



Long-Term Care Facilities

Long-term care facilities, commonly known as nursing homes, provide rehabilitative and other health-related services, along with room and board, to individuals of all ages, although the majority of residents are elderly. Long-term care facilities are designed primarily for individuals who require 24-hour supervision by a registered nurse, however, various levels of care are available depending on the facility and applicable state regulations. This guide provides an overview of the levels of care you'll find in long-term care facilities, staffing and cost, as well as a checklist for evaluating facilities you are considering.

Levels of Care In a Long-Term Care Facility

All long-term care facilities must offer 24-hour supervision by a registered nurse, and be overseen by a doctor who serves as the medical director. And now, more and more facilities are offering additional levels of care to meet the needs of more residents. Insurance companies and programs (including Medicare and Medicaid) typically determine coverage based on the level of care provided in a facility. Therefore, it is important to understand the following various levels of coverage that may be offered by a facility.

- **Custodial Care**—Assistance with activities and functions of daily living such as eating, bathing, dressing and using the restroom. Although Medicare offers no coverage for custodial care, Medicaid typically does in some states. Many private insurance policies offer some coverage as well.

- **Intermediate Care**—Custodial care plus some form of medical care and supervision. Medicare does not provide any coverage for intermediate care, though Medicaid typically does. Medicare Part B, however, covers physician services for patients using intermediate care, but does not cover the cost of regular nursing home care. Private insurance may offer some coverage.
- **Skilled Care**—Health care services furnished by licensed medical professionals such as nurses and therapists. Skilled care facilities cater to people with chronic illnesses and impairments by offering high levels of care, therapy and monitoring in addition to personal care assistance, typically from licensed vocational or practical nurses. Medicare, Medicaid and private insurance will usually pay for skilled care up to pre-determined coverage limits, as long as the care is prescribed by a physician.
- **Sub-Acute Care**—Medical care, including 24-hour monitoring and rehabilitative therapies, designed for patients who require high levels of medical care, usually after hospitalization, surgery or illness. (Hospital-based facilities are for temporary care only). Medicare, Medicaid and private insurance typically cover some of the cost.

Remember, all long-term care facilities must provide daily supervision by a registered nurse, but additional levels of care are optional. Many long-term care facilities also offer separate wings or units for residents with Alzheimer's disease or dementia.

When considering long-term care facilities, find out what levels of care are offered—and what is covered by insurance—and make sure the facility meets the needs of you or your loved one. Keep in mind that your (or your loved one's) needs may change over time, so try to find a facility that will accommodate both current and future needs.

Staffing

Long-term care facilities are required to have a registered nurse on duty and a physician on call 24 hours a day. In addition, a physician must serve as the medical director of the facility. Physicians and certified nurse practitioners (advance practice nurses who hold a master's degree and who can provide primary care in nursing homes and other settings) may take turns visiting patients. Nursing home administrators are required to have a current state license. Other staff members typically include:

- Director of nursing
- Physical therapists
- Social workers
- Speech therapists
- Activities director and staff
- Respiratory therapists
- Nursing aides
- Food services director and staff
- Occupational therapists
- Housekeeping director and staff

Services Provided

Long-term care facilities may provide a variety of medical and social services. Here are just a few examples:

- Custodial care
- Intermediate care
- Excursions to local sights
- Recreational activities (e.g., games, cards, etc.)
- Skilled nursing care
- Activities to improve memory
- Respiratory therapy
- Speakers
- Occupational therapy
- Exercise classes
- Intravenous therapy

- Entertainment (e.g., parties, dances, sing-alongs)
- Social services

Cost

The cost of a long-term care facility depends on its location and the level of care a resident requires. The average cost of a nursing home in the United States is approximately \$69,000, however, this varies dramatically according to where you live and it can be significantly higher in some areas of the country. Medicare pays minimal long-term health care costs and only for skilled care (additional restrictions apply). Medicaid covers most of the cost but only for those who are eligible, and many facilities only have a limited number of spaces for Medicaid patients. While long-term care facilities are not required to set aside beds for Medicaid patients, if a current resident becomes eligible for Medicaid, the facility is required to accept Medicaid payment and cannot evict the resident. Private medical insurance or long-term care insurance may cover some of a long-term care facility's cost, depending on the policy.

Licensing/Regulation/Accreditation

Long-term care facilities must comply with numerous rules and regulations at both the federal and state level. Every facility must have a license, usually issued by the state, which ensures that it has passed inspection and has met certain standards. Facilities that don't comply with regulations may face stiff penalties and fines in addition to exclusion from participation in Medicaid or Medicare reimbursement.

