare providers and payers establish and use an e-prescribing system by Jan. 1, 2011. With these dates fast approaching, Schuna, who serves on the Minnesota e-Health Initiative Advisory Committee, says the time to start the transition process is now. "2015 is not that far away," he cautions. "This is not something you can wait to do. The planning time is estimated to be 3-4 years. There was a rumor that nursing homes are excluded from this mandate, but they are not. Neither is assisted living."

Schuna says improving health quality, increasing patient safety and reducing health costs are at the heart of this initiative, which had its beginnings during the 2004 legislative session. At that time, the legislature agreed that expanding the use of health information technology and electronic health records (EHR) was a top health priority. The legislature asked MDH to convene a group to provide recommendations and advice on how best to accelerate progress in Minnesota, and then-Commissioner Dianne Mandernach launched the e-Health Initiative Advisory Committee.

Last week, the Minnesota Department of Health hosted its fourth annual e-health summit that provided an opportunity for health leaders to increase their understanding of the mandate. MDH officials stressed that no organization has to go through this task alone. Lessons learned from others are available through health professional associations and consultants based in Minnesota and elsewhere.

MDH also released its statewide implementation plan, which is available at this link: <http://www.health.state.mn.us/ehealth/ehrplan.html>. (Scroll down, and you can download the entire plan or specific parts of the plan. Guide 1 is particularly valuable because it gives a very practical guide to the entire process, from assessment to interoperability of electronic health records.) Additional resources are available at this link: <http://www.health.state.mn.us/e-health/>.

The key word is planning. It is important to engage staff and key stakeholders in the entire process and make sure everyone has a thorough understanding of the project goals. Following this, agree on a model to help manage the plan.

#### **For Further Information:**

Contact Darrell Shreve at [dshreve@mhha.com](mailto:dshreve@mhha.com).

### Therapy Caps Begin Tomorrow

Last Thursday evening, the Senate failed to get the 60 votes needed for cloture on HR 6331, the Medicare bill passed overwhelmingly by the House. This means that the moratorium on therapy caps will expire tomorrow, July 1.

According to the American Association of Homes and Services for the Aging (AAHSA), the original Senate vote was 59-39 (Kennedy and McCain absent). Sen. Harry Reid (D-NV) changed his vote to no (final vote 58-40) so that he can bring the bill up again when the Senate returns to work on July 7.

AAHSA has said that there is a 30 day extension in the works (which thus far includes a 30-day extension of the therapy cap exceptions process), but says we won't know probably until July 7 whether the extension will happen. So the upshot is that therapy caps will go into effect July 1, as will the 10 percent physician payment cut.

All the senate Democrats voted for cloture; the following Republicans joined them: Coleman; Collins; Dole; Murkowski; Roberts; Smith; Snowe; Stevens; Voinovich.

Members are urged to contact Senators Coleman and Klobuchar to thank them for supporting continuation of the moratorium on therapy caps and to ask them to continue to work to support the Medicare bill. Contact information for them is found at [http://www.mhha.com/index/Become\\_Active](http://www.mhha.com/index/Become_Active). If you need background information for your message to Senators Coleman

and Klobuchar, see last week's *Monday Mailing* article on the therapy caps.

**For Further Information:**

Contact Marsha R. Greenfield, Esq., Senior Legislative Counsel, AAHSA, at [mgreenfield@aahsa.org](mailto:mgreenfield@aahsa.org).

**News Briefs**

**New Data Released On QIS Surveys**

The Minnesota Department of Health has released information on the Quality Indicators Surveys. The data are drawn from 30 QIS surveys that have been completed. The average number of deficiency citations is 10.6, only a few tenths of a percentage point above the statewide average.

