

Choosing a Nursing Home

Agenda

What is Long Term Care (LTC) and Where Can I receive it?

Plan Ahead / Explore Alternatives

Do your Homework / Consult the Experts

Review of Medicare.gov Care-Compare

Visit Prospective Homes

APPLY

Know your Rights

Once Admitted Ensure You are Getting Good Nursing Home Care

What is Long Term Care and Who Needs it?

Long-term care (LTC) is a range of services and supports you may need to meet your personal care needs. At some point in our lives, about 60 percent of us will need assistance with things like getting dressed, driving to appointments, or making meals. Planning is critical, but many people are not sure what is covered by insurance, and people are often misinformed about what is covered by Medicare.

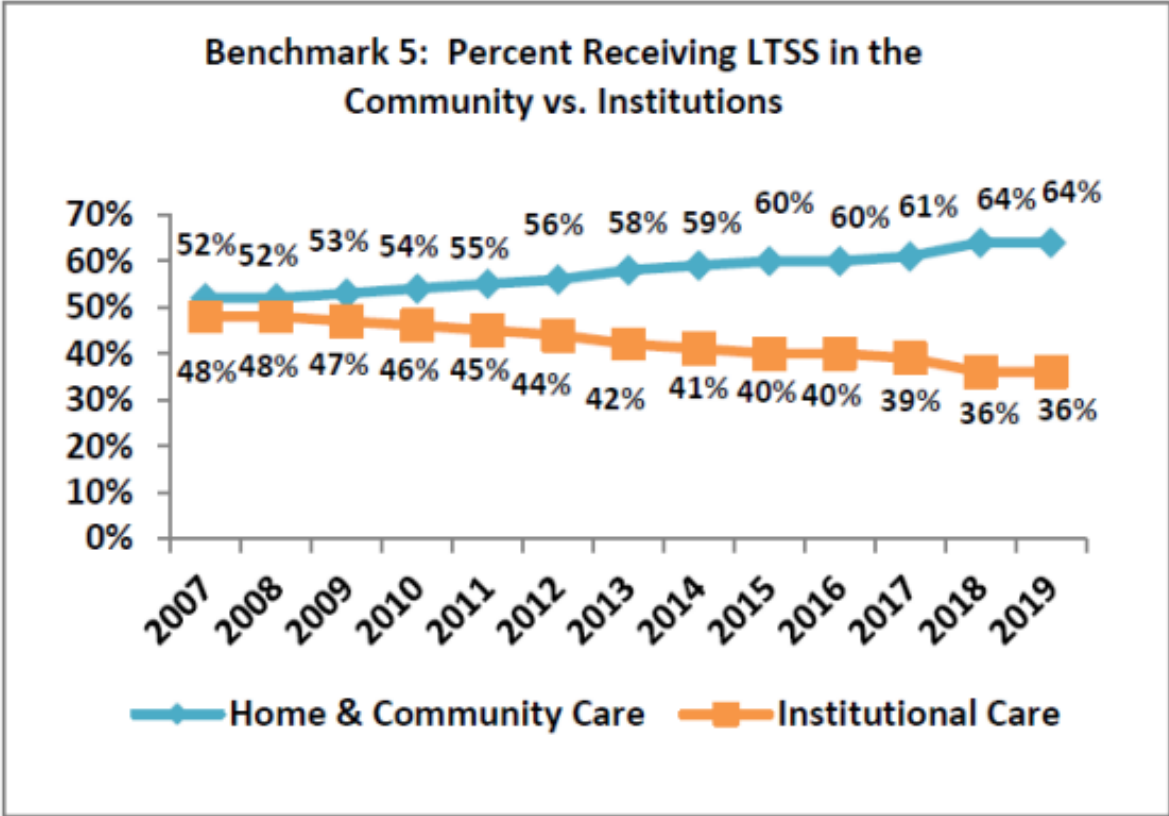
Long Term Care Continued

- Long-term care is a **range of services and supports** you may need to meet your personal care needs. Most long-term care is not medical care, but rather assistance with the basic personal tasks of everyday life, sometimes called **Activities of Daily Living (ADLs)**, such as:
 - Bathing, Dressing, Toileting, Transferring (To or from bed or chair), Incontinence, Eating
- Other common long-term care services and supports are **assistance with everyday tasks**, sometimes called **Instrumental Activities of Daily Living (IADLs)** including:
 - Housework, Managing money, Taking medications, Preparing and cleaning up after meals, Shopping for groceries or clothes, Using the telephone or other communication devices, Caring for pets, Responding to emergency alerts such as fire alarms

Where Can You Receive Care?



