

Guide to Choosing a Nursing Home



To help you make important decisions for yourself or for someone you care for.

This booklet explains:

- How to find and compare nursing homes in your area.
- Your nursing home resident rights.
- Where to call for help.

✓ Use the handy tear-out checklist to compare nursing homes. See page 27.





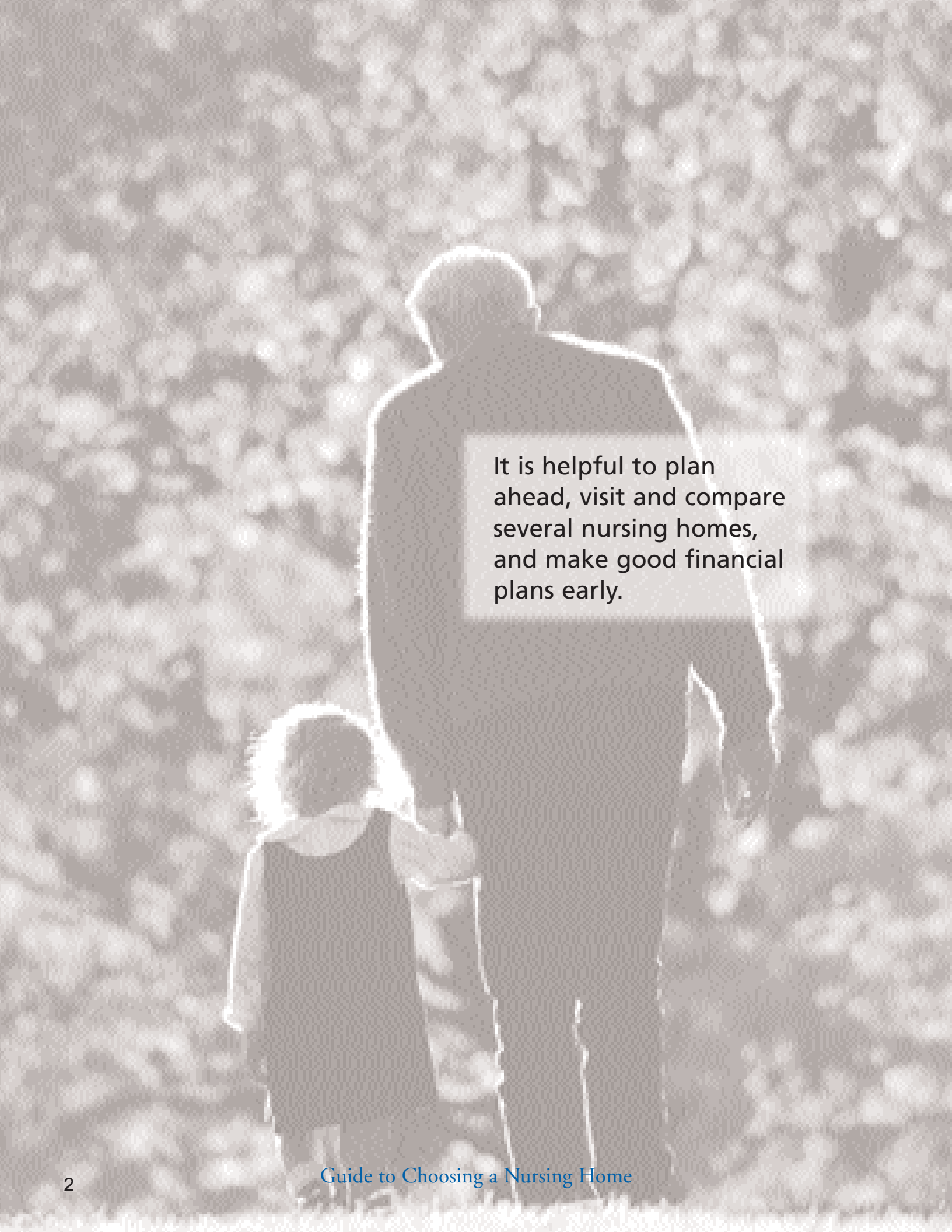
The *Guide to Choosing a Nursing Home* is prepared by the Centers for Medicare & Medicaid Services (CMS). CMS and States oversee the quality of nursing homes. State and Federal Government agencies certify nursing homes.

The *Guide to Choosing a Nursing Home* is not a legal document. The official Medicare program provisions are contained in the relevant laws, regulations, and rulings.

The information in this booklet was correct when it was printed. Changes may occur after printing. For the most up-to-date version, look at www.medicare.gov on the web. Select “Publications.” Or, call 1-800-MEDICARE (1-800-633-4227). A Customer Service Representative can tell you if the information has been updated. TTY users should call 1-877-486-2048.

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It is helpful to plan ahead, visit and compare several nursing homes, and make good financial plans early.

Section 1: Welcome

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The *Guide to Choosing a Nursing Home* is designed to help people find and compare nursing homes. It can help you and your family make your best choice, whether you are planning ahead, or need to make an unexpected decision. It includes information about the types of long-term care, how to find and compare nursing homes in your area, and how to pay for nursing home care. It also provides contact information for organizations that can help answer your questions.

Choosing a nursing home can have great emotional effect on you and your loved ones. It is helpful to plan ahead, visit and compare several nursing homes, and make good financial plans early. Planning ahead gives you and your family more control and can help make sure that your needs are met so you can get good quality care.

Depending on your needs and resources, you may have other long-term care choices like community services, home care, or assisted living. These and other long-term care choices are explained briefly on pages 10-13. Before choosing a nursing home, check to see if one of these other choices may be better for you, or if they might help after a temporary nursing home stay.

See "How to Use This Booklet" on pages 6-7 to help find the information you need.

Medicare covers some skilled nursing and rehabilitative care, but generally does not cover **custodial care** (help with activities of daily living, like bathing, dressing, and using the bathroom). Most people who enter a nursing home begin by paying for their nursing home care out of their own pocket. Residents may pay for their nursing home stay using their personal resources, long-term care insurance, or with **Medicaid** if they are eligible. Medicaid is a joint Federal and State program that helps with medical costs for some people with low incomes and limited resources. Medicaid pays for care for about 7 out of every 10 nursing home residents.

Words in **blue** are defined on pages 58-59.

Welcome

Important if You have Medicare:

- **Medicare Benefits:** Although Medicare **does not** pay for most nursing home care, you will still be able to get Medicare-covered benefits when you live in a nursing home. For example, if you have Medicare Part B, you will still be covered for your yearly flu shot and all other Medicare-covered preventive services.
- **Hospital Discharge:** Many people enter a nursing home after a hospital stay. If you have Medicare and think you are being asked to leave the hospital too soon, you can ask for a review from your [Quality Improvement Organization \(QIO\)](#). Their telephone number is on the copy of **An Important Message About Medicare Rights: Admission, Discharge, and Appeals** that you got when you were admitted to the hospital. You must ask for the review by noon of the first working day after the hospital gives you a written “Notice of Non-Coverage.” You don't have to pay for your hospital stay while the QIO reviews your request. It can take up to three working days.
- **Skilled Nursing Care:** If you need Medicare-covered skilled nursing care after a Medicare-covered hospital stay of three days or more, ask the nursing home staff if they provide the skilled care you need, and if the nursing home is Medicare-certified. For more information on Medicare coverage of skilled nursing facility care, look at www.medicare.gov on the web. Select “Publications” to look at or print a copy of the booklet *Medicare Coverage of Skilled Nursing Facility Care* (CMS Pub. No. 10153). You can also order a free copy by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

Words in [blue](#) are defined on pages 58-59.

Welcome

For Readers Who Are Helping Another Person Choose a Nursing Home:

Many people who use this booklet provide care and/or help make health care decisions for another person. Choosing a nursing home is a difficult yet necessary decision many caregivers must help make.

Your support can help make the change from living at home to living in a nursing home easier for your loved one. Be your loved one's advocate by observing their care and living conditions and discussing concerns with the staff.



Remember, it is important to include the person who needs nursing home care in making decisions whenever possible. Always keep their needs in mind.

Welcome

How to Use This Booklet

Is a nursing home your only choice for the care you need?

Section 2 explains some of the long-term care choices that might be a better choice for you depending on your needs and resources.

Do you need to find a nursing home?

Section 3 gives you steps to find and compare nursing homes in your area and information about where to get answers to your questions.

Do you want to know what to look for when you compare nursing homes?

Section 4 is a handy tear-out checklist you can take on your visits to nursing homes so you know what to look for and what questions to ask.

Made your nursing home choice? What's next?

Section 5 tells you what information you need to have when you make your arrangements to enter a nursing home.

Welcome

How to Use This Booklet (continued)

How do you pay for nursing home and other health care?

Section 6 explains how to pay for nursing home and other health care, including personal resources, help from your State, [Medicaid](#), long-term care insurance, and [Medicare](#).

Now that you are in a nursing home, what do you need to know?

Section 7 explains how to make a change from living at home to living in a nursing home easier, how to resolve problems, how your nursing home care is planned, and your resident rights and protections.

Where can you get more information?

Section 8 tells you how to get free Medicare booklets, information about specific health conditions and diseases, and important telephone numbers of organizations that can help answer your questions.

What do the words in blue mean?

Words in [blue](#) are defined on pages 58-59.

Section 9 explains the words printed in [blue](#) throughout this booklet.

How can I find specific information in this booklet?