Some long-term care facilities are also accredited—meaning that the facility is operating in compliance with the standards set by an accrediting organization. The two major accrediting bodies of long-term care facilities are the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and the Commission on Accreditation of Rehabilitation Facilities (CARF). Keep in

mind, however, that while accreditation indicates that a facility has complied with certain safety standards set by the accrediting body, it does not guarantee quality care. Similarly, just because a facility is not accredited, it does not indicate that it is substandard.

Admissions Contract

All long-term care facilities have an admissions contract—a legally binding document that must be signed by the resident (or his or her caregiver/guardian) and the facility. The contract should clearly state all costs (including additional costs for items or services not included in the regular daily charge), services included, and legal responsibilities of both the resident and the facility. It should also clearly explain the facility’s policy on holding a bed if the resident leaves temporarily for such reasons as hospitalization or vacation.

Before you sign an admissions contract, take a copy home and review it in depth. As with any legal document, consult an attorney or your local ombudsman (described later in this guide) before you sign it. Beware of contracts that require a resident to pay privately even after he or she has financially qualified for Medicaid. This clause is illegal in contracts drafted by Medicare- and Medicaid-certified facilities. In addition, be sure your rights (or the rights of your loved one) are protected. Please refer to the section, “Protecting Residents’ Rights in Long-Term Care Facilities,” for more information.

Evaluating Long-Term Care Facilities

Visit each long-term care facility you are interested in twice; once at an appointed time and once unannounced. If you are helping a loved one evaluate facilities, take him or her with you if possible and invite feedback. Seek feedback from both current residents and their family members. In general, look for a safe, clean, well-run facility that is licensed by the state and is Medicare- and Medicaid-certified. Find out what levels of care are

A long-term care facility cannot refuse to admit you or your loved one on the grounds that you haven’t disclosed asset information, nor can a facility discharge or transfer a resident who is receiving Medicaid benefits on the grounds of nonpayment. If you or your loved one faces such a threat, contact your local ombudsman immediately.

offered—and what is covered by insurance—and make sure the facility meets the needs of you or your loved one. Keep in mind that individual needs change over time, so try to find a facility that will accommodate your or your loved one’s current and future needs. Set up an appointment with the director or nursing home administrator, and ask many questions. For your convenience, we have included a sample evaluation checklist at the end of this guide.

Protecting Residents’ Rights In Long-Term Care Facilities

The following section details some of the advocate support systems that help patients and their families and explains the rights of patients in long-term care facilities.

OBRA Regulations

Long-term care facilities have improved greatly since the federal government passed the Nursing Home Reform Amendments of the Omnibus Budget Reconciliation Act of 1987 (OBRA). OBRA has improved the quality of nursing home care by requiring periodic, comprehensive assessments of:

- Nursing home residents (to ensure that residents are in the type of facility that best meets their needs)
- Standards for training nurses’ aides
- The use of physical and pharmacological restraints
- Facility quality and cleanliness

Ombudsman/Advocates/Support Systems

Through a federally funded program, each county also has a long-term care *ombudsman*—an advocate for residents in long-term care facilities who investigates complaints and mediates unresolved disputes between care recipients and facilities/caregivers. An ombudsman is educated in the licensing requirements of long-term care facilities as well as residents' rights, and may provide valuable, free assistance in helping you select a facility. *Note*—In addition to an ombudsman, there may be other support and advocacy groups in your area that provide information on selecting a facility.

Residents' Bill of Rights

Residents of long-term care facilities are entitled to the following rights. If you are a caregiver, you are entitled to make sure these rights are upheld on behalf of your loved one.

Residents have the right to:

- Be treated with dignity and respect
- Voice grievances without fear of discrimination, restraint, interference, coercion or reprisal. Residents can expect prompt attention to their complaints.
- Equal access to care and services
- Privacy concerning their personal and medical care, telephone calls, mail, and visits or meetings with family and resident groups
- Inspect and purchase photocopies of records
- Confidentiality regarding their medical records
- Full information concerning their health and the right to participate in decisions pertaining to their care and treatment
- Refuse any type of treatment including experimental treatment
- Information on Medicare and Medicaid and how to apply for those benefits
- Information on all facility services and their costs
- Information regarding ombudsmen and other advocacy groups
- Manage their own financial affairs without being required to deposit personal funds with the facility
- Choose a personal physician
- Perform, or refuse to perform services for the facility. Payment for any work must be at or above the current minimum wage.
- Advance notice concerning any change in rooms or roommates
- Share a room with a spouse
- Choose their own activities, health care and any other factors affecting their lives within the facility
- Organize or participate in resident councils and other groups
- Be free from verbal, mental, sexual and physical abuse, as well as corporal punishment and involuntary seclusion

