



Each issue of *Assisted Living Consult* presents learning opportunities for assisted living facility staff. We urge practitioners and facility leaders to have their staff read the articles and challenge their knowledge using this Q&A section as a training test. By copying this page for each of your key staff, you can challenge their knowledge on these critical issues by having them answer these questions. Please note that each article title appears in bold with specific related questions.

Negotiating the Complexities of the Long Term Care Continuum

1. There currently exists one well accepted definition for assisted living facilities (ALFs)?
 - a. True
 - b. False
2. Of the residents who live currently in ALFs, what percentage need help with activities of daily living (*eating, bathing, dressing, toileting, and transferring*)?
 - a. 0 – 25%
 - b. 26 – 50%
 - c. 50 -75%
 - d. 75 – 90%
3. ALFs offer the opportunity to decrease adverse medications outcomes through:
 - a. implementation of additional support in administration
 - b. monitoring of drugs
 - c. medication therapy management services available under Medicare Part D
 - d. All the above
4. Staff should be knowledgeable regarding:
 - a. Basic changes in aging
 - b. Falls prevention
 - c. Communication techniques
 - d. All the above

The Role and Responsibility of Nurse Practitioners in ALFs

5. The multifunctional role of the nurse practitioner can include

acting as all of the following:

- a. registered nurse (RN)
 - b. care manager
 - c. primary care provider
 - d. All the above
6. The 1997 Balanced Budget Act allowed for NPs to bill Medicare independently for their services and expanded their sites of service. Medicare will reimburse NPs for services at 85% of the physician's allowable fee.
 - a. True
 - b. False
 7. Nurse practitioners are able to be employed by of all the following except:
 - a. ALF
 - b. Managed care organization
 - c. Medicare
 - d. Self-employed
 8. Collaborative practice agreements are between a nurse practitioner and the facility administrator.
 - a. True
 - b. False

AMDA Clinical Practice Guideline: Acute Change of Condition

9. An acute change of condition always requires an emergency room evaluation.
 - a. True
 - b. False
10. Which of the following conditions are usually not associated with an ACOC?
 - a. Urinary tract infection
 - b. Fracture
 - c. Alzheimer's dementia
 - d. Stroke
11. Knowledge of the resident's wishes or advance directive should not influence the decision to transfer a resident out of the facility?
 - a. True
 - b. False
12. One of the most effective methods of communicating an ACOC is by writing a note for the attending physician.
 - a. True
 - b. False

Are ALFs Long-Term Care Facilities?

13. The Centers for Medicare and Medicaid Services (CMS) are responsible for defining long term care facility.
 - a. True
 - b. False
14. According to CMS, the definition of a long-term care facility includes which of the following:
 - a. Skilled nursing facility
 - b. Assisted living facility
 - c. Group homes
 - d. Naturally occurring retirement communities
15. Frail elders will receive Medicare benefits based on their conditions rather than their site of residency.
 - a. True
 - b. False

As the MMA Storm Moves Toward Us.....

16. Copayments for medications are waived for residents of all long-term care facilities including ALFs.
 - a. True
 - b. False
17. Medication Therapy Management Services (MTMS) are available to ALF residents meeting which of the following:
 - a. Have multiple chronic diseases
 - b. Take multiple prescription drugs
 - c. Are likely to incur high drug costs
 - d. Must meet all of these conditions.
18. Pharmacists can provide services to ALF residents with services that can:
 - a. Maximize adherence
 - b. Encourage specific products
 - c. Ensure safety and prevent medication-related problems
 - d. Reduce medication costs **ALC**

Please see Answer Key on page 36.