Section 10 is an index (alphabetical list) of what is in this booklet and the page number(s) where you can find specific topics.

Welcome

Who Can Help Answer Questions?

Organization:	How they can help:
Area Agency on Aging (AoA)	AoA is a Federal agency that can provide you with a list of the long-term care choices in your State including community services. They can also help you find where nursing homes are located. Look at www.aoa.gov on the web. Or, you can get the telephone number of your AoA from the Eldercare Locator at 1-800-677-1116 (weekdays 9:00 a.m. to 8:00 p.m. Eastern time).
Centers for Medicare & Medicaid Services (CMS)	CMS has free booklets about Medicare coverage and other health related topics. See page 51. For information about the location and quality of nursing homes, look at www.medicare.gov on the web. Select “Nursing Home Compare.” Or, call 1-800-MEDICARE (1-800-633-4227). This is a 24-hour Helpline. TTY users should call 1-877-486-2048.
Eldercare Locator	The Eldercare Locator is a nationwide toll-free service to help older adults and their caregivers find local services for seniors. Look at www.eldercare.gov on the web. Or, call them at 1-800-677-1116 (weekdays 9:00 a.m. to 8:00 p.m. Eastern time).
Long-Term Care Ombudsman	Long-Term Care Ombudsman advocate for residents of nursing homes, board and care homes, and assisted living facilities. See pages 55-57 for the telephone number in your State. They may refer you to a local office.
State Health Insurance Assistance Program (SHIP)	SHIPs are State programs that get money from the Federal Government to give free health insurance counseling and assistance to people with Medicare. Call them with questions about Medicare, insurance and health plan decisions, and your rights. See pages 55-57 for the telephone number in your State.
State Medical Assistance Office	Your State Medical Assistance Office can give you information about State programs that help pay health and nursing home costs for people with low incomes and limited resources. See pages 55-57 for the telephone number in your State.
State Survey Agency	Your State Survey Agency can help you with questions or complaints about the quality of care or the quality of life in a nursing home. See pages 55-57 for the telephone number in your State.

For information about specific health conditions or diseases, see pages 52-54.

Section 2: Choosing the Type of Care You Need

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Choosing a nursing home is a very important decision. You need to think about whether a nursing home is the best choice for you. A nursing home provides care to people who cannot be cared for at home or in the community. For people who can't take care of themselves due to physical, emotional, or mental problems, nursing homes can provide a wide range of personal care and health services. For many people, this care generally is **custodial**, or non-skilled.

Care in a nursing home can be very expensive. Nursing homes usually provide 24-hour medical care as well as room, meals, activities, and some personal care. Most nursing homes charge a basic fee for room, meals, and some personal care. You may have to pay extra for other services or care for special medical needs. It is important to get a list of fees in advance and discuss these costs and how you will pay for them. For more information about paying for nursing homes, see page 35.

A nursing home may not be your only choice for your personal care and health services. Depending on your needs and resources, there are other kinds of living and care choices available for long-term care. You can get long-term care at home, in senior centers, at community centers, or in special retirement or assisted living facilities. You may need help from family and friends, community services, and professional care agencies. You may wish to talk to your family, doctor, or a social worker to help decide what long-term care you need.

Listed on the next few pages are some of the most common kinds of long-term care. These long-term care choices may be called by other names in different states. The services and costs may vary between facilities as well. Call your local Area Agency on Aging for a list of long-term care choices in your state. To get their telephone number look at www.aoa.gov on the web. Or, call the Eldercare Locator at 1-800-677-1116 (weekdays 9:00 a.m. to 8:00 p.m. Eastern time) ask them for your local Area Agency on Aging telephone number. Ask your local Area Agency on Aging for a list of long-term choices in your state.

Choosing the Type of Care You Need

Long-Term Care Choices Include:

Community Services: There are a variety of community services that might help you with your personal activities. Some services, like volunteer groups that help with things like shopping or transportation, may be free. Some services may be available for a cost that can vary depending on where you live and the services you need. Below is a list of some home services and programs that are found in most communities:

- Adult day care
- Meal programs (like Meals-on-Wheels)
- Senior centers
- Friendly visitor programs
- Help with shopping and transportation
- Help with legal questions, bill paying, or other financial matters

For information about community services, call your local Area Agency on Aging. You can get the telephone number of your local Area Agency on Aging by looking at www.aoa.gov on the web. Select “About AoA and the Aging Network.” Then select “Area Agencies on Aging.” Or, you can call the Eldercare Locator at 1-800-677-1116 (weekdays 9:00 a.m. to 8:00 p.m. Eastern time) for your local Area Agency on Aging telephone number.

Home Care: Depending on your needs, you may be able to get help with your personal activities (for example, help with the laundry, shopping, cooking, and cleaning) at home from family members, friends, or volunteer groups. If you think you need home care, talk to your family to see if they can help with your care or help arrange for other care providers.

There are also home health care agencies that give [custodial](#) and/or skilled nursing care in your home. Remember, Medicare only pays for home care if you meet certain conditions. To get a free copy of the Medicare booklet *Medicare and Home Health Care* (CMS Pub. No. 10969), see page 51.

Choosing the Type of Care You Need

Long-Term Care Choices Include: (continued)

Accessory Dwelling Units (ADUs): If you or a loved one owns a single-family home, an accessory dwelling unit (ADU) may help you keep your independence. An ADU, sometimes called an “in-law apartment,” an “accessory apartment,” or a “second unit,” is a second living space within a home or on a lot. It has a separate living and sleeping area, a place to cook, and a bathroom. Space such as an upper floor, basement, attic, or space over a garage may be turned into an ADU. Family members might be interested in living in an ADU in your home, or, you may want to build a separate living space at your family member's home.

Check with your local zoning office to be sure ADUs are allowed in your area, and if there are special rules. The cost for an ADU can vary widely depending on how big it is, and how much it costs for building materials and workers.

Subsidized Senior Housing: There are Federal and State programs that help pay for housing for some older people with low to moderate incomes. Some of these housing programs also offer help with meals and other activities like housekeeping, shopping, and doing the laundry. Residents usually live in their own apartments in the complex. Rent payments are usually a percentage of your income.

Board and Care Homes: Board and care homes are group living arrangements designed to meet the needs of people who cannot live independently but do not need nursing home services. Most board and care homes provide help with some of the activities of daily living such as bathing, dressing, and using the bathroom. Board and care homes are sometimes called “group homes.” Many of these homes do not get payment from [Medicare](#) or [Medicaid](#). The monthly charge is usually a percentage of your income.

Words in [blue](#) are defined on pages 58-59.

Choosing the Type of Care You Need

Long-Term Care Choices Include: (continued)

Assisted Living Facilities: These facilities provide help with activities of daily living like bathing, dressing, and using the bathroom. They may also help with care most people do themselves like taking medicine or using eye drops and additional services like getting to appointments or preparing meals. Residents often live in their own room or apartment within a building or group of buildings and have some or all of their meals together. Social and recreational activities are usually provided. Some assisted living facilities have health services on site. In most cases, assisted living residents pay a regular monthly rent, and then pay additional fees for the services that they get. The term “Assisted Living” may mean different things in different facilities. Not all assisted living facilities provide the same services. It is important that you contact the facility and make sure they can provide you assistance to meet your needs.

Continuing Care Retirement Communities (CCRCs): CCRCs are retirement communities with more than one kind of housing and different levels of care. Where you live depends on the level of care you need. In the same community, there may be individual homes or apartments for residents who still live on their own, an assisted living facility for people who need some help with daily care, and a nursing home for those who require higher levels of care. Residents move from one level to another based on their needs, but stay within the CCRC.

If you are considering a CCRC, be sure to check the record of its nursing home. Your CCRC contract usually requires you to use the CCRC's nursing home if you need nursing home care. Some CCRC's will only admit people into their nursing home if they have previously lived in another section of the retirement community, such as their assisted living or an independent area. Also, many CCRCs generally require a large payment before you move in (called an entry fee) and charge monthly fees. You can also find out if a CCRC is accredited and get advice on selecting this type of community from Continuing Care Accreditation Commission at 1-202-783-7286. Or, you can look at www.ccaonline.org on the web.

Choosing the Type of Care You Need

Long-Term Care Choices Include: (continued)

Another Type of Care Available

Hospice Care: Hospice is a special way of caring for people who are terminally ill, and for their family. This care includes physical care and counseling. The goal of hospice is to care for you and your family, not to cure your illness. If you qualify for hospice care, you can get medical and support services, including nursing care, medical social services, doctor services, counseling, homemaker services, and other types of services. You will have a team of doctors, nurses, home health aides, social workers, counselors and trained volunteers to help you and your family cope with your illness. In many cases, you and your family can stay together in the comfort of your home. [Medicare](#) covers hospice care if you qualify. Medicare does not pay for 24-hour assistance if you get hospice services at home. Depending on your condition, you may get hospice care in a hospice facility, hospital, or nursing home. Room and board are not covered if you get general hospice services while you are a resident of a nursing home or a hospice's residential facility. However, room and board are covered for inpatient respite care and during short-term hospital stays. To get a free copy of the booklet *Medicare Hospice Benefits* (CMS Pub. No. 02154), see page 51.

Some nursing homes may provide respite care. Respite care is inpatient care given to a hospice patient so that the usual caregiver can rest. Medicare covers respite care if you are getting covered hospice care.

