

## Don't Believe the Hype – Inappropriate Psychotropic Drug Use in Nursing Homes is Still an Epidemic

In 2012, the Centers for Medicare and Medicaid Services (CMS) announced the [Partnership to Improve Dementia Care in Nursing Homes](#) following a [withering Office of Inspector General \(OIG\) report](#) finding rampant misuse of antipsychotic drugs in nursing homes throughout the country. A centerpiece of the Partnership was a series of antipsychotic reduction goals, which ultimately called for a 30% reduction in antipsychotic use in nursing homes by the end of 2016.

In its latest report on antipsychotic use in nursing homes, the Centers for Medicare and Medicaid Services (CMS) states that antipsychotic use has declined 35% nationally since 2011. (National Partnership to Improve Dementia Care in Nursing Homes: Antipsychotic Medication Use Data Report, October 2017.) That sounds impressive but a close look behind the numbers demonstrates that epidemic misuse of psychotropic drugs has continued - albeit better hidden from the public.

### Hiding Antipsychotics in a Phony Diagnosis

The CMS measure for antipsychotic use excludes residents with certain diagnoses, like schizophrenia. **This measure shows a 35% reduction in antipsychotic use but the actual reduction in antipsychotic use in nursing homes is only 23%.** Why the difference? Nursing homes are using fake schizophrenia diagnoses so antipsychotics are “not counted.” (The full antipsychotic measure is available at: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/Minimum-Data-Set-3-0-Public-Reports/Minimum-Data-Set-3-0-Frequency-Report.html>)

Year	CMS Antipsychotic Measure	Full Antipsychotic Measure	Difference (hidden use)
2011	23.90%	26.20%	-2.30%
2012	22.30%	25.00%	-2.70%
2013	20.30%	23.30%	-3.00%
2014	19.10%	22.40%	-3.30%
2015	17.00%	21.10%	-4.10%
2016	16.00%	20.50%	-4.50%
2017	15.50%	20.19%	-4.69%

Antipsychotic use that is hidden from the CMS measure has **more than doubled** since 2011, primarily because the percentage of nursing home residents with schizophrenia has gone from 6.5% to 8.5% (a 31% increase). However, reported symptoms of schizophrenia in nursing homes have decreased (reported resident hallucinations, delusions, and psychosis are all significantly down since 2011). Thus, it appears there is a large increase in bogus schizophrenia diagnoses to prevent antipsychotic use being counted by CMS. [Many health care providers have noticed a suspicious increase in schizophrenia diagnoses](#) and others suspect the [reported reductions in antipsychotic use “may be exaggerated.”](#)

## Switching to Other Drugs

The inappropriate use of chemical restraints to sedate and subdue “problem” residents is not limited to just antipsychotics. Anti-anxiety drugs, which used to be called tranquilizers, are also commonly used to control nursing home residents. Since CMS’s National Partnership, the use of anti-anxiety drugs has barely budged, trickling down from 21.4% in 2011 to 20.4% in 2017, an overall reduction of 5%. And that doesn't account for the rise in use of drugs that are not reported to CMS at all: Depakote (an anti-seizure drug) and Nuedexta ([the new kid on the block](#)). [A recent study](#) found that 14.3% of elderly nursing home residents were receiving an anti-seizure drug while other reports suggest use is on the rise because these drugs are “not counted” by CMS.

CMS’s approach to reducing the misuse of psych drugs in nursing homes has been disproportionately focused on education - asking rather than compelling - facilities to improve their care. Very little has been done to enforce the law and ensure residents are not chemically restrained. As a result, good nursing homes have gotten better but bad nursing homes could care less. In California alone, 78 nursing homes drug at least half of their residents with antipsychotics and 54 drug one-third or more residents with anti-anxiety drugs.

In October 2017, CMS doubled down on its weak approach to the misuse of psychotropic drugs. In announcing its new goals for antipsychotic reduction CMS stated:

*Nursing homes with low rates of antipsychotic medication use are encouraged to continue their efforts and maintain their success, while those with high rates of use are to work to decrease antipsychotic medication use by 15 percent . . . by the end of 2019.*

This announcement is tantamount to a eulogy for the National Partnership, which has coasted for years on tepid commitment from CMS. The announcement tells most nursing homes the job of reducing antipsychotic use is largely done. For the other nursing homes that have done nothing, comically described as “late adopters,” CMS is saying “please try again to slightly reduce your extreme levels of drugging by the end of the decade. Beware, if you ignore us again, we might ask you drug offenders to try again in 2020.”

Misuse of antipsychotics and other psychotropic drugs continues to be one of the most pernicious problems in nursing homes and deserves a real campaign marked by enforcement of our laws and improvement of our care standards. While CMS touts progress, a close look reveals that much of this progress is illusory. The numbers it uses are hype - don’t believe them.

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