Here are the top ten deficiencies for the most current regular surveys and the QIS surveys:

<b>Top 10 Deficiencies Traditional 5/19/08</b>	<b>Top 10 QIS Deficiencies 6/16/08</b>
F314 Pressure Ulcers	F323 Accidents/Supervision
F282 Provision of Care in accordance w/Plan	F329 Unnecessary Medications
F315 Urinary Incontinence	F272 Comprehensive Assessment
F329 Unnecessary Medications	F279 Comprehensive Care Plans
F323 Accidents/Supervision	F282 Prov. of Care in accordance with Plan
F272 Comprehensive Assessment	F280 Comprehensive Care Plan Revision
F465 Environment	F312 ADL
F371 Food Handling & Sanitation	F314 Pressure Ulcers
F274 Significant Change	F428 Drug Regimen Review
F279 Comprehensive Care Plans	F465 Environment

To see the list of the 30 facilities with QIS surveys and other data, please click on this link:

<http://www.health.state.mn.us/divs/fpc/profinfo/QISdataupdate062008.pdf>

**For Further Information:**

Contact Darrell Shreve a [dshreve@mhha.com](mailto:dshreve@mhha.com).

**2008 Legislative Report Available On-line**

Earlier this month, all MHHA members were sent a hardcopy of our *2008 Legislative Report*--a comprehensive summary of legislation affecting aging services providers. This 116-page report is a complimentary benefit of membership and contains information on rate adjustments, regulations, studies and more.

MHHA has once again included a "Voters Guide" highlighting five votes taken in the House and Senate over the biennium that had a direct impact on aging services. Members are encouraged to use the guide to see how their legislator voted and begin a dialogue with their representatives on the circumstances surrounding their positions on our issues.

MHHA has also launched the on-line version of the 2008 Legislative Report. Located at <http://www.mhha.com>, look in the sidebar on the Advocacy page. The on-line report will include direct links to information related to each summary - such as bill language, state agency bulletins, forms, applications or links to further information - coming soon. This "one-stop-shop" is updated frequently as new information becomes available.

**For Further Information:**

Contact Lori Meyer at [lmeyer@mhha.com](mailto:lmeyer@mhha.com).

**MDH Statewide Conference Call**

The Minnesota Department of Health sponsored the latest in its occasional series of statewide conference calls last Monday on issues concerning care centers. This call dealt primarily with the new incident reporting system and accidents/supervision (F323), with a little bit of information on the QIS implementation.

Sue Jackson of the Office of Health Facilities Complaints provided data on the number of electronic reports in the first two months of electronic reporting (April 15 through June 15), compared to the same time period one year earlier. The number of

reports has increased by 160 percent - from 726 to 1,919. On a daily basis, the increase is from 12 per day to more than 30, but there has not been a corresponding increase in the number of onsite investigations. The intake staff has been overwhelmed, and OHFC has been forced to borrow staff from other sections. Based on these data, it would appear that the counties' screenings of calls from providers were more effective in preventing needless reports than anyone had anticipated.

Jackson gave some helpful advice to providers. Once the report is opened, the provider must complete the report (initial or results) within three hours, or the information will be lost (and must be re-entered). In addition, the comment boxes have a limit of 4000 characters, so providers should summarize information as much as possible. OHFC generally doesn't need names and exact statements of what a person said unless the person is the resident, a witness, or the alleged perpetrator. Jackson suggests writing everything down before entering the information online.

OHFC obviously is interested in helping providers understand what does not need to be reported. Jackson gave these recommendations for situations commonly reported:

- Injury of unknown source--tiny bruises, skin tears, or scrapes do not need to be reported.
- Neglect--a failure to follow the care plan, orders, or a standard of practice should be reported if there is an "incident." Failure to provide range of motion once or a single failure to put in a resident's dentures would generally not be reportable.
- Medication errors--do not report mistakes unless there are adverse consequences (or potential adverse consequences), or the mistakes constitute a pattern or are systemic.
- Against medical advice--report this to the Common Entry Point but not to MDH because the federal regulations do not define this as abuse, neglect, or maltreatment.
- Resident-to-resident abuse--do not report if the provider determines that the abuse was not "willful." Do report it if the provider determines the abuse was "willful" or the provider can't tell for certain. (The federal definition is narrower than the Vulnerable Adult Act's definition.)
- Misappropriation of resident property--don't report small missing items of nominal value.
- Accidents--do not report if the care plan was being followed (see "Neglect" above).