Choosing the Type of Care You Need

Getting More Information

Before you choose the type of long-term care you need, you may want to get more information to help you make the best choice. Some free booklets can be ordered, and some information is available on the web. If you don't have a computer, your local library or senior center may be able to help you find the information on their computer.

For more information on long-term care choices:

- Look at www.medicare.gov on the web. Select “Publications” to look at or print a copy of the booklet *Choosing Long-Term Care* (CMS Pub. No. 02223). You can also order a free copy by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. This booklet explains the long-term care choices listed in this section in more detail. It also tells you how to get more information and help with your questions.

For more information on nursing homes:

- You can get a copy of *A Consumer's Guide to Nursing Facilities*. This guide has information on the various types of long-term care facilities, how to choose the proper level of care, and what to look for in a long-term care insurance policy. To order your free copy, call 1-800-628-8140 or, write to the American Health Care Association, 1201 L Street NW, Washington, DC 20005. Or, look at www.longtermcareliving.com or www.ahca.org on the web. Select “Consumer Information.”
- You can get information from the American Association of Homes and Services for the Aging (AAHSA) by calling 1-800-508-9442 or looking at www.aahsa.org on the web. Select “Consumers.” Or, write to AAHSA at 2519 Connecticut Ave., NW, Washington, DC 20008.

Choosing a Nursing Home

Choosing a nursing home is an important decision. Only you can decide if a nursing home is the right choice for you. There are steps you can take to find the nursing home that is best for you. It's important to plan ahead. Planning ahead will help you make a nursing home choice that meets your needs and gives you good quality care. Finding the right nursing home is important because it may be your home for a short or long period of time. You want to be comfortable, secure, and cared for properly.

The steps to choosing a nursing home are:

1. Find out about the nursing homes in your area (see below and page 16).
2. Find out how nursing homes compare in quality (see pages 16-18).
3. Visit the nursing homes you are interested in, or have someone visit for you (see pages 18-22).
4. Choose the nursing home that best meets your needs (see pages 23-26).

Step 1: Find out about the nursing homes in your area.

To find out about the nursing homes in your area:

- Look at www.medicare.gov on the web. Select “Nursing Home Compare.” You can find detailed information on nursing homes in your area.
- Ask the hospital's discharge planner or social worker for a list of local nursing homes, if you are in the hospital. They may help you find an available bed. Some nursing homes work together with hospitals, and some are independent.
- Visit or call your local social service agency or hospital. Ask to speak to a social worker or case manager who can help you find a nursing home in your area.

Choosing a Nursing Home

Step 1: Find out about the nursing homes in your area. (continued)

To find out about the nursing homes in your area: (continued)

- Ask people you trust, like your doctor, family, friends, neighbors, or clergy if they have had personal experience with nursing homes. They may be able to give you the name of a nursing home where they had a good experience.
- Call your Area Agency on Aging. Their telephone number should be listed in your local telephone directory. This agency can give you information about the nursing homes in your area. You can get the telephone number of your local Area Agency on Aging by looking at www.aoa.gov on the web. Select “About AoA and the Aging Network.” Then select “Area Agencies on Aging.”
- Call the Eldercare Locator at 1-800-677-1116 (weekdays 9:00 a.m. to 8:00 p.m. Eastern time) for information about nursing homes in your area.

Step 2: Find out how nursing homes compare in quality.

Quality care means doing the right thing, at the right time, in the right way for the right person, and having the best possible results. Nursing homes are certified to make sure they meet certain Federal health and safety requirements. To find out how nursing homes compare in quality in your area, look at www.medicare.gov on the web. Select “Nursing Home Compare.” You can compare the State inspection reports of the nursing homes in your area and look at other information, like resident characteristics and staffing levels.

Starting spring 2002, for each nursing home in the states of Maryland, Ohio, Colorado, Rhode Island, Washington, and Florida, you can see quality information on “Nursing Home Compare,” including:

- **The Percentage of Residents Who Need More Help Doing Daily Activities** than when their need for help was last assessed, like; 1) feeding oneself, 2) moving from one chair to another, 3) changing positions while in bed, and 4) going to the bathroom alone.

This information will be available for the rest of the country in the fall of 2002.

Choosing a Nursing Home

Step 2: Find out how nursing homes compare in quality. (continued)

- **The Percentage of Residents with Pressure (Bed) Sores.** These are usually caused by constant pressure such as lying or sitting in one position for a very long time.
- **The Percentage of Residents Who Lost Too Much Weight,** which might be unhealthy.
- **The Percentage of Residents with Pain.** This is very bad pain that happens everyday, over the last 7 days, and is very bad or moderate.
- **The Percentage of Residents with Infections.** These include pneumonia, wound infections, urinary tract or a bladder infection.
- **The Percentage of Residents in Physical Restraints.** Physical restraints are any device that keeps a resident from moving freely, like ankle restraints, special types of vests, or chairs with lap trays.
- **The Percentage of Short-Stay Residents (residents who stay for less than 90 days) Who Improved in Walking.** Short-stay residents are in the nursing home less than 90 days. Improvement in walking is an increase in a resident's ability to walk with little or no help at all.
- **The Percentage of Short-Stay Residents with Pain.**
- **The Percentage of Short-Stay Residents with Delirium,** which is a mix of short-term problems with focusing or shifting attention, being confused and not being aware of one's surroundings. These symptoms may appear suddenly and can be reversible. (Note that delirium is not "senility," which is more about learning and memory problems.)

Other ways to find out about nursing home quality:

- Ask friends and other people you know if they are or were satisfied with the quality of care.
- Call the local office of consumer affairs for your state. Ask if they have information on the quality of nursing homes (look in the blue pages of your telephone book for their telephone number).

Choosing a Nursing Home

Step 2: Find out how nursing homes compare in quality (continued).



“I called the Long-Term Care Ombudsman’s Office for information on nursing homes in my town.”

Other ways to find out about nursing home quality: (continued)

- Call your State health department. Ask if they have information on the quality of nursing homes (look in the blue pages of your telephone book for their telephone number).
- Call your [Long-Term Care Ombudsman](#) (see pages 55-57). The Ombudsman program helps residents of nursing homes solve problems by acting on their behalf. Ombudsmen visit nursing homes and speak with residents throughout the year to make sure residents' rights are protected. They are a very good source of general information about nursing homes and can work to solve problems with your nursing home care, including financial issues. They may be able to help you compare the nursing home's strengths and weaknesses. Ask them questions like how many complaints they have gotten about a nursing home, what kind of complaints they were, and if the problems were resolved.

Step 3: Visit the nursing homes you are interested in, or have someone visit for you.

Take the Nursing Home Checklist on pages 27-32 with you when you visit. Fill it out and compare the nursing homes in your area.

Before you make a decision about the nursing home, visit the nursing homes you are interested in. A visit gives you the chance to see the residents, staff, and facility. It also allows you to talk with nursing home staff, with the people who live and get care at the nursing home and their family members. Be sure to call the nursing home office and make an appointment to tour the nursing home before you visit.

If you can't visit the nursing home yourself, you may want to get a family member or friend to visit for you. If a family member or friend can't visit for you, you can call for information. However, a visit gives you a better way to see the quality of care and life the residents get.

Choosing a Nursing Home

Step 3: Visit the nursing homes you are interested in, or have someone visit for you. (continued)

Listed below are some tips to help you get ready for your visit:

1. Get Information, see below.
2. Visit the Nursing Home, see page 20.
3. Ask Questions, see pages 21-22.

Get Information

Call About Services:

- What services does the nursing home provide?

Call About Fees:

- Do they charge a basic fee for room, meals, and personal care?
- Do they charge extra for other services or care for special medical needs?

See the Inspection Report:

- Get a copy of the nursing home inspection report from “Nursing Home Compare” at www.medicare.gov on the web (see page 27). The inspection report tells you how well the nursing home meets Federal health and safety requirements.
- The nursing home must have the results of the most recent survey of the facility done by Federal or State surveyors available for you to look at.

Choosing a Nursing Home

Step 3: Visit the nursing homes you are interested in, or have someone visit for you. (continued)

Visit the Nursing Home

Review Information:

- Before your visit, go over any information you have already gathered.

Take a Formal Tour:

- Make an appointment with the nursing home before you visit.
- Take a formal tour with a nursing home staff member.
- Ask questions during your tour (see page 21 and pages 27-32), including questions about the quality measures from “Nursing Home Compare,” at www.medicare.gov on the web.
- Look around to get a better picture of the services, activities, and quality of care and life for the residents.

Remember, take the Nursing Home Checklist on pages 27-32 with you when you visit. Fill it out and use it to compare the nursing homes in your area.

Visit Again:

- Revisit the nursing home a second time, on a different day and at a different time of the day than when you first visited. Staffing can be different at different times of the day, and on weekends.
- Try to visit during the late morning or midday. This allows you to see the residents when they are out of bed, eating, and going to activities.

Go to Council Meetings:

- Ask a nursing home staff member if you can get permission from the resident’s or family council’s participants to attend a meeting of the nursing homes’ resident council and/or family council meeting. These councils are usually organized and managed by the resident’s families to improve the quality of care and life for the residents and address concerns.

Choosing a Nursing Home

Step 3: Visit the nursing homes you are interested in, or have someone visit for you. (continued)

Ask Questions

Use the Nursing Home Checklist:

- Ask questions from the Nursing Home Checklist (see pages 27-32). The Nursing Home Checklist can help you to know what to look for and what questions to ask so you can compare nursing homes. This checklist has questions about basic information, resident appearance, nursing home living spaces, staff, residents' rooms, hallways, stairs, lounges, bathrooms, menus and food, activities, and safety and care.