Where Can You Receive Care?



UConn Health, Center on Aging

Operating Agency: CT Department of Social Services Funder: Centers for Medicare and Medicaid Services

Based on latest data available at the end of the quarter

Plan Ahead / Explore Alternatives

- [Aging and Disability Resource Centers](#) can provide information about the full range of available options; provide objective advice, counseling and assistance to help you make informed decisions; and help you access public and private programs. ADRCs provide unbiased, reliable information, and counseling to people with all levels of income. Referred to as “Community CHOICES” You can contact them by calling 1-800-994-9422. For a brochure of services [Click Here](#)
- [Area Agencies on Aging](#), coordinate and offer services that help older adults remain in their homes, aided by services such as home-delivered meals, homemaker assistance, etc.
- [Centers for Independent Living](#) (CILs). These community-based centers are run by and for people with disabilities and offer a broad range of services to empower people to live independently, fully integrated in their communities.

Plan Ahead / Explore Alternatives

Things You Should Know

- [Medicare](#) **only** pays for long-term care if you require skilled services or rehabilitative care and Medicare **does not** pay for non-skilled assistance with Activities of Daily Living (ADL),
- Long-term-care is more expensive than you may think and you will likely be responsible for paying for the care you will require. Start thinking about how you will pay for the care you may need. You can refer to ACL's [Costs & How to Pay](#) section for more detailed information.
- By obtaining an Advanced Care Directive you can inform your family or loved ones about how to make important health decisions for you, should you no longer be able to make those decisions for yourself. Consult ACL's [Advance Care Plan Considerations](#) page for more information.



Advance Care Plan Considerations

- What are your **values and beliefs**? When developing an advance care plan, consider your concerns, values, spiritual beliefs, or your ideas about **what makes life worth living**.
- What do you want for yourself? Most people think about the way they wish to face death or disability but may be uncomfortable discussing these topics. **Sometimes sharing your own ideas**, if you are helping someone, or **reviewing the situations of other family members** or friends who have been in similar situations, can help
- **Who do you want as your decision maker?** Decide who should make decisions for you if you cannot. Choose someone who will understand and be able to carry out your wishes even if they include stopping life-sustaining treatment. You should also name a back-up agent to make decisions, in case the first person is not able to do so.



Additional Advanced Care Planning Resources

This consumer fact sheet from Advancing Excellence explains the importance of advance planning for care after a debilitating illness or at the end of life.

<https://theconsumervoice.org/uploads/files/long-term-care-recipient/call-handout-groupe.pdf>

Caring Conversations® is a great and easy to read resource that may help get the gears spinning and help guide you, your family and your friends through the process of Advance Care Planning.

<http://practicalbioethics.org/files/caring-conversations/Caring-Conversations.pdf>

Consumer's Tool Kit for Health Care Advance Planning is another Resource Developed by the American Bar Association Commission on Law and Aging

<https://www.dshs.wa.gov/sites/default/files/AL TSA/stakeholders/documents/duals/toolkit/Consumers%20Tool%20Kit%20for%20for%20Health%20Care%20Advance%20Planning.pdf>

The African American Spiritual and Ethical Guide to End of Life Care - What Y'all Gon' Do With Me? Guide prepared by Heart Tones addressing historical, cultural and spiritual factors that influence African-Americans' decisions about end-of-life care and planning

<http://www.spiritualityandsocialwork.ca/uploads/2/5/8/0/25806130/gloriathomasanderson-theafricanamericanspiritualandethicalendoflifecareguidepresentation2006.pdf>

DO YOUR HOMEWORK
AND CONSULTING
EXPERTS WHEN
EVALUATING FACILITIES

DO YOUR HOMEWORK

Talk To

- Nursing Home Residents/Families
- Physician
- Social Worker
- Hospital Discharge Planner
- Clergy Members

Use Other Sources of Information

- Long Term Care Ombudsman
- Nursing Home Compare Website
- State Nursing Home Inspection Reports