Staff from the survey and compliance section reported data on F323 (accidents and supervision). Since February 11, MDH has completed 149 surveys, and half of them received F323. A majority of the citations were for falls, with elopements, unlocked toxic substances, and large gaps in beds also appearing with some frequency.

A series of questions demonstrated the frustration felt by many providers, who feel that surveyors have unrealistic expectations. Some expect providers to have implemented an entire package of interventions at once, rather than trying interventions sequentially. Another frustration mentioned develops when the staff significantly reduces the frequency of falls (and prevent serious injuries), but still gets cited. A third arises when families refuse interventions--even after the staff shares with them information about the benefits of the interventions. An admonishment from the surveyors to "work with the family" often rings hollow.

The next round of training for QIS will occur in the early fall. The Mankato team and the remainder of the St. Cloud team will be trained. This training will bring the total number of trained MDH staff to three dozen. MDH staff also mentioned that a new CMS brochure on QIS is available on their website.

MDH also mentioned that CMS has released new survey guidance on Nutrition and Food Sanitation (F325 and F371). As has happened with recently issued guidance, CMS will reduce the number of tags through combination. MHHA's Regulatory Affairs Committee will review the new guidance at its meeting on July 10 and identify training needs for MHHA to address. CMS will implement the new guidance on Sept. 1, but under state law MDH must work with the provider associations to conduct joint training. This usually occurs after the CMS implementation date.

The conference call is available at: <http://mcca.cachefly.net/mhha/FiveStarRating.mp3>.

#### **For Further Information:**

Contact Darrell Shreve at [dshreve@mhha.com](mailto:dshreve@mhha.com) or Liz Sether at [lsether@mhha.com](mailto:lsether@mhha.com).

### **National Associations Recommend Against Federal Requirements for Assisted Living Administrators**

At a recent conference of the National Association of Long-Term Care Administrator Boards (NAB), representatives from the American Association of Homes and Services for the Aging (AAHSA), the Assisted Living Federation of America (ALFA), and the National Council of Assisted Living (NCAL) provided a response to the NAB model law for assisted living licensing.

According to Cory Kalheim, representing AAHSA on the panel, all of the national provider groups indicated their opposition to a mandatory federal approach to regulation, citing the need to tailor requirements to the needs of different states. In comments to MHHA, Kalheim said that NAB assured members of the panel that their model statute is a first draft and that they would send a response to the panelists' comments and any future drafts to the national provider associations. Kalheim said he will forward any future drafts to MHHA.

#### **For Further Information:**

Contact Mary Youle at [myoule@mhha.com](mailto:myoule@mhha.com).

### **DHS Posting Reports of Managed Care Enrollment**

DHS has recently begun posting monthly enrollment reports for its various managed care programs. The most recent report, for June of 2008, can be downloaded from the CountyLink section of the DHS web site at <http://tinyurl.com/66wgvy>.

The 66 page report for June includes data that may be of interest to members. On pages 19-24, the report has tables that show the enrollment counts for Minnesota Senior Care (MSC) and Minnesota Senior Health Options (MSHO) by health plan and county. The report shows that as of early this month there were over 36,000 people statewide enrolled in MSHO, with more than 11,000 additional people enrolled in either MSC or MSC-plus.

In addition to showing how many people in a county are covered by specific health plans and programs, the report also shows the same information by living status. A large portion of the report, pages 25-52, shows how many people in each county and on each program are living in an institution (primarily a SNF), living in the community receiving waiver services, or living in the community and not receiving waiver services. It is interesting to note that on a statewide basis the MSHO population is split relatively evenly between the three groups (SNF, community with waiver services, community without waiver services), while the MSC population is much less likely to be in a SNF.