For example:

- Is the nursing home certified by Medicare and Medicaid?
- Is there a bed available? (Is there a waiting list?)
- Is the nursing home easy to visit for family and friends?
- Ask to see a copy of the nursing home's most recent inspection report. If any deficiencies were found, ask if they have been corrected and ask to see the plan correction.

Ask about Satisfaction:

- Talk to staff, residents, and family members if you can. Ask them if they are satisfied with the nursing home and its services.

Other Questions:

- Write down any questions you still have about the nursing home or how the nursing home will meet your needs.

Choosing a Nursing Home

Step 3: Visit the nursing homes you are interested in, or have someone visit for you. (continued)

Ask Questions (continued)

Other Questions: (continued)

- Ask the staff about the quality information from “Nursing Home Compare,” at www.medicare.gov on the web. This may help you compare nursing homes.
- Ask the staff to explain anything you see and hear that you don't understand. For example, a person may be calling out. It may be because they are confused, not because they are being hurt or neglected. Don't be afraid to ask questions.

Don't go into resident rooms or care areas without checking with the resident and nursing home staff first. Residents have a right to privacy.

Choosing a Nursing Home

Step 4: Choose the nursing home that best meets your needs.

When you have all the information about the nursing homes you are interested in, discuss it with your family, friends, doctor, clergy, spiritual advisor, or social worker. Talk with people who understand your personal and health care needs. They can help you make a choice that best meets your needs.

If you are helping someone who is about to go into a nursing home, get him or her involved in making the decision as much as possible. People who are involved from the beginning are better prepared when they move into a nursing home. If the person you are helping is not alert or able to communicate well, keep his or her values and preferences in mind. Finding a nursing home that has the right services, and a pleasant comfortable atmosphere, often requires a lot of planning.

If you find more than one nursing home you like with a bed available, use all the information you get to compare them. Trust your senses. If you don't like what you see on a visit, if the facility isn't clean, or if you weren't comfortable talking to the nursing home staff, you may want to choose another nursing home. If you feel that the residents are treated well, the facility is clean, and the staff is helpful, you might feel better about your decision. Remember that the appearance of a nursing home is not as important as the quality of care and life, and a friendly, caring atmosphere.

Important: If you visit a nursing home that you don't like, you don't have to choose to go there. Making a good choice for quality care is important. If you are in a hospital, talk to the hospital discharge planner or your doctor before you decide not to go to a nursing home that has an available bed. They may be able to help you find a more suitable nursing home, or arrange for other care, like short-term home care, until a bed is available at another nursing home you choose. You may be billed for any additional days you stay in the hospital.

Choosing a Nursing Home

Step 4: Choose the nursing home that best meets your needs. (continued)

Important: (continued)

Moving is difficult, so try not to move more than once. However, an extra move may be better for you than choosing to go to a facility that is not right for you. Be sure to explain to your doctor or discharge planner why you are not happy with a facility they may be recommending.

Once in the nursing home, if you find that you don't like the nursing home you chose, you can move to another facility with an available bed. The nursing home you leave may require that you let them know ahead of time that you are planning to leave. Talk to the nursing home staff about their rules for leaving. If you don't follow the rules for leaving, you may have to pay extra fees.

Some important things to think about when making your choice:

Each nursing home is different. Spend time with your family thinking about what is important to you. The list below can help you see how nursing homes may vary.

Quality of Life: Does the staff treat residents in a respectful way? Are there a variety of social, recreational, religious, or cultural activities? Do the residents have choices over their schedule and living space? Do the residents have privacy for visits or personal care?

Quality of Care: Are there enough staff? Are residents getting the care they need? Can residents still see their personal doctors? Does the nursing home have any quality of care deficiencies? What did the quality information at www.medicare.gov on “Nursing Home Compare” show about this nursing home?

Location: Is the nursing home close to family and friends so they can visit often? Frequent visits are the best way to make sure that you or your loved one does well in the nursing home. Having visitors can make the transition to the nursing home easier for you and your family. Visitors can also help support you or act on your behalf by bringing concerns to the nursing home's resident council and/or family council.

Choosing a Nursing Home

Step 4: Choose the nursing home that best meets your needs. (continued)

Some important things to think about when making your choice: (continued)

Availability: Is a bed available now, or can you add your name to a waiting list? Remember, nursing homes do not have to accept all applicants, but they must comply with Civil Rights laws that prohibit discrimination based on race, color, national origin, disability, age, or religion under certain conditions.

Staffing: Do the [Certified Nursing Assistants](#) (CNAs) work with a reasonable number of residents on the day shift? Is there a doctor available? Are therapy staff available?

Religious and Cultural Preferences: Does the nursing home offer the religious or cultural support you need? Do they provide any special diet your faith practice requires?

Language: Is your primary language spoken at the nursing home by staff or residents? Being able to communicate with others is important.

Policies: Policies are rules that all residents must follow. They may be different in each nursing home. Are you comfortable with the policies? For example, smoking may not be allowed or may be restricted to certain areas of the nursing home.

Services and Fees: Does the nursing home have the services you need? Nursing homes must tell you in writing about their services, charges, and fees before you move into the home. Get a copy of the fee schedule to find out which services are available, which are included in your monthly fee, and which services cost extra. Then you can compare the costs of different nursing homes.

Words in [blue](#) are defined on pages 58-59.

Security: Does the nursing home provide a safe environment? Is there a guard at the door? Is the nursing home locked at night? Are there special “Wander Guards” to help keep residents who may become confused in the facility?

Choosing a Nursing Home

Step 4: Choose the nursing home that best meets your needs. (continued)

Some important things to think about when making your choice: (continued)

Preventive Care: Does the nursing home make sure that residents get preventive care to help keep them healthy? Does the nursing home have a screening program for immunizations such as Flu (influenza) and pneumonia?

Hospitals: Does the nursing home have an arrangement with a nearby hospital for emergencies? Can your doctor care for you at that hospital?

Accredited (accreditation): Is the nursing home accredited by the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO)? Being accredited is like having a “seal of approval.” It means the nursing home meets certain standards for care that JCAHO sets. You can find information on accreditation of nursing homes in your area at www.jcaho.org on the web. Select “Quality Check.”

Licensed: Are the nursing home and current administrator required to be licensed in your State? If so, are they? This means that they have met certain standards set by a State or local government agency.

Certified (certification): If you are getting skilled care, and [Medicare](#) or [Medicaid](#) are paying for your care, make sure the nursing home is Medicare- and Medicaid certified. This means the nursing home has passed an inspection survey done by a State government agency. Medicare and Medicaid will only pay for care in a certified nursing home. **Being certified is not the same as being accredited.** Also, some nursing homes set aside only a few beds for Medicare or Medicaid residents.

Section 4:

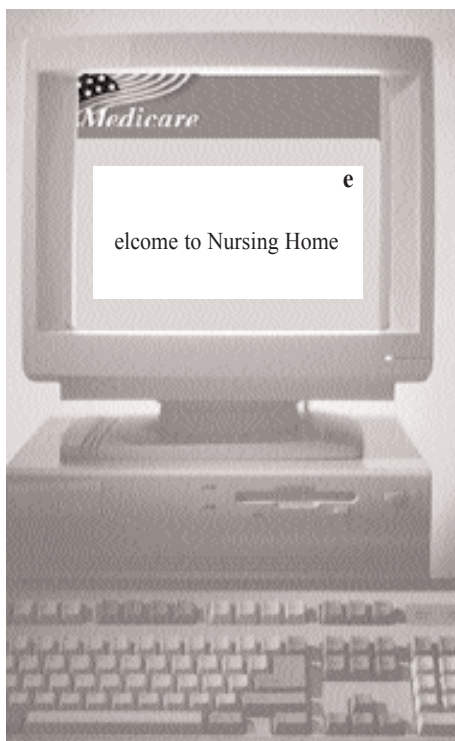


This checklist can help you look at and compare the nursing homes that you visit. Look at the checklist before you go on your nursing home visit or tour. This will give you an idea about the kinds of questions to ask and what you should look for as you tour the facility and see the staff and the residents. Some of these questions may be more personally important to you and your family, and some are more important for finding out about the quality of care the residents get. Use a new checklist for each nursing home you visit. You can photocopy the checklist or print out additional copies from “Nursing Home Compare” at www.medicare.gov on the web.

Use your completed checklist with the quality information on www.medicare.gov at “Nursing Home Compare” on the web to help you compare the nursing homes you are interested in.

“Nursing Home Compare” at www.medicare.gov on the web includes information such as:

- The number of beds at the facility, and how many are being used (occupied).
- The number of staff working at the facility.
- Information about the residents (a profile).
- Nursing home inspection summary results.
- Quality measures for each nursing home, coming soon!



“Nursing Home Compare” is updated monthly. The nursing home may have more current information.

If you don't have a computer, your local library or senior center may be able to help you find this information on their computer. Or, call 1-800-MEDICARE (1-800-633-4227) and a Customer Service Representative will read this information to you. TTY users should call 1-877-486-2048.

