

# Researchers claim SNFs underreported antipsychotic prescribing, but provider advocates dispute findings

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Becky Briesacher, Ph.D.

Nursing homes are underreporting the use of antipsychotics, a new study claims, but industry executives criticized researchers' conclusions, citing the use of old data.

Experts at Northeastern University published their work [last week](#) in the journal *Aging & Mental Health*. The researchers compared trends in self-reported antipsychotic prescribing relative to claims-based prescribing. In a review of self-reported data across nearly 12,000 skilled nursing facilities, the researchers said SNFs did not identify up to 6,000 residents per calendar quarter who were receiving antipsychotics.

“This is the first time that this has ever actually been measured, how well they self-report antipsychotic use,” said Becky Briesacher, Ph.D., associate professor in Northeastern’s School of Pharmacy. “Since I’m the first one to say that we think there’s a gap, there isn’t any reason why anyone would have addressed it, because they didn’t even know it existed.”

Nursing home industry advocates, meanwhile, were swift to dispute findings from the analysis. Barbara Gay, vice president of public policy communications for LeadingAge, noted the study covers only 2011 to 2013. In the five years since, the majority of SNFs and the Centers for Medicare & Medicaid Services have pushed to reduce and eliminate the inappropriate use of such meds.

“The use of old, outdated data invalidates this report as an indicator of the current incidence of inappropriate medication of nursing home residents,” Gay told *McKnight’s*. “In the years since the report’s data was collected, nursing homes have worked hard to reduce inappropriate drug use. CMS also has tightened the rules against improper drug use and the enforcement system that ensures compliance with the new rules.”

Current reports of the incidence of drug use in SNFs are no longer dependent on self-reported data, Gay said. The annual survey process has been directed as “ascertaining actual, verifiable use of antipsychotics.”

Briesacher’s analysis, which looked at prescribing trends among nearly 590,000 long-stay nursing home residents over a two-year period, found SNFs underreported their prescribing levels on average by 1 percentage point per quarter, relative to Medicare Part D claims. Residents with dementia, Alzheimer’s disease or bipolar disorder were at the highest risk for underreported prescribing before Medicare’s campaign to address these rates, authors wrote.

Information that’s collected on the MDS, which has a seven-day window, may also vary from Medicare Part D claims, said David Gifford, M.D., SVP of quality and regulatory affairs for the American Health Care Association. MDS only looks at data administered in the past seven days, but Part D captures all prescriptions.

“Data shows that long-term care providers have reduced antipsychotic use,” Gifford asserted. “There is no question that we can continue to improve and will seek ways to do so by collaborating with stakeholders across the industry.”

Presented with AHCA and LeadingAge’s comments, Briesacher stood by the findings, but acknowledged strides made by the field.

“Most facilities are doing good work. I don’t want to send a message that all nursing homes are doing a bad job,” she told *McKnight’s*.