DHS plans to continue posting enrollment reports to the web site on a monthly basis.

#### **For Further Information:**

Contact Jeff Bostic at [jbostic@mhha.com](mailto:jbostic@mhha.com).

### **Still Time to Submit 2008 Compensation Survey**

The deadline for submitting 2008 compensation surveys has been extended again. We have decided to extend the survey deadline to Friday, July 11, so any member who submits the form by that date will receive a free report when they are sent out in August. We will continue to accept surveys after the July 11 deadline, and those who submit the information late may receive reports as well if we are able to enter their data prior to producing the reports.

Members who do not have the copy of the survey that was mailed to them can download the survey forms on mhha.com from the "surveys and data" page. Thanks to the many members who have participated so far.

#### **For Further Information:**

Contact Jeff Bostic at [jbostic@mhha.com](mailto:jbostic@mhha.com).

### **MDH Stakeholder Group Continues Work on Home Care Regulation**

The Minnesota Department of Health's (MDH) Home Care Regulatory Framework group met again last Friday to continue its discussion on how to regulate various types of home care services.

There continues to be a heated discussion regarding whether or how home management services (housekeeping, meal preparation and shopping) should be regulated. Currently, agencies or individuals offering these services to people who need this assistance because of an illness or disability are required to register with MDH but there is no effective enforcement of even this level of oversight.

A number of problems with this registration requirement were identified:

- Agencies and individuals providing home management services may not know of the MDH requirement
- Agencies/individuals may not know when their client(s) have an illness or disability that triggers the registration requirement
- Client's health status can change so that an agency that didn't have to register one week could be out of compliance with the registration requirement the next.

Several times during the discussion, Mary Youle, representing MHHA, has suggested that if this regulation is unenforceable, perhaps it is one requirement that could be dropped so that the MDH resources could be directed toward oversight of services with more potential for harm. However, advocates participating on the stakeholder group are adamant that no protection for disabled people should be eliminated, even if enforcement is difficult or impossible. Although no consensus has yet been reached, MDH has identified three possible approaches toward regulating home management services:

- Keep the registration requirement as is
- Eliminate the registration requirement for providers only providing home management services, or
- Increase regulation of home management services (or the alternative of licensing only the service of shopping and handling the client's money and exclude meal preparation and housekeeping).

The full explanation of these three proposals is found at [http://www.mhha.com/inc/data/Scanjob\\_20080630\\_101937.pdf](http://www.mhha.com/inc/data/Scanjob_20080630_101937.pdf)

The next topic focused on the development of a hierarchy of services beginning with basic services, then mid-level and finally comprehensive and complex/specialty. Though there was no final consensus, the services tentatively included in the basic level were activities of daily living (ADLs), medication reminders, non-delegated tasks. The debate centered on whether these services require an initial RN assessment and on-going nurse supervision.

Currently in the rules, the non-delegated tasks do not require supervision by a nurse, but the representatives from the Minnesota Nurses Association and the Board of Nursing seemed to argue that RN oversight of these services is necessary. This is a re-hash of the debate when the home care rules were first being developed in the early 1990's--when is the bath just a bath and when does it become a delegated nursing task. This issue directly relates to a major concern underlying the purpose of the MDH stakeholder group: the pending shortage of nurses and how home care services can be provided in a safe way and with reasonable oversight and regulation when future demand for nurses in home care will far exceed supply.

Members who would like to weigh in on the question of whether/how to regulate home management services should send their feedback to Youle. MHHA would also like to hear members' opinion regarding whether the basic services listed above should require RN assessments and supervision.

Please send your comments to Mary Youle at [myoule@mhha.com](mailto:myoule@mhha.com).