Nursing Home Checklist



Name of Nursing Home: _____ Date of Visit: _____

	Yes	No	Comments
Basic Information			
The nursing home is Medicare-certified.			
The nursing home is Medicaid-certified.			
The nursing home has the level of care you need (e.g. skilled, custodial), and a bed is available.			
The nursing home has special services if needed in a separate unit (e.g. dementia, ventilator, or rehabilitation), and a bed is available.			
The nursing home is located close enough for friends and family to visit.			
Resident Appearance			
Residents are clean, appropriately dressed for the season or time of day, and well groomed.			
Nursing Home Living Spaces			
The nursing home is free from overwhelming unpleasant odors.			
The nursing home appears clean and well kept.			
The temperature in the nursing home is comfortable for residents.			
The nursing home has good lighting.			
Noise levels in the dining room and other common areas are comfortable.			
Smoking is not allowed or may be restricted to certain areas of the nursing home.			
Furnishings are sturdy, yet comfortable and attractive.			

Nursing Home Checklist



	Yes	No	Comments
Staff			
The relationship between the staff and the residents appears to be warm, polite, and respectful.			
All staff wear name tags.			
Staff knock on the door before entering a resident's room and refer to residents by name.			
The nursing home offers a training and continuing education program for all staff.			
The nursing home does background checks on all staff.			
The guide on your tour knows the residents by name and is recognized by them.			
There is a full-time Registered Nurse (RN) in the nursing home at all times, other than the Administrator or Director of Nursing.			
The same team of nurses and Certified Nursing Assistants (CNAs) work with the same resident 4 to 5 days per week.			
CNAs work with a reasonable number of residents.			
CNAs are involved in care planning meetings.			
There is a full-time social worker on staff.			
There is a licensed doctor on staff. Is he or she there daily? Can he or she be reached at all times?			
The nursing home's management team has worked together for at least one year.			

Nursing Home Checklist

	Yes	No	Comments
Residents' Rooms			
Residents may have personal belongings and/or furniture in their rooms.			
Each resident has storage space (closet and drawers) in his or her room.			
Each resident has a window in his or her bedroom.			
Residents have access to a personal telephone and television.			
Residents have a choice of roommates.			
Water pitchers can be reached by resident.			
There are policies and procedures to protect residents' possessions.			
Hallways, Stairs, Lounges, and Bathrooms			
Exits are clearly marked.			
There are quiet areas where residents can visit with friends and family.			
The nursing home has smoke detectors and sprinklers.			
All common areas, resident rooms, and doorways are designed for wheelchair use.			
There are handrails in the hallways and grab bars in the bathrooms.			

Nursing Home Checklist

	Yes	No	Comments
Menus and Food			
Residents have a choice of food items at each meal. (Ask if your favorite foods are served.)			
Nutritious snacks are available upon request.			
Staff help residents eat and drink at mealtimes if help is needed.			
Activities			
Residents, including those who are unable to leave their rooms, may choose to take part in a variety of activities.			
The nursing home has outdoor areas for resident use and staff help residents go outside.			
The nursing home has an active volunteer program.			
Safety and Care			
The nursing home has an emergency evacuation plan and holds regular fire drills.			
Residents get preventive care, like a yearly flu shot, to help keep them healthy.			
Residents may still see their personal doctors.			
The nursing home has an arrangement with a nearby hospital for emergencies.			
Care plan meetings are held at times that are convenient for residents and family members to attend whenever possible.			
The nursing home has corrected all deficiencies (failure to meet one or more Federal or State requirements) on its last state inspection report.			

Checklist

This image shows a blank sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

ection 5:

After you choose a nursing home, you will need to make the arrangements for admission. When you contact the nursing home office, it is helpful to have the following information ready.

Payment Information for Nursing Home Office Staff

- **Insurance Information:** Provide information about health care coverage and/or long-term care insurance you have that pays for nursing home and/or health care. This includes the name of the insurance company and the policy number.

Note: You may have to pay a cash deposit before you are admitted to a nursing home if your care will not be covered by either [Medicare](#) or [Medicaid](#). If nursing home care will be covered by Medicare or Medicaid, the nursing home can't require you to pay a cash deposit. They may ask that you pay your Medicare [coinsurance](#) amounts and other charges you would normally have to pay for. It is best to pay these charges when they are billed, not in advance.

Information for Nursing Home Staff

- **Information on Your Medical History:** Your doctor may give the staff some of this information. This includes a list of any current or past health problems, past surgeries or treatments you have had, allergies you have to food or medicine, and shots you've had.
- **Information on Your Current Health Status:** Your doctor may give the staff some of this information. This includes a list of your current health problems, and any activities of daily living that might be difficult for you to do by yourself.
- **A List of Your Current Medicines:** Include the dose, how often you take it, and why you take it.
- **A List of All Your Health Care Providers:** Include names, addresses, and telephone numbers.
- **A List of Family Members to Call in Case of an Emergency:** Include names, addresses, and telephone numbers.

Words in [blue](#) are defined on pages 58-59.

Making the Arrangements to Enter a Nursing Home

Health Care Advance Directives

You may be asked if you have a health care advance directive:

A health care advance directive is a written document that says how you want medical decisions to be made if you can't make decisions for yourself. The two most commonly prepared health care advance directives are:

- A Living Will is a written legal document that says what type of treatments you want or don't want in case you cannot speak for yourself. This document typically only comes into effect if you're terminally ill (usually if you have six months or less to live) or permanently unconscious and cannot speak for yourself. A Living Will doesn't let you name someone to make health care decisions for you.
- A Durable Power of Attorney for Health Care is a legal document that names someone else to make health care decisions for you if you become unable to make your own decisions.

If you don't have a health care advance directive and need help preparing one, or need more information, talk to a social worker, discharge planner, your doctor, or the nursing home staff. You can call your local Area Agency on Aging to find out if your state has any legal services that help with preparing these forms. You will find the telephone number in the blue pages of your local telephone book.

Personal Needs Account

You may wish to open an account managed by the nursing home. You can deposit money into the account for personal use. Check with the nursing home to see how they manage these accounts. You may only have access to the account at certain times.

Paying for Nursing Home Care and Other Health Care Costs

Nursing home care can be very expensive. Medicare generally **does not** cover nursing home care. There are many ways people can pay for nursing home care. For example, they can use their own money, may be able to get help from their state, or use long-term care insurance.

Nursing home care is not covered by many types of health insurance. Don't drop your health care coverage if you are in a nursing home. Even if it doesn't cover nursing home care, you will need health coverage for hospital or doctor services or supplies while you are in the nursing home.

Most people who enter nursing homes begin by paying for their care out of their own pocket. As they use up their resources over a period of time, they may eventually become eligible for [Medicaid](#).

Remember, Medicare does cover skilled nursing care after a qualifying hospital stay. For more information on Medicare coverage of skilled nursing facility care, get a free copy of the booklet *Medicare Coverage of Skilled Nursing Facility Care* (CMS Pub. No. 10053), see page 51.

This section explains some of the ways you can pay for nursing home care, or get help with other health care costs. It includes information about:

- Personal Resources, see page 36
- Help From Your State
 - Medicaid, see pages 36-38
 - Programs of All-inclusive Care for the Elderly (PACE), see pages 38-39
 - Home and Community Based Waiver Programs, see page 39
- Long-Term Care Insurance, see pages 39-40
- Medicare, see pages 40-41

Words in [blue](#) are defined on pages 58-59.

Paying for Nursing Home Care and Other Health Care Costs

Personal Resources

You can use your savings to pay for nursing home care. Some insurance companies let you use your life insurance policy to pay for long-term care. Ask your insurance agent how this works.

Another option for homeowners is a "reverse mortgage." It allows some people to use their home as a source of income without losing ownership. It is a type of loan. Talk to a lawyer or financial advisor about the benefits and risks of a reverse mortgage.

Important: Be sure to get help before using either of these options. There are important issues you need to understand.

Help From Your State

Medicaid

Medicaid is a joint Federal and State program that pays for certain health services and nursing home care for older people with low incomes and limited assets. If you qualify, you may be able to get help to pay for nursing home care, or other health care costs. If you qualify for both [Medicare](#) and Medicaid, most health care costs are covered. But remember, not all nursing homes accept Medicaid payment. Check with the nursing home to see if they accept Medicaid, and if they have a Medicaid bed available. Who is eligible for Medicaid and what services are covered varies from State to State. Most often, eligibility is based on your income and personal resources. Sometimes you must reduce your personal resources before you qualify. Be sure to ask whether State law or nursing home policy will guarantee that you will be able to stay at that nursing home if your care is covered by Medicaid later. You may be moved to another room or another section of the nursing home when your care is paid by Medicaid. To get more information on Medicaid eligibility requirements in your State, call your State Medical Assistance Office (see pages 55-57).

Words in [blue](#) are defined on pages 58-59.