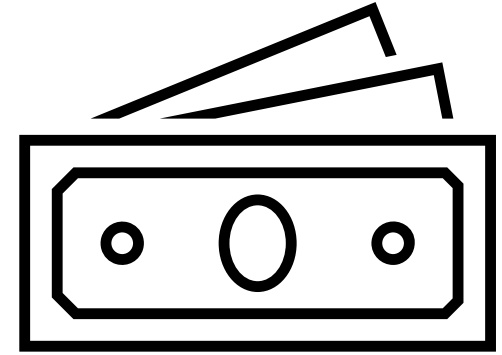
Consult With the Experts

- The Prospective Resident
 - The best expert on what will be a good place to live is the prospective resident. Ask them or her about whether s/he wants to live near a particular family member or friend, in his or her hometown, if s/he prefers a large or small facility, etc.
- Ombudsman
 - Help you find and interpret information from state inspection reports and the resident characteristics or quality measures



Cost Information

- Most nursing homes participate in the Medicare and/or Medicaid programs, which reimburse them for part or all of the care that some residents receive. Medicare pays for post-hospital rehabilitation care and hospice care services for short periods of time. Medicaid pays for nursing home care for longer periods for those who are financially eligible
- Most nursing home residents, even if they pay privately when they enter a home, eventually run out of money because of the high costs. They then apply to have the cost of their care paid for by Medicaid. Unless you are certain the resident can pay indefinitely with private funds, choose a facility that accepts Medicaid payment.



Review of Nursing Home Compare Website

<https://www.medicare.gov/care-compare/>

Nursing Home Care-Compare

<https://www.medicare.gov/care-compare/>

Find and compare local nursing homes **based on 5-star ratings,**



Medicare.gov

Federal Nursing Home Compare Website

- On this site, you can search for nursing homes by state, county, city, or zip code.
- Once you have selected a nursing facility or facilities, you are given the option of viewing several different types of information including facility characteristic, inspection, staffing level, and quality measure information.

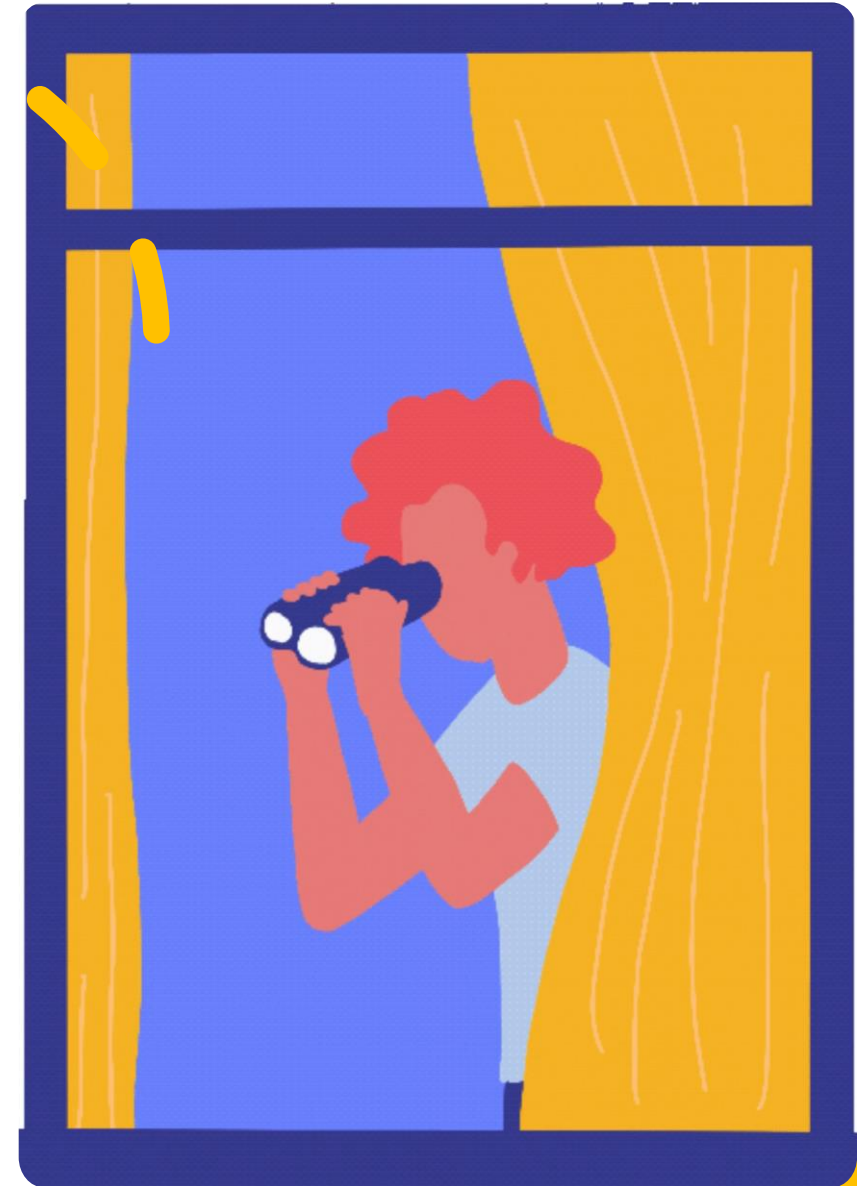
The screenshot shows the top section of the Federal Nursing Home Compare website. At the top, there is a teal banner with the text "Find & compare nursing homes, hospitals & other providers near you." Below this banner is a link that says "Learn more about the types of providers listed here". The main search area is a white box containing three input fields: "MY LOCATION" with "Milford, CT" entered, "PROVIDER TYPE" with a dropdown menu showing "Select one", and "KEYWORDS (optional)" which is empty. To the right of these fields is a "Search" button. Below the search box, the text "Or, select a provider type to learn more:" is displayed. Underneath this text are eight icons representing different provider types, each with a corresponding label: "Doctors & clinicians" (doctor icon), "Hospitals" (H icon), "Nursing homes" (NH icon), "Home health services" (house with heart icon), "Hospice care" (hands holding heart icon), "Inpatient rehabilitation facilities" (person at table icon), "Long-term care hospitals" (hospital building icon), and "Dialysis facilities" (kidneys icon).