### **House Appropriations Subcommittee Increases 2009 Section 202/8 Funding**

For fiscal year 2009, the House Subcommittee on Transportation/HUD has provided \$765 million for Section 202 funding, an increase of \$30 million over the 2008 funding. The subcommittee also approved an increase of \$918 million over last year's funding to \$7.3 billion for Section 8 project based renewals. While this funding is enough to solve the current shortfall, the subcommittee chair promised to monitor renewals closely to avoid the funding crisis that occurred last summer. The bill was expected to go to the full committee at the end of last week.

#### **For Further Information:**

Contact Nancy Libson at [nlibson@aahsa.org](mailto:nlibson@aahsa.org) or 202-508-9447.

### **HUD Clarifies PRAC Rent Adjustment Policy**

The Department of Housing and Urban Development (HUD) recently clarified that procedures outlined in the April 8, 2008, memo on project rental assistance contract (PRAC) rent increases apply only to PRAC programs already occupied and receiving subsidies.

According to the American Association of Homes and Services for the Aging (AAHSA), Notice H-06-06 remains in effect, allowing for pre-occupancy rent adjustments according to a different set of procedures. The April 8 memo is available at [http://www.mhha.com/inc/data/June\\_30\\_2008\\_MM\\_PRAC\\_rent\\_increases.pdf](http://www.mhha.com/inc/data/June_30_2008_MM_PRAC_rent_increases.pdf). Housing Notice 06-06 is found at <http://www.hud.gov/offices/adm/hudclips/notices/hsg/06-6N.doc>.

#### **For Further Information:**

Contact Colleen Bloom at AAHSA at [cbloom@aahsa.org](mailto:cbloom@aahsa.org) or 202-508-9483.

### **Section 236 Projects to Report Excess Income Online Effective Aug. 31**

As part of HUD's implementation of the Government Paperwork Elimination Act, the Department is changing reporting and collection processes related to Section 236 Excess Income from paper to an electronic Internet site operated by the Department of Treasury. The web site for this process is found at <https://Pay.gov/paygov/>.

The change is effective for all reporting periods after Aug. 31, 2008. However, owners and agents may elect to begin using Pay.gov immediately to submit Section 236 excess income reports and any payments that may be due.

The American Association of Homes and Services for the Aging (AAHSA) reports that optional registration to help make repeated use of this online submissions portal easier will not be available until Oct. 1.

The June 16 memo on this is available at <http://www.mhha.com/inc/data/236reportexcessincome.pdf>.

#### **For Further Information:**

Contact Colleen Bloom at AAHSA at [cbloom@aahsa.org](mailto:cbloom@aahsa.org).

### **Correction on HUD's New Dishwasher Policy from AAHSA**

We recently reported that HUD's May 23 final rule revised the design and cost standards for the Section 202 and Section 811 programs, allowing project sponsors to use HUD funds for dishwashers in individual supportive housing units for the elderly and in independent living projects for persons with disabilities, effective June 23.

The American Association of Homes and Services for the Aging (AAHSA) has now clarified that while the new rule does allow dishwashers in new construction Section 202 or 811 properties with project-based rental assistance contracts, it specifically prohibits the use of HUD funds for their purchase or operating costs. Sponsors will have to pay for dishwashers from sources other than the Section 202 or 811 capital advance or the project rental assistance contract.

The May 23 *Federal Register* publication is found at <http://edocket.access.gpo.gov/2008/pdf/E8-11619.pdf>.

#### **For Further Information:**

Contact Colleen Bloom at AAHSA at [cbloom@aahsa.org](mailto:cbloom@aahsa.org) or call 202-508-9483.

### **Pandemic Influenza Webcast for Home Care Providers Scheduled for July 8**

On Tuesday, July 8, at 1 p.m., the U.S. Department of Health and Human Services will present a webcast on pandemic influenza for home health care providers.

During a pandemic, the demand for home health care services is expected to exceed the industry's current capacity to respond. In the event of a flu pandemic, it is expected that many individuals will be cared for in the home by family members, friends, and other members of the community. Home health care workers will be called upon to support these efforts as well to provide services to those without caregivers. Home health care agencies need to begin planning now so they can effectively respond to the needs of their community during a pandemic.