Paying for Nursing Home Care and Other Health Care Costs

Help From Your State (continued)

Medicaid (continued)

Some important things to know about Medicaid:

- The State cannot put a lien on your home (to recover benefits correctly paid) while you are living in a nursing home if there is a reasonable chance you will return home after getting nursing home care. Also, the State can't put a lien on your home (to recover benefits correctly paid) if you have a spouse or dependents living there.
- Most people who get Medicaid have to reduce their assets first. There are rules about what is counted as an asset and what isn't when determining Medicaid eligibility. There are also rules that mandate States to allow married couples separated because one of them is in an institution (like a nursing home) to protect a certain amount of assets and income for the spouse who isn't in an institution. A spouse may keep one half of the couples' joint assets, up to \$89,280 (in 2002) as well as a monthly income allowance. For more information, call your State Medical Assistance Office (see pages 55-57). Or, you can call your local Area Agency on Aging to find out if your State has any legal services that would help provide you with more information. You can also get free counseling from your State Health Insurance Assistance Program (see pages 55-57).
- You cannot give your assets away to family members or non-family members, rather than use your assets to pay for your nursing home care. If you give assets away within three years before the date you apply for Medicaid or after you apply, the assets given away will be counted as assets that should be used to pay for your nursing home care. Giving away assets can delay when you become eligible for Medicaid. There are some exceptions to this especially if you have a spouse, or a blind or disabled child.
- After a person who gets Medicaid nursing home benefits dies, in most cases the State must try to get whatever benefits it paid for that person back from their estate. However, they cannot recover this until after the person's spouse dies, or as long as there is a blind or disabled child or child under the age of 21 in the family.

Paying for Nursing Home Care and Other Health Care Costs

Help From Your State (continued)

Medicaid (continued)

Some important things to know about Medicaid: (continued)

Note: Federal law protects spouses of nursing home residents from losing all of their income and assets to pay for nursing home care for their spouse.

When one member of a couple enters a nursing home and applies for Medicaid, his or her eligibility is determined under what are called the “spousal impoverishment” rules. “Spousal impoverishment” helps make sure that the spouse still at home will have the money needed to pay for living expenses by protecting a certain amount of the couple’s resources, as well as at least a portion of the nursing home resident’s income, for the use of the spouse who is still at home.

For more information about this protection, call your State Medical Assistance Office (see pages 55-57).

To apply for Medicaid, call your State Medical Assistance Office (see pages 55-57). They can tell you if you qualify for the Medicaid nursing home benefit, or other programs, such as the Programs of All-inclusive Care for the Elderly (PACE), or home and community based waiver programs.

Programs of All-inclusive Care for the Elderly (PACE)

PACE combines medical, social, and long-term care services for frail people. PACE is available only in states that have chosen to offer it under Medicaid. The goal of PACE is to help people stay independent and living in their community as long as possible, while getting the high quality care they need.

To be eligible for PACE, you must be age 55 or older, live in the service area of a PACE program, be certified as eligible for nursing home care by the appropriate State agency, and be able to live safely in the community.

Paying for Nursing Home Care and Other Health Care Costs

Help From Your State (continued)

Programs of All-inclusive Care for the Elderly (PACE) (continued)

To find out if there is a PACE program in your area, call the State Medical Assistance Office (see pages 55-57). Or, you can look at www.medicare.gov/nursing/alternatives/pace.asp on the web.

Home and Community Based Waiver Programs

If you are already eligible (or close to being eligible) for [Medicaid](#), you may be able to get help with the costs of some home and community based services. States have home and community based waiver programs to help people keep their independence, while getting the care they need outside of an inpatient facility.

You can call the Area Agency on Aging. You can get the telephone number of your local Area Agency on Aging by looking at www.aoa.gov on the web. Select “About AoA and the Aging Network.” Then select “Area Agencies on Aging.” You can also call the Eldercare Locator at 1-800-677-1116 (weekdays 9:00 a.m. to 8:00 p.m. Eastern time) for your local Area Agency on Aging telephone number. Or, call your State Medical Assistance Office (see pages 55-57). Both can help with your Medicaid questions, or give you information about other programs to help pay for the costs of nursing home care or community and home services.

Long-Term Care Insurance

Words in [blue](#) are defined on pages 58-59.

This type of private insurance policy can help pay for many types of long-term care, including both skilled and non-skilled care.

Long-term care insurance can vary widely. Some policies may cover only nursing home care. Others may include coverage for a whole range of services like care in an adult day care center, assisted living, medical equipment, and informal home care.

Paying for Nursing Home Care and Other Health Care Costs

Long-Term Care Insurance (continued)

If you have long-term care insurance, check your policy or call the insurance company to find out if the care you need is covered. If you are shopping for long-term care insurance, find out which types of long-term care services and facilities the different policies cover. Also, check to see if your coverage could be limited because of a pre-existing condition. Make sure you buy from a reliable company that is licensed in your State. For more information about long-term care insurance, get a copy of *A Shopper's Guide to Long-Term Care Insurance* from the National Association of Insurance Commissioners, 2301 McGee Street, Suite 800, Kansas City, MO 64108-3600.

By fall 2002, there will be a chance for Federal employees, members of the Uniformed Services, retirees, their spouses, and other qualified relatives to buy long-term care insurance at discounted group rates. For more information about long-term care insurance for Federal employees, look at www.opm.gov/insure/ltc on the web.

Medicare

Medicare

Medicare is a health insurance program for:

- People age 65 or older.
- Some people with disabilities under age 65.
- People with End-Stage Renal Disease (ESRD) (permanent kidney failure requiring dialysis or a kidney transplant).

Paying for Nursing Home Care and Other Health Care Costs

Medicare (continued)

Medicare (continued)

You can get your Medicare health care in two ways:

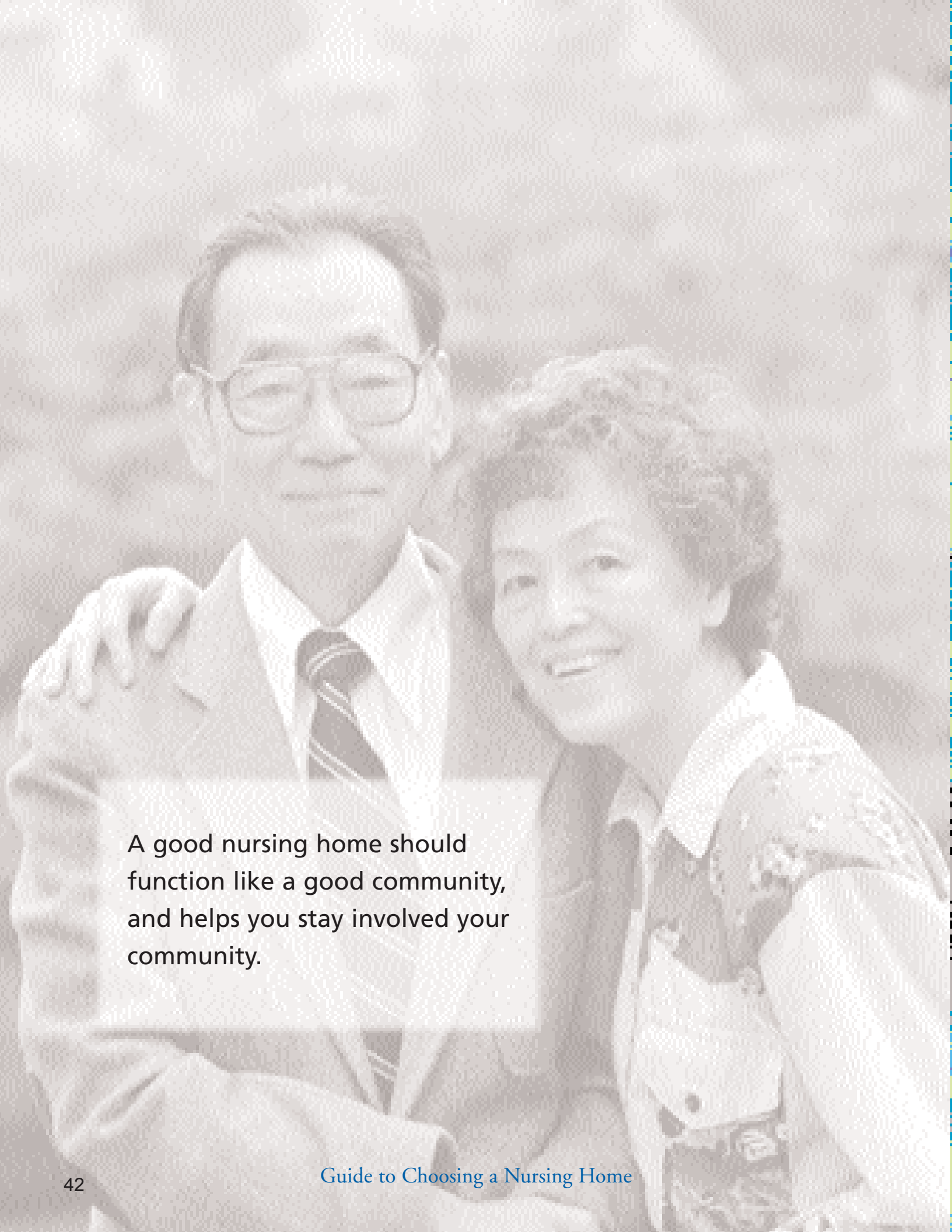
1. The Original Medicare Plan

The [Original Medicare Plan](#) **does not** pay for most nursing home care. Most nursing home care is [custodial care](#) to help with activities of daily living like bathing, dressing, and using the bathroom. Medicare covers very limited and medically-necessary skilled care or home health care if you need skilled care for an illness or injury and you meet certain conditions. For more information on Medicare coverage of skilled nursing facility care or home health care, look at www.medicare.gov on the web. Select “Publications” to look at or print a copy of the booklet *Medicare Coverage of Skilled Nursing Facility Care* (CMS Pub. No. 10153) or *Medicare and Home Health Care* (CMS Pub. No. 10969). You can also order a free copy by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

2. Other Medicare Health Plans

If you belong to a [Medicare managed care plan](#) or [Medicare Private-Fee-for-Service plan](#), check with your plan to see if it covers nursing home care. Usually, plans **do not** help pay for this care unless the nursing home has a contract with the plan. Ask the health plan about nursing home coverage before you make any arrangements. If the nursing home has a contract with your health plan, ask the health plan if they check the home for quality of care.