Facility Standards

Facilities must:

- Provide residents (or caregivers) with a copy of the latest inspection report and any written plans to correct violations
- Provide residents with individualized financial reports, at least quarterly, and upon request
- Protect resident funds with a security bond
- Notify residents when their balance comes within \$200 of the Medicaid eligibility limit
- Provide access to any relevant agency of the state or any entity that offers health, legal, social or other services
- Use identical policies regarding transfer, discharge and other services for all residents
- Notify a resident of the reason(s) for transfer or discharge and provide sufficient preparation to ensure a safe transfer or discharge

- Provide written notice of state and facility bed-hold policies before and at the time of transfer
- Follow a written policy for re-admittance if the bed-hold period is exceeded
- Thoroughly investigate all alleged violations and report the results
- Provide a private space for residents' group meetings, and listen to and act upon the group's requests
- Provide social services to maintain the highest level of well-being for each resident
- Provide a safe, clean, comfortable, home-like environment
- Allow residents to use personal belongings to the fullest extent possible
- Provide housekeeping and maintenance services; clean bath and bed linens; private closet space; adequate and comfortable lighting and sound levels; and comfortable and safe temperature levels

Facilities must not:

- Charge Medicaid residents for items or services covered by Medicaid, including routine personal hygiene items and services
- Use physical restraints (unless ordered by a physician) or psychoactive drugs for disciplinary purposes or convenience
- Require third-party guarantee of payment or accept gifts as a condition of admission or continued stay
- Require residents to waive their right to receive or apply for Medicare or Medicaid benefits
- Discharge or transfer a resident unless his or her needs cannot be met, safety is in question, facility services are no longer required, or payment has not been made

Helpful Resources

Centers for Medicare and Medicaid Services

7500 Security Boulevard
 Baltimore, MD 21244
 877-267-2323
www.cms.hhs.gov

This is a federal agency within the Department of Health and Human Services that administers the Medicare and Medicaid programs. Call or visit its web site for information.

Eldercare Locator Hotline

National Association of Area Agencies on Aging
 927 15th Street N.W., Sixth Floor
 Washington, DC 20005
 800-677-1116 | 202-296-8130
www.eldercare.gov

This nationwide service refers people to state and local organizations on aging. It is a public service of the United States Administration on Aging, administered by the National Association of Area Agencies on Aging (NAAAA) and the National State Units on Aging. The NAAAA web site (listed here) can link you to the Eldercare Hotline or you may call toll-free.

Joint Commission on the Accreditation of Healthcare Organizations (JCAHO)

One Renaissance Boulevard
 Oakbrook Terrace, IL 60181
 630-792-5000
www.jcaho.org

This organization accredits home health care organizations including hospitals, long-term care facilities and home care agencies. Call to find out if a facility you are interested in is accredited by this organization.

Medicare Online

www.medicare.gov
 800-633-4227 (1-800-MEDICARE)

This web site provides information on Medicare, Medigap policies and Medicare Health Plans. The site's Nursing Home Compare section lists all Medicare certified facilities in the United States with up-to-date inspection and deficiency information.

National Academy of Elder Law Attorneys

1604 N. Country Club Road
 Tucson, AZ 85716
 520-881-4005
www.naela.com

This nonprofit organization provides educational resources, support and assistance to attorneys specializing in elder law, their clients and their clients' families.

Checklist for Evaluating a Long-Term Care Facility

Consider using this checklist to help you evaluate and assess long-term care facilities. Make copies and take one with you to each facility you visit.

Name of Facility: _____

Licensing and Operation

1. **Is the facility licensed by the state?** *Note*—If it is not licensed, do not consider it!
 No Yes May I see a copy? _____

2. **Does the nursing home administrator have a license?** *Note*—If not, do not consider the facility! No Yes May I see a copy? _____

3. **Is the program certified by Medicare and Medicaid?** No Yes
(If not, then Medicare and Medicaid will not provide any coverage for this service.)
4. **Is the facility accredited?** No Yes By whom? _____

5. **Can you provide me with the latest survey report on the facility?** *Note*—Long-term care facilities are required by law to provide consumers with this report.
 No Yes
6. **How does the facility protect residents' rights?** _____
7. **How long has the facility been in operation?** _____
8. **Have any complaints been registered against the facility?** No Yes
Please explain: _____

9. **Can you provide me with a list of references including residents and physicians?**
 No Yes (Call at least three.)
Reference 1: _____
Reference 2: _____
Reference 3: _____