The Federal government will be releasing a report on Monday, July 7, that offers guidance and suggestions on addressing key elements of home health care preparedness and includes lists of existing tools, resources, and models.

This webcast will discuss key topics including the assumptions that need to be considered when assigning a care-giving role to home care agencies during a pandemic; operational, ethical and legal challenges pandemic planners will face; and the strategies home health care agencies can employ to overcome these challenges.

The webcast will provide an opportunity for a live question-and-answer session with key health care representatives. Speakers will include:

- Alexis Silver, Senior Director, Policy and Development, Home Care Association of New York State
- Geraldine A. Coyle, Deputy Chief Consultant, Administration and Logistics, U.S. Department of Veterans Affairs
- James G. Hodges, Associate Professor, Johns Hopkins Bloomberg School of Public Health

Registration is not required. To join the webcast, just click on: [http://www.pandemicflu.gov/news/panflu\\_webinar.html](http://www.pandemicflu.gov/news/panflu_webinar.html) at 1 p.m. on Tuesday, July 8. The video will stream in Windows Media format. Please note you will need a Windows media player installed on your computer's browser in order to view the live video stream. If you are unable to view this live stream in the Windows media format you can view the Flash video-on-demand of the event that will be made available July 16.

Email your questions for the webcast panelists before and/or during the program to [hsstudio@hhs.gov](mailto:hsstudio@hhs.gov). Please include your first name, state and town.

### **DHS to Offer Videoconferences on Spenddowns and Transform 2010: Fostering Communities for a Lifetime**

In future weeks the Department of Human Services (DHS) will offer two videoconferences that may be of interest to members.

On Wednesday, July 16, at 1:30 p.m., DHS will repeat the May 21 session on Medical Spenddowns, Institutional Spenddowns and Waiver Obligations for people enrolled in managed care. The presenter is Jeff Goodmanson, Operations Coordinator, Special Needs Purchasing, DHS. In this session, the process for the collection of medical spenddowns, institutional spenddowns, and waiver obligations will be reviewed for people enrolled in Minnesota Senior Health Options (MSHO), Minnesota Senior Care (MSC), Minnesota Senior Care Plus (MSC+), Minnesota Disability Health Options (MnDHO), and Special Needs BasicCare (SNBC).

This includes details on the collection of the medical spenddown for people enrolled in managed care and how the waiver obligations are deducted on claims for people enrolled in MSC, MSC+, and MSHO. DHS staff will also explain how the institutional spenddown works when the health plan has the nursing facility liability and when they do not have the liability.

*"Transform 2010: Fostering Communities for a Lifetime--Concept and Action"* will be presented on Thursday, July 17, at 9 a.m. at various locations. Transform 2010 seeks to engage and equip Minnesotans in an effort to foster communities that are good places to grow up and grow old, and offer physical, social and service features for their residents of all ages. This program will explore what is a "community for a lifetime" and what communities are currently doing to begin to meet this goal and how can these communities be fostered.

Presenters for this program include:

- Connie Bagley, Southeastern MN Area Agency on Aging
- Kelly Harder, Social Services Director, Steele County
- LaRhae Knatterud, Director, Transform 2010 Project, DHS
- Jon Knopik, Central Minnesota Council on Aging
- Mark Ostgarden, City Planner, Brainerd
- Michael Turpin, Transform 2010, MN Dept of Human Services
- Pam Van Zyl York, Division of Health Promotion and Disease Prevention

Pre-registration for all DHS videoconferences is required. At the online registration site at <http://agingtraining.dhs.state.mn.us>, you will find the list of videoconference locations for each program. Registration closes at 5 p.m. on the Monday prior to the session.

By registering, you understand that the session will be videotaped with the possibility of your visual and audio likeness being

recorded for reproduction and distribution. Copies of some videoconferences are available for ordering for a fee after the session ends. If the presenter(s) gives approval, you can order copies from the registration page.