Nursing Home Care Compare Demonstration

Visiting Prospective Nursing Homes

What to Look for – Using your Senses

- Do you notice a quick response to call lights?
- Are there residents calling out? If so, do staff respond quickly and kindly?
- Do the meals look appetizing? Are residents eating most of their food? Are staff patiently assisting residents who need it?
- Are there residents in physical restraints (formal or informal devices that hold residents in beds, chairs, and wheelchairs)? Why?
- Do resident rooms appear to reflect the individuality of their occupants?
- Are rooms, hallways, and meal tables clean?
- Is the environment noisy?
- Is there cheerful, respectful, pleasant, and warm interaction among staff and residents?
- Does the administrator seem to know the residents and enjoy being with them?



Things you Can Ask of Staff

- Does each shift have enough help to be able to care for residents as they'd like?
- Do they enjoy their work? Are their ideas and information solicited and valued by supervisors?
- What activities are residents involved in?
- Are temporary staffing agencies used?
- How often do residents who need it receive assistance with toileting?
- What does the facility do to encourage employee retention and continuity?
- Has the facility undergone any recent changes in ownership or management?

Things You can Learn from Talking With Other Residents or Families



- Are residents treated with respect and kindness?
- Does the facility respect the resident's wishes about their schedule (bedtime, baths, meals)?
- Is attention given to residents at night if awake? Is there anything for them to do?
- Does the resident have the same nursing assistant most days?
- Is there a family or resident council? If so, is the council led independently by families or residents or is it directed by staff members?
- Are staff responsive to resident requests? Do they assist the resident with toileting?
- Has the resident had missing possessions?
- Who handles resident or family member concerns? Is that person responsive?

**Know Your Rights
Applications, Admission,
Wait Lists, Deposits and
Contracts**

Apply! Get On the Wait List

- How to Apply?
- What are the Steps to the Application Process?
- What Financial Information can a nursing facility Request?
- Once I am on the waiting list when will I be admitted?
- How long will it take before I am admitted?
- When can my name be removed from the wait list?
- What can I do if I feel I am being improperly denied admission?



Contracts

Should I sign the admission contract that the nursing home gives me?

- Since the obligations of the nursing home are specified in the law, there may be no need to sign a contract.
- It is generally best to avoid signing a contract if you can.
- If you have any questions about a contract, discuss these with an attorney or the Ombudsman.
- Be particularly concerned about contract language that limits the home's liability, the resident's rights to sue, or requires disputes to be handled through "binding arbitration."