Words in [blue](#) are defined on pages 58-59.



A good nursing home should function like a good community, and helps you stay involved your community.

Adjusting to Your New Home

New nursing home residents sometimes have difficulty adjusting to their new environment, even if the nursing home is giving good care. Adjusting to the nursing home can be made easier with support and visits from family and friends. Here are some tips to help you become comfortable with your new home, whether you are there for a short or long period of time.

- Bring some of your special personal belongings, like photographs or a favorite bedspread to make your room feel more familiar. Check with the staff first to see what you can bring.
- Take part in the activities offered at the nursing home. It is a great way to meet new friends and become a part of your new community.
- Continue your subscriptions to magazines or newspapers to help you keep in touch with your outside interests.

Reporting and Resolving Problems

If you have a problem at the nursing home, talk to the staff involved. For example, if you have a problem with your care, talk to the nurse or [Certified Nurse Assistant \(CNA\)](#). The staff may not know there is a problem unless you tell them. If the problem is not resolved, ask to talk with the supervisor, the social worker, the Director of Nursing, or your doctor.

The facility must have a grievance procedure for complaints. If your problem is not resolved, follow the facility's grievance procedure. You may also want to bring the problem to the resident or family council.

Words in [blue](#) are defined on pages 58-59.

The nursing home must post the name, address, and telephone number of state advocacy groups, such as the State Survey and Certification Agency, the State Licensure Office, the State Ombudsman Program, the Protection and Advocacy Network, and the Medicaid Fraud Control Unit.

If you feel you need outside help to resolve your problem, call the [Long-Term Care Ombudsman](#) or State Survey Agency for your area (see pages 55-57).

In the Nursing Home

Care Plans

The nursing home staff will get your health information and review your health condition to prepare your care plan. You (if you are able) or your family with your permission, or someone acting on your behalf, have the right to take part in planning your care together with the nursing home staff. Your care plan is very important. A good care plan can help make sure that you are getting the care you need and help make your stay more pleasant. Health assessments (a review of your health condition) must be done within 14 days of admission. You should expect to get a health assessment at least every 90 days after your first review, and possibly more often if your medical status changes.

The nursing home staff will assess your condition periodically to see if your health status has changed. They will adjust your care plan as needed.

Depending on your needs, your care plan may include:

- What kind of personal or health care services you need,
- What type of staff should give you these services,
- How often you need the services,
- What kind of equipment or supplies you need (like a wheelchair or feeding tube),
- What kind of diet you need (if you need a special one),
- Your health goal (or goals), and
- How your care plan will help you reach your goal.

In the Nursing Home



Your Resident Rights and Protections

What are my rights in a nursing home?

As a resident of a nursing home, you have all the same rights and protections of all United States citizens. Nursing home residents have certain rights and protections under the law. They can vary by State. The nursing home must provide you with a written description of your legal rights. Keep the information you get about your rights, admission and transfer policies, and any other information you get from the nursing home in case you need to look at them later.

At a minimum, Federal law specifies that a nursing home resident's rights include:

- **Freedom from Discrimination:** Nursing homes do not have to accept all applicants, but they must comply with Civil Rights laws that do not allow discrimination based on race, color, national origin, disability, age, or religion under certain conditions. If you believe you have been discriminated against, call the Department of Health and Human Services, Office of Civil Rights at 1-800-368-1019. TTY users should call 1-800-587-7697.
- **Respect:** You have the right to be treated with dignity and respect. As long as it fits your care plan, you have the right to make your own schedule, including when you go to bed, rise in the morning, and eat your meals. You have the right to choose the activities you want to go to.
- **Freedom from Abuse and Neglect:** You have the right to be free from verbal, sexual, physical, and mental abuse, and involuntary seclusion by anyone. This includes, but is not limited to nursing home staff, other residents, consultants, volunteers, staff from other agencies, family members or legal guardians, friends, or other individuals. If you feel you have been abused or neglected (your needs not met), report this to the nursing home, your family, your local Long-Term Care Ombudsman, or State Survey Agency (see pages 55-57). It may be appropriate to report the incident of abuse to local law enforcement or the Medicaid Fraud Control Unit (their telephone number should be posted in the nursing home).

In the Nursing Home

Your Resident Rights and Protections (continued)

At a minimum, Federal law specifies that a nursing home resident's rights include: (continued)

- **Freedom from Restraints:** Physical restraints are any manual method or physical or mechanical device, material, or equipment attached to or near your body so that you can't remove the restraint easily. They prevent freedom of movement or normal access to one's own body. A chemical restraint is a drug used to limit freedom of movement and is not needed to treat your medical symptoms.

It is against the law for a nursing home to use physical or chemical restraints, unless it is necessary to treat your medical symptoms. Restraints may not be used to punish nor for the convenience of the nursing home staff. You have the right to refuse restraint use except if you are at risk of harming yourself or others.

- **Information on Services and Fees:** You must be informed in writing about services and fees before you move into the nursing home. The nursing home cannot require a minimum entrance fee as a condition of residence.

Some nursing homes may provide you with greater rights and protections of your health information. Ask the nursing home.

- **Money:** You have the right to manage your own money or to choose someone you trust to do this for you. If you ask the nursing home to manage your personal funds, you must sign a written statement that allows the nursing home to do this for you. However, the nursing home must allow you access to your bank accounts, cash, and other financial records. The nursing home must protect your funds from any loss by buying a bond or providing other similar protections.

In the Nursing Home

Your Resident Rights and Protections (continued)

At a minimum, Federal law specifies that a nursing home resident's rights include: (continued)



“My family and friends visit often. I’m glad we can have some privacy when we need it.”

- **Privacy, Property, and Living Arrangements:** You have the right to privacy, and to keep and use your personal belongings and property as long as they don't interfere with the rights, health, or safety of others. Nursing home staff should never open your mail unless you allow it. You have the right to use a telephone and talk privately. The nursing home must protect your property from theft. This may include a safe in the facility or cabinets with locked doors in resident rooms. If you and your spouse live in the same nursing home, you are entitled to share a room (if you both agree to do so).
- **Medical Care:** You have the right to be informed about your medical condition, medications, and to see your own doctor. You also have the right to refuse medications and treatments (but this could be harmful to your health). You have the right to take part in developing your care plan. Care plans are explained on page 44. You have the right to look at your medical records and reports when you ask.
- **Visitors:** You have the right to spend private time with visitors at any reasonable hour. The nursing home must permit your family to visit you at any time, as long as you wish to see them. You don't have to see any visitor you don't wish to see. Any person who gives you help with your health or legal services may see you at any reasonable time. This includes your doctor, representative from the health department, and your [Long-Term Care Ombudsman](#), among others.
- **Social Services:** The nursing home must provide you with any needed social services, including counseling, help solving problems with other residents, help in contacting legal and financial professionals, and discharge planning.

In the Nursing Home

Your Resident Rights and Protections (continued)

At a minimum, Federal law specifies that a nursing home resident's rights include: (continued)

- **Leaving the Nursing Home:** Living in a nursing home is your choice. You can choose to move to another place. However, the nursing home may have a policy that requires you to tell them before you plan to leave. If you don't, you may have to pay them an extra fee (see page 24). If you are going to another nursing home, make sure that there is a bed available for you.

If your health allows and your doctor agrees, you can spend time away from the nursing home visiting friends or family during the day or overnight. Talk to the nursing home staff a few days ahead of time if you want to do this so medication and care instructions can be prepared.

Caution: If your nursing home care is covered by certain health insurance, you may not be able to leave for visits without losing your coverage.

- **Complaints:** You have the right to make a complaint to the staff of the nursing home, or any other person, without fear of punishment. The nursing home must resolve the issue promptly. See “Reporting and Resolving Problems” on page 43.
- **Protection Against Unfair Transfer or Discharge:** You cannot be sent to another nursing home, or made to leave the nursing home unless:
 - It is necessary for the welfare, health, or safety of you or others,
 - Your health has declined to the point that the nursing home can not meet your care needs,
 - Your health has improved to the point that nursing home care is no longer necessary,
 - The nursing home has not been paid for services you received, or
 - The nursing home closes.