**For Further Information:**

Contact Mary Youle at [myoule@mhha.com](mailto:myoule@mhha.com).

**Association News**

**MHHA Launches New Online Community for CFOs**

MHHA CFOs, as well as other members interested in financial issues affecting long-term care providers, are invited to subscribe to MHHA's newest online community--the CFO Network. This online community is designed to enable CFOs to network with their colleagues on a variety of topics in an easy to use online forum.

Members are encouraged to log in today and get engaged in the CFO Network or another of our online communities.

Subscribing is easy:

1. Access Online Communities by logging in to the member area of the MHHA web site, <http://www.mhha.com>, and click on "Communities" from the blue navigation bar or select "Online Communities" from the main navigation bar.
2. The Online Communities web page is divided into three areas: "My Community News," "My Communities" (communities that you are subscribed to), and "Other Communities" (communities that are available for you to subscribe to.)
3. Go to the "Global Preferences" link found in the gray navigation bar (below your name). On this screen you will again see which communities you are subscribed to and which are available for you to subscribe to. Select the community you would like to join and click on the word "Subscribe."
4. On the same screen, choose how you would like to receive forum posts and/or news bulletins - either immediately via e-mail from each post; a digest of a day's posts, a digest of a week's posts, or not receiving e-mails but reading online on your own time. New online communities will be added under "other communities" on a regular basis, so follow the instructions above to subscribe to any of them that you find interesting.
5. You are now ready to participate, so click on "Communities" from the blue bar and select the forum you would like to post to. You can respond to an existing question or create a new discussion topic of your own.

MHHA realizes this new member service will take some practice. To help, members can access a step-by-step Reference Guide on how to use MHHA's Online Communities, available online at: [www.mhha.com/inc/data/OnlineCommunitiesRefguide.pdf](http://www.mhha.com/inc/data/OnlineCommunitiesRefguide.pdf).

**For Further Information:**

Contact Jenny Mims at [jmims@mhha.com](mailto:jmims@mhha.com) with questions about how to use e-communities.

Contact Jeff Bostic at [jbostic@mhha.com](mailto:jbostic@mhha.com) with questions about the activities of the CFO Network.

**What Senior Housing Managers Need to Know**

MHHA will present *Essential Legal Issues Every Senior Housing Manager Must Know* on Thursday, July 24, at the University of Minnesota Continuing Education and Conference Center. This one-day intensive learning experience is designed to enhance operations and minimize risk.

The suggested audience is professionals working for an organization that is new to senior housing, a current provider seeking to expand programs or those needing a refresher in senior housing laws:

- Owners and managers of senior housing
- Home care providers
- Staff from organizations providing a continuum of services to older adults
- Other interested aging services professionals

**If you attend, you will:**

- Get valuable information, strategies and resources to help your organization maintain compliance with the myriad regulations that govern senior housing.
- Know which licenses are most appropriate for your organization and which ones must be obtained from the Minnesota Department of Health before you can serve and house older adults.
- Review Landlord Tenant laws to make sure you are in compliance and minimize legal risk.
- Re-examine the laws related to senior housing operations which are uniquely Minnesotan to ensure you are still meeting their requirements.
- Understand your obligations under the laws that are designed to protect physically and mentally frail older adults.
- Learn more about the laws that formally govern the relationships between employer and employees and evaluate your organization's employment policies and procedures.

**For Further Information:**

Contact Heidi Simpson at [hsimpson@mhha.com](mailto:hsimpson@mhha.com).

**MHHA Sells Out Expo for the 2009 Institute: Wait List Available**

The biggest show of its kind in Minnesota is SOLD OUT eight weeks earlier than last year.

MHHA is starting a wait list for the 2009 Institute in case a current exhibitor cancels. To be placed on the 2009 wait list, please e-mail Jenny Prosser and ask to be placed on this list. Preference on the wait list will be given to MHHA Business Partners and/or Alliance Purchasing vendors. MHHA will accept exhibitor contracts for the 2010 Institute in December.