Deposits

When can a nursing home ask for a deposit or advance payment?

A nursing home may not require a deposit or advance payment if nursing home care will be paid for by Medicaid or Medicare.

Deposits for those covered by Medicare

No deposit may be required of a resident whose stay is coverable or partially coverable by Medicare. A nursing home may, however, request deposits for services such as private rooms, private duty nurse, television, phone and other personal comfort items that are not covered by Medicare.

Deposits for those covered by Medicaid

If you are already receiving Medicaid, the nursing facility may not request any deposit or advance payment from you. If you have applied for Medicaid, but have not yet been found eligible, and your stay will not be covered by Medicare, the nursing facility may only request a deposit or advance payment of no more than \$1,500. If a deposit is paid, it must be held in an account for your benefit and must be returned to you when your Medicaid eligibility has been established.

Getting Quality Care



Contact Info for the Long-Term Care Ombudsman

Telephone:

[1-866-388-1888](tel:1-866-388-1888)

Email:

ltop@ct.gov

Website:

<https://portal.ct.gov/LTCOP>

Facebook:

www.facebook.com/CTLTCOP

Quick Links and Resources

LTC Planning and Choosing a Nursing Home

LTC Planning Resources

- [Aging and Disability Resource Centers](#)
 - For a brochure of services [Click Here](#)
- [Area Agencies on Aging](#)
- [Centers for Independent Living \(CILs\)](#).
- [Administration for Community Living - Long Term Care](#)

Choosing a Nursing Home Resources

- [National Institute on Aging | How to Choose a Nursing Home](#)
- [National Consumer Voice | Consumers Guide to Choosing a LTC Facility](#)
- [CMS | Guide to Choosing a Nursing Home or Other Long Term Services and Supports](#)
- [Medicare | Nursing Home Checklist](#)
- [Medicare | Nursing Home Care Compare](#)
- [State of CT DPH Survey Lookup](#)
- [Link to CT Nursing Homes and Assisted Living Facilities COVID-19 Weekly Testing Data](#)
- [Link to Long Term Care Community Coalition Quarterly Publishing of Staffing Levels by State and Facility](#)

Quick Links and Resources

Admissions and Wait List Law

Admissions and Waiting List Law

- **Connecticut General Statutes**

- Sec.19a-560. Disclosure of Medicaid and Medicare participation and advance payment and deposit requirements by nursing homes.

Sec.19a-533. (Formerly Sec. 19-614a). Discrimination against indigent applicants. Definitions. Prohibitions. Record-keeping. Investigation of complaints. Penalties. Waiting lists; not required to accept indigents. Removal from waiting lists.

- **Regulations of Connecticut State Agencies**

- Sec. 17-311-200. Definitions.

Sec. 17-311-201. Prohibition of discrimination against indigent applicants.

Sec. 17-311-202. Admission in order of application of all applicants.

Sec. 17-311-203. Provision of receipts.

Sec. 17-311-204. Maintenance of dated list of applications.

Sec. 17-311-205. Mailing of written application to persons on dated list of applications.

Sec. 17-311-206. Maintenance of a waiting list

Sec. 17-311-207. Daily logs

Sec. 17-311-209. Admissions

Quick Links and Resources

Deposit and Advance Payments Laws

- Connecticut General Statutes § 19a-550 (b)(24), (25) and (26). Patients' Bill of Rights.
- 42 Code of Federal Regulations § 483.10 (g)(13). Resident rights.
- 42 Code of Federal Regulations § 483.15 (a). Admission, transfer and discharge rights.

These laws can be found at:

- [State Statutes - CT General Assembly Cite](#)
- [U.S. Code](#)
- [Federal Regulations.](#)

DPH Federal Regulations §483.15 Admission, transfer, and discharge rights.

- The facility must establish and implement an admissions policy.
- The Facility CANNOT
 - Not request or require residents or potential residents to waive their rights as set forth in this subpart and in applicable state, federal or local licensing or certification laws, including but not limited to their rights to Medicare or Medicaid; and
 - Not request or require oral or written assurance that residents or potential residents are not eligible for, or will not apply for, Medicare or Medicaid benefits.
 - Not request or require residents or potential residents to waive potential facility liability for losses of personal property
- A nursing facility must disclose and provide to a resident or potential resident prior to time of admission, notice of special characteristics or service limitations of the facility.

