

A Guide to Nursing Homes

A nursing home should be a place of refuge – ideally, it is a place where those who have grown too elderly or frail to live on their own can go and live safely in close proximity to medical professionals who will meet their needs and care for them. Nursing homes may also serve as a recovery facility during a temporary time of recuperation. Too often, though, nursing homes are places of abuse and neglect. Residents, many of whom maintain only limited contact with their loved ones, may suffer physical, verbal, and/or emotional abuse at the hands of those who are being paid to care for them. With the advances in medicine, more and more Americans are living longer lives and remaining productive and healthy until they reach older ages. Others, however, may suffer incapacitating physical or mental conditions that require them to seek help in a place where they can receive the attention, care, and treatment that cannot be provided in a home setting. Nursing homes can provide medical staff on premises and 24-hour attention and care.

As America grays, the number of nursing homes has increased correspondingly to the growing number of Americans in need of their services. While many nursing homes provide compassionate and attentive care, others employ and tolerate rogue employees, understaffing, or an environment where patients are, at best, neglected and, at worst, abused. When a senior becomes unable to live at home, or chooses to no longer live at home, they and their families should consider the various kinds of facility available to ensure that the facility selected is most suited to the needs of the senior.

Generally, there are three different kinds of facilities from which to choose:

1. Facilities that offer skilled nursing care with staff that can provide care for medical conditions that need treatment by medical personnel such as nurses and physical therapists. Some patients are in need this care only on a short-term basis, while others such as those who have Alzheimer's or Dementia, may need such care for extended periods of time. At a skilled nursing care facility, the therapy received by a patient is ordered by and overseen by the patient's doctor even though it may be carried out in a nursing home setting.

2. Facilities that offer, intermediate nursing care are similar to those that provide skilled nursing. They are most appropriate, however, for people with stable conditions that require daily assistance and not around-the-clock nursing supervision. Like skilled nursing care, intermediate nursing care is prescribed by the patient's doctor and administered by nurses. Generally, intermediate nursing care focuses on providing assistance with routine daily chores such as bathing and eating and continues over an extended period of time.

3. Facilities that provide custodial care. These facilities provide assistance to patients in performing daily tasks like eating, bathing and getting dressed. This care is usually is provided by people who have no medical training.

Once a decision is made on the level of care that is required, other considerations may also affect which nursing home a person selects. Some important considerations include whether a potential nursing home is close enough to family and friends that the patient will have frequent visits. If the patient is religious, the presence of religious services on the premises may be important. Other considerations include whether there is an outdoor area where residents can enjoy and get fresh air and the kinds of social activities and programs that are available to. Sadly, a person's income level and available resources often dictate the choices and drive their decisions when they select a nursing home. After all, nursing home care is extremely expensive. In 1996, the average cost of nursing home care in the United States was between \$46,000 and \$60,000. Obviously, all facilities are willing to accept those patients who can afford to fully pay for their care. Almost

one third of nursing home patients will fall within this category. The great majority of nursing homes, however, provide services pursuant to contracts with the Veterans Administration (the VA), the Civilian Health and Medical Program of the Uniformed Services (the CHMPUS), Health Maintenance Organizations (HMOs), or private insurance companies. Oftentimes residents are admitted to facilities under the auspices of Medicare, a federal health insurance program that provides coverage to people who are at least 65 years old. Residents with low income may participate in another federal program known as Medicaid. Close to half of all nursing home state Medicaid programs pay for care. Medicare is not a long-term solution for most people, however.

For example Medicare only covers approved skilled nursing care for the first twenty days. For the next eighty days, if a nursing home assumes a patient directly after a stay in a Medicare approved hospital, a fraction of the will be covered, although a daily co-payment of \$97 is required. After 100 days, if the patient's condition has improved so that they do not require such extensive care, Medicare payments will stop even if the person remains in the nursing home. Medicare and Medi-Gap insurance will not pay for nursing home care beyond the 100-day coverage.

For those who will be paying for the care themselves, a person must determine how much they are willing to spend and seek admission into a home within that price range. Even if you have nursing home insurance, there may be expenses you will still be responsible for. You should carefully review your policy to understand how much of these extra costs you will be responsible for paying. For those who know that their personal funds will be drained within a number of years and who, at that point, will be forced to apply for Medicaid to cover their nursing home costs, you should investigate whether any nursing home you are considering has Medicaid certified beds so that you will not have to leave the home you select for a new home when your personal resources run out. Be aware-not every home accepts Medicaid patients because Medicaid pays only a fixed amount of money, and the more Medicaid patients that a nursing home accepts, the more money they stand to lose by turning away a privately- funded resident.

People who are relying on Medicaid to pay for their nursing home at the time of their placement in a nursing home can be placed in any facility within a 50 mile radius of their residence. This procedure is

called "home assignment." In this process, a person has much less control over what home they will enter. Although they can typically turn down the first home offered, after that, they must accept any subsequent offer. To get around this rule, some people with enough money reserve and pay their own way for about a year. Once their funds are diminished, they can submit an application to Medicaid. This process allows people to exercise greater control over the selection of the home where they will become residents. Regardless of how you be paying for your nursing home stay, it is in your best interest to meet with the nursing home administration and make sure that you understand all the rules and options before signing a contract.

When selecting a nursing home, especially if you will be financing your stay in the nursing home, you may wish to call the state Department of Health and request a list of nursing homes near where you live. Once you have reviewed the list, contact the homes of interest and ask preliminary questions to determine if they meet your criteria. Questions you may want to ask include whether they accept Medicaid certified beds; how long the waiting list is for a Medicaid bed; and whether they accept Alzheimer's or dementia patients. Once you have narrowed your choices down to a small number of homes, contact Department of Health again to ensure that the homes being considered are licensed appropriately and to inquire if there have been any actions taken against their licenses because of deficiencies in the standard of care they provide. The Department of Health can tell you whether a particular home has passed the state inspection and whether there have been complaints filed against a home. By doing this due diligence, you can learn about a facility's history of compliance

with resident treatment guidelines. Having such information can help you make a wiser choice about which nursing home to select.

To assist you with the selection process, you will have provided a printable [Nursing Home Checklist](#).

Because of the trauma that often accompanies a move into a nursing home, your involvement in the process will make the transition easier for your spouse, your family members, or your friends in assisting you during this time. Sometimes, though, in spite of having done extensive due diligence and making every effort to select the best nursing home option, abuse or neglect may still occur.

If you or your loved one have been the victim of abuse or neglect while living in a nursing home, an attorney can best advise you of your rights and help you stop the abuse. They may also be able to assist you in holding the nursing home to account for the actions of their employees.

No senior in Alabama should have to suffer the indignity of abuse or neglect. If you or a loved one has experienced this abuse or neglect, contact an attorney today.

You may reach an attorney at King & Nix for a free consultation by calling our toll-free number, (855) 335-8769, or by completing a free case evaluation form on our website.