**For Further Information:**

Contact Jenny Prosser, [jprosser@mhha.com](mailto:jprosser@mhha.com).

**Revenue Reporting Notices Mailed to Members**

In preparation for developing the 2009 budget, revenue reporting notices were mailed to members late last week. Members are asked to provide revenue for 2007 for the purpose of calculating 2009 membership dues. Notices for multi-site organizations were sent to corporate offices. For your convenience, revenue may be reported online at <http://www.mhha-apps.com/dues/dallogin.asp>. Your response is requested by July 11.

**For Further information:**

Contact Sarah LaRose-Holland at [slarose-holland@mhha.com](mailto:slarose-holland@mhha.com).

**Nominations Open for MHHA Board of Directors**

Positions on the MHHA Board of Directors are open and will be voted on at the MHHA Annual Business Meeting on Sept. 17. Members wishing to nominate an individual should click <http://www.mhha.com/inc/data/NominationOfficers.pdf> and return to it to the attention of Daniel Lindh, chair of the nominating committee, at MHHA's office address, 2550 University Ave. W., Suite 350S, St. Paul MN 55114. Faxes also are welcome (651-645-0002).

Nominating Committee Chair Daniel Lindh invites and encourages members to indicate an interest in association leadership by nominating themselves or a colleague for the available positions. The deadline is **Friday, July 18**.

**Nominations Sought for MHHA Honorary Membership**

Honorary membership in MHHA may be bestowed by election at each annual meeting according to the association's bylaws. The deadline for nominations being sought for these persons of distinction for 2008 is **Friday, July 18**.

Members wishing to nominate an individual for honorary membership should click <http://www.mhha.com/inc/data/HonoraryNominations.pdf> and return to it to the attention of Daniel Lindh, chair of the nominating committee, at MHHA's office address, 2550 University Ave. W., Suite 350S, St. Paul MN 55114. Faxes also are welcome (651-645-0002).

**For Further Information:**

Contact Nancy Garrett at [ngarrett@mhha.com](mailto:ngarrett@mhha.com).

**Education Solutions At-A-Glance**

Click for more information or to register. <http://tinyurl.com/2egar8>.

**Preparing the New LTC DON for a Successful Future**, July 22-24, Aug. 26-28

<http://tinyurl.com/5nwumw>

\*Sponsored by Alliance Purchasing and MSC

**Midsummer Senior Living Conference**, July 23 (St. Paul)

\*Sponsored by Orbovich & Gartner Chartered and Professional Portable X-ray Inc.

**Essential Legal Issues Every Senior Housing Manager Must Know**, July 24 (St. Paul)

Nurse Managers in Home Care Settings Certificate Program, July 29-30, Aug. 13-14, Sept. 9-10 (St. Paul)

**Innovation and Technology Conference**, Aug. 6-7 (Blaine)

**MHHA Annual Meeting & Leadership Forum: Beyond Expectations**, Sept. 16-19 (Brainerd)

**Marketing & Sales for Senior Living Communities Certificate Program**, October 13, 14, 15 (St. Paul)

\*Sponsored by Welsh Construction and Genesis Architecture

**Assisted Living Home Care Conference**, Oct. 22 (St. Paul)

Co-Sponsored with the Minnesota HomeCare Association

**Financial Management for Home Care Providers**, Fall date to be announced (Twin Cities)

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**2009 Institute for Older Adult Services**, Feb. 11-13, 2009 (Minneapolis)

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Making Dreams Come True (session 120)  
Culture Change: Do More Than Look At Me - Involve Me (session 105)  
Motorized Assistive Devices: Balancing Individual Rights and Safety (session 133)  
Creating Relationship-Centered Environments For Living (session 206)  
Ethical Dilemmas in Refusal of Cares: The Challenge and Solution (session 222)

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