Wait List Laws CT Statute §19a-533

- State law requires nursing homes receiving state funds to admit applicants on a first-come, first-served basis, regardless of their source of payment, with several exceptions. Homes are required to keep waiting lists and must admit applicants in the order in which they are received, unless the law allows otherwise. Homes must send a receipt to each applicant who requests to be placed on the waiting list that indicates the time and date of the request (CGS § 19a-533).
- Post in a conspicuous place a notice informing applicants for admission that the facility is prohibited by statute from discriminating against indigent applicants for admission on the basis of source of payment. Such notice shall advise applicants for admission of the remedies available under this section and shall list the name, address and telephone number of the ombudsman who serves the region in which the facility is located;
- Be prohibited from requiring that an indigent person pay any sum of money or furnish any other consideration, including but not limited to the furnishing of an agreement by the relative, conservator or other responsible party of an indigent person which obligates such party to pay for care rendered to an indigent person as a condition for admission of such indigent person;
- Record in the patient roster, maintained pursuant to the Public Health Code, or in a separate roster maintained for this purpose, the number of patients who are Medicare, Medicaid and private pay patients on each day. Such numbers shall be recorded daily and made available, upon request, to the state or regional ombudsman.
- The Department of Social Services (DSS) can reduce the home's Medicaid reimbursement for one year for each violation of the waiting list law. Initial violations result in a 0.25% reduction and subsequent violations a 1% reduction (CGS § 19a-533(d)).

CT Statutes §19a-560 Disclosure of Medicaid/Medicare and Advance Payment / Deposit Requirements

- Must post in prominent location a sign stating whether a nursing home accepts Medicaid / Medicare
- Advanced Payment
 - Can't request advance payment or deposit from Medicare beneficiary for any services or supplies covered by those insurances as a condition of admission.
 - Can't request an advance payment or deposit from a Medicaid recipient as a condition of admission
 - May request advance payment or deposit of up to \$1,500 for a person who has applied for Medicaid, however those monies shall be returned to the individual when they are determined eligible for Medicaid

Wait List Laws CT Statute §19a-533 (CONT)

- A nursing home may not remove a person's name from its waiting list until that person is admitted, dies, or requests to have his name removed. But, if a home wishes to remove someone, and that person has not responded to phone calls and letters, it must wait at least 90 days from the date the name was originally placed on the list. It may then write to the individual and his designee, if the applicant requests, asking whether he wishes to remain on the list. If the person does not respond within 30 days, the home can remove the name. Likewise, the law allows homes to send an annual waiting list placement continuation letter to anyone who has been on a list for at least 90 days, and his designee. If the person does not respond in 30 days, the home may remove the name (CGS § 19a-533(b)(1)).

Exceptions to Waiver List Law

DSS Conn. Agency Regulations, § 17-311-209

1. an application is incomplete;
2. an applicant fails to meet the Public Health Code's level of care requirements;
3. a resident is returning from a hospital stay;
4. a resident is being transferred for medical reasons from one level of care to another in the same home;
5. an applicant needs protective services;
6. the Department of Public Health refers a resident to the home due to decertification or license revocation at another home;
7. the home is granted permission to withdraw from the Medicaid program;
8. an applicant has a contract with a continuing care retirement community or resides in a residential facility that offers health and other services and is owned or operated by the nursing home's owner or operator;
9. a designated number of beds are set aside for specialized care (e.g. Alzheimer's disease), short-term rehabilitation, hospice, or respite care;
10. the applicant's spouse is a resident;
11. the applicant was discharged from the home within 15 days of his or her request for re-admission;
12. a municipality owns and operates the facility and has a residency requirement;
13. the facility offers specialized medical treatments (a facility must designate a maximum number of beds);
14. the facility is owned by, operated by, or affiliated with a tax-exempt religious or fraternal organization that exists to serve its members;
15. the facility is owned or operated by a tax-exempt, nonstock, nonprofit corporation which benefits the municipality in which it is located and receives grants or donations from that municipality; or
16. the facility has a contract with a hospital allowing the hospital to discharge patients directly to the home (up to 15% of the facility's beds) (Conn. Agency Regulations, § 17-311-209).