In the Nursing Home

Your Resident Rights and Protections (continued)

At a minimum, Federal law specifies that a nursing home resident's rights include: (continued)

- **Protection Against Unfair Transfer or Discharge:** (continued)

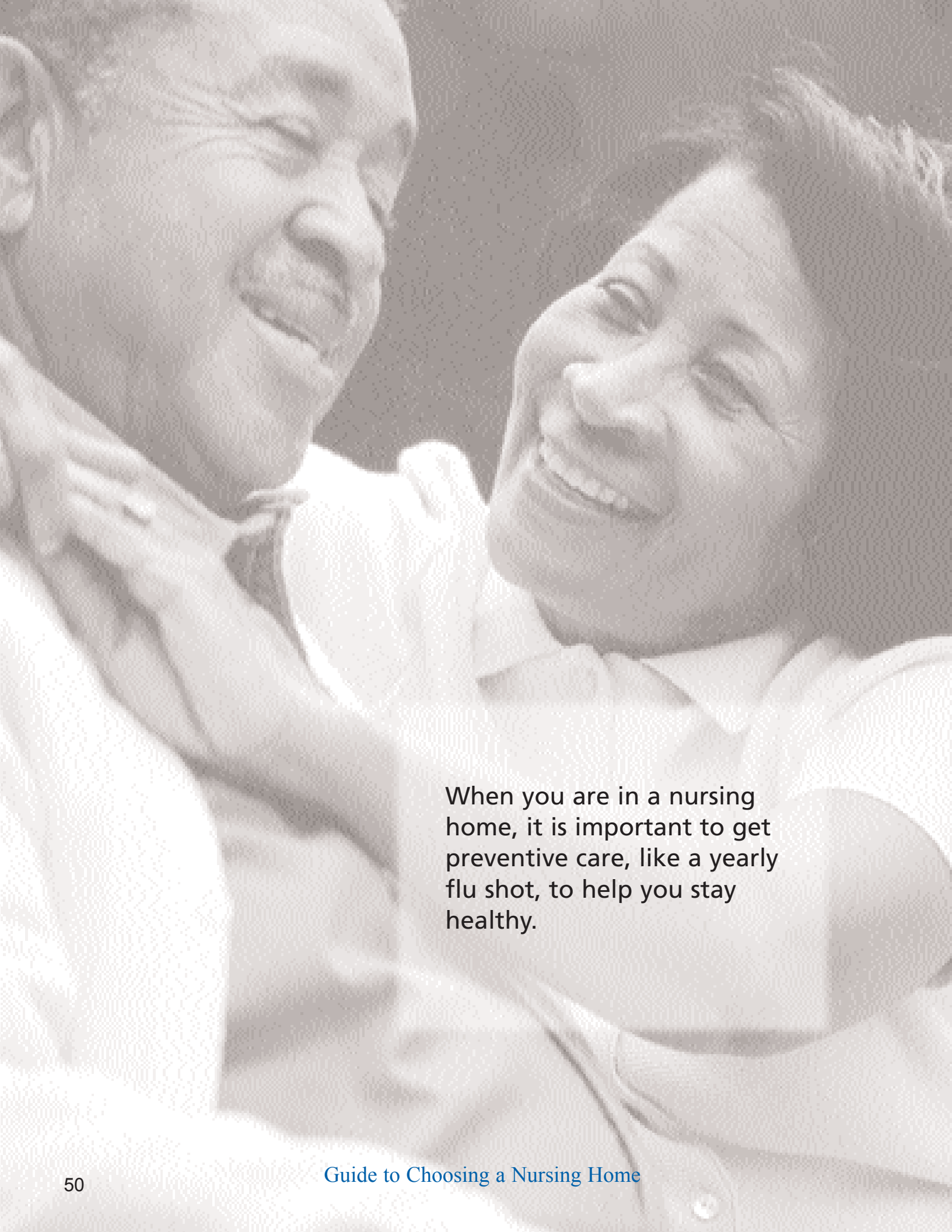
Except in emergencies, nursing homes must give a 30-day written notice of their plan to discharge or transfer you. You have the right to appeal a transfer to another facility.

A nursing home cannot make you leave if you are waiting to get [Medicaid](#) (see pages 36-38). The nursing home should work with other state agencies to get payment if a family member or other individual is holding your money.

- **Your Family and Friends:** Family members and legal guardians may meet with the families of other residents and may participate in family councils.

By law, nursing homes must develop a plan of care (care plan) for each resident. Care plans are explained on page 44. You have the right to take part in this process, and family members can help with your care plan with your permission. If your relative is your legal guardian, he or she has the right to look at all medical records about you and has the right to make important decisions on your behalf.

Family and friends can help make sure you get good quality care. They can visit and get to know the staff and the nursing home's rules.



When you are in a nursing home, it is important to get preventive care, like a yearly flu shot, to help you stay healthy.

Free booklets on Medicare and Related Topics

To order free booklets on Medicare and related topics, look at www.medicare.gov on the web. Select “Publications” to look at or print a copy of these booklets. You can also order a free copy by calling 1-800-MEDICARE (1-800-633-4227). Some booklets are available in Spanish, in Braille, on audio-cassette and Large Print (English and Spanish). TTY users should call 1-877-486-2048.

- *Choosing Long-Term Care:* This booklet helps explain the steps to choosing the type of long-term care that best meets your needs. (CMS Pub. No. 02223)
- *Medicare Savings Programs:* This flyer gives information about programs in your State (including Medicaid) that can help you pay health care costs. (CMS Pub. No. 10126)
- *Medicare & You:* This handbook gives basic information about Medicare coverage and benefits, health plan choices, rights and protections, and more. (CMS Pub. No. 10050)
- *Medicare Coverage of Skilled Nursing Facility Care:* This booklet explains when and how much Medicare covers for skilled nursing facility care. (CMS Pub. No. 10153)
- *Medicare and Home Health Care:* This booklet explains Medicare coverage of home health care. (CMS Pub. No. 10969)
- *Medicare Hospice Benefits:* This booklet explains Medicare coverage of hospice care for people who have a terminal illness. (CMS Pub. No. 02154)

Pages 52-57 of this document have been intentionally left blank. They contain phone number information. For the most recent phone number information, please visit the [Helpful Contacts](#) section of our web site. Thank you.

9

Section 9: Words to Know

Activities of Daily Living (ADLs)* - Activities you usually do during a normal day such as, getting in and out of bed, bathing, dressing, eating and using the bathroom.

Certified Nursing Assistant (CNA) - CNAs are trained and certified to help nurses by providing non-medical assistance to patients, such as help with bathing, dressing, and using the bathroom.

Coinsurance - The percent of the Medicare-approved amount that you have to pay after you pay the deductible for Part A and/or Part B. In the Original Medicare Plan, the coinsurance payment is a percentage of the approved amount for the service (like 20%).

Custodial Care - Nonskilled, personal care, such as help with activities of daily living like bathing, dressing, eating, getting in and out of bed or a chair, moving around, and using the bathroom. It may also include care that people do themselves, like using eye drops. Medicare does not pay for custodial care.

End-Stage Renal Disease (ESRD)* - Kidney failure that is severe enough to need lifetime dialysis or a kidney transplant.

Long-Term Care Ombudsman - An independent advocate (supporter) for nursing home and assisted living facility residents who works to solve problems between residents and nursing homes or assisted living facilities.

Medicaid - A joint Federal and State program that helps with medical costs for some people with low incomes and limited resources. Medicaid programs vary from state to state, but most health care costs are covered if you qualify for both Medicare and Medicaid.

Medicare - The Federal health insurance program for: people 65 years of age or older, certain younger people with disabilities, and people with End-Stage Renal Disease (permanent kidney failure with dialysis or a transplant, sometimes called ESRD).

Medicare Managed Care Plan - These are health care choices in some areas of the country. In most plans, you can only go to doctors, specialists, or hospitals on the plan's list. Plans must cover all Medicare Part A and Part B health care. Some plans cover extras, like prescription drugs. Your costs may be lower than in the Original Medicare Plan.

Medicare Private Fee-for-Service Plan - A private insurance plan that accepts people with Medicare. You may go to any Medicare-approved doctor or hospital that accepts the plan's payment. The insurance plan, rather than the Medicare program, decides how much it will pay and what you pay for the services you get. You may pay more for Medicare-covered benefits. You may have extra benefits the Original Medicare Plan does not cover.

Original Medicare Plan - A pay-per-visit health plan that lets you go to any doctor, hospital, or other health care provider who accepts Medicare. You must pay the deductible. Medicare pays its share of the Medicare-approved amount, and you pay your share (coinsurance). The Original Medicare Plan has two parts: Part A (hospital insurance) and Part B (medical insurance).

Words to Know

Quality Improvement Organizations (QIOs) -

Groups of practicing doctors and other health care experts. They are paid by the Federal government to check and improve the care given to Medicare patients. They must review your complaints about the quality of care given by: inpatient hospitals, hospital outpatient departments, hospital emergency rooms, skilled nursing facilities, home health agencies, Medicare Private Fee-for Service plans, and ambulatory surgical centers.

Restraints - Physical restraints are any manual method or physical or mechanical device, material, or equipment attached to or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body. Chemical restraints are any drug used for discipline or convenience and not required to treat medical symptoms.

Skilled Nursing Care* - A level of care that must be given or supervised by Registered Nurses. All of your needs are taken care of with this type of service. Examples of skilled nursing care are: getting intravenous injections, tube feeding, oxygen to help you breathe, and changing sterile dressings on a wound. Any service that could be safely done by an average non-medical person (or one's self) without the supervision of a Registered Nurse is not considered skilled care.

Skilled Nursing Facility (SNF) - A nursing facility with the staff and equipment to give skilled nursing care and/or skilled rehabilitation services and other related health services.

State Health Insurance Assistance Program -

A State program that gets money from the Federal Government to give free health insurance counseling and assistance to people with Medicare.

State Medical Assistance Office - A State agency that is in charge of the State's Medicaid program and can provide information about programs to help pay medical bills for people with low incomes. Also provides help with prescription drug coverage.

* This definition in whole or in part was used with permission from Walter Feldezman, Esq., Dictionary of Eldercare Terminology 2000.

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- Esta publicación estará disponible en español en enero de 2002. Para obtener su copia gratis, llame al 1-800-MEDICARE (1-800-633-4227)

For information about nursing homes, look at www.medicare.gov on the web.