Program Philosophy and Policies

10. **What is your philosophy of care?** _____

11. Is a doctor's order required for admittance? No Yes

12. What levels of care does the facility offer?

Custodial Skilled care

Intermediate Sub-acute

13. Is a patient assessment conducted? No Yes By whom? _____

14. Are individualized care plans developed for each patient? No Yes

Please explain: _____

15. Do you include the patient and family members in the process of developing a care plan? No Yes Please explain: _____

16. Do the patient and family members receive a copy of the care plan?

No Yes

17. Are patients and/or family members routinely involved in care plan changes?

No Yes Please explain: _____

18. Can a patient be transferred or discharged from a unit or the facility for any reason? No Yes Please explain: _____

19. Is a doctor on call 24 hours a day? No Yes

20. Please explain your policy on the use of physical restraints. _____

Services

21. What services are provided?

Housekeeping

Transportation

Utilities (Does room include cable? Telephone?)

Assistance with walking and/or moving around the facility

Assistance with activities of daily living

Access to health and medical services

- Medication management
- Occupational therapy
- Respiratory therapy
- Social services
- Exercise programs
- Other: _____

Food Services

22. Do you serve three meals a day? No Yes
23. Can meals be provided at any time or are there specific times for meals? _____

24. Is food delivered to residents who are unable to eat in the dining room?
 No Yes
25. Are snacks provided? No Yes
26. Can special dietary needs be accommodated? No Yes
Please explain: _____

Activities

27. What types of activities does the facility offer? _____

28. Are there any therapeutic activities offered? No Yes Please explain: _

29. What kind of entertainment/recreational activities are offered? _____

30. Is the facility sensitive to religious preferences? No Yes
Please explain: _____

31. Do residents participate in activities outside of the facility in the neighboring community? No Yes Please explain: _____

32. Does the center sponsor/offer any other excursions or trips? No Yes
Please explain: _____

33. Are any activities mandatory? No Yes Please explain: _____

Staff and Training

34. What certification/training are staff members required to have? _____

35. Does the facility provide ongoing training for staff members to keep their skills current? No Yes Please explain: _____

36. Is the staff supervised by a skilled professional? No Yes

37. What is the staff-to-resident ratio (the number of staff per resident)? _____

38. Does the facility provide individual attention to residents? No Yes
Please explain: _____

39. Is there 24-hour supervision by a registered nurse or other health professional?
 No Yes

Safety and Security

40. Is the facility handicapped-accessible? No Yes

41. Are bathrooms handicapped-accessible? No Yes

42. What safety features does the facility offer?

Grab bars

Emergency evacuation plan

Railings

24-hour security

Non-slip surfaces

Regular fire drills

Emergency call system

A wander-proof security system

Ramps for wheelchair accessibility

Other: _____

43. Is the outdoor area safe? No Yes Please explain: _____

44. What is your policy on handling thefts reported by residents? _____

Visiting and Family Services

45. What is your visitation policy? _____

46. Are support groups available for residents and/or family members?
 No Yes Please explain: _____

Rooms and Privacy

47. How are roommates paired up? _____

48. Are private rooms available? No Yes
Is there an extra charge? _____

49. May residents bring their own furniture? No Yes

50. Is smoking allowed in the room? No Yes

51. Are pets allowed in the room? No Yes

Finances and Insurance

52. What are the basic terms of the admissions contract? *Note*—Be sure to review the contract thoroughly, and consider having a lawyer review it as well.

53. Please explain the billing, payment and credit policies. _____

54. Are rates clearly outlined? No Yes

55. Will rates increase? No Yes When and how much? _____

56. Are there different costs for various levels of services? No Yes

Please explain: _____

57. What insurance does the facility accept?

Medicaid Medicaid

Private insurance. What types? _____

58. Are other financial programs available to help cover the cost of services?

No Yes Please explain: _____

59. Are advance directives discussed, documented, honored? No Yes

Please explain: _____

60. Who is responsible if finances/insurance run out?

Resident Caregiver

Other Please explain: _____

Note—If you are signing a contract for a loved one, keep an eye out for clauses that indicate you (the caregiver) are responsible for payment.

61. Under what conditions can a contract be terminated, and what are the refund policies? _____

General Observations

Ask yourself the following questions when touring the facility:

62. Is the building clean? No Yes

63. Are there any unpleasant odors? No Yes

64. Is the floor plan easy to follow? No Yes

65. Are cupboards and shelves in the rooms easy to reach? No Yes

66. Are carpets securely tacked to the floor to prevent falls? No Yes

67. Is the facility well-lit? No Yes

68. Is the facility appropriately heated/cooled? No Yes

69. Is there a safe outdoor area for residents to enjoy? No Yes

