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SOCIETY

ADULT LONG-TERM CARE SERVICES

Long-term care is a broad range of supportive medical, personal, and social services needed by people who are unable to meet their basic living needs for an extended period of time. This may be caused by accident, illness, or frailty. Such conditions include the inability to move about, dress, bathe, eat, use a toilet, safely take medications, and avoid incontinence. Also, care may be needed to help the disabled with household cleaning, preparing meals, shopping, paying bills, visiting the doctor, or answering the phone. Long-term care disabilities are due to the cumulative effects of aging as well as cognitive impairment from stroke, depression, dementia, Alzheimer's disease, Parkinson's disease, etc.

How can I apply for long-term care services?

You may apply by contacting your local Department of Social Services Office for the care that you are inquiring about.

Would I have to pay for long-term care services?

There is no patient pay if you are categorically needy (i.e., recipient of SSI benefits). You should contact your local Department of Social Services for eligibility screening.

Do I need health insurance to help pay for Long-Term Care Services?

If you do not have sufficient income that will allow you to pay for Long-Term Care Service for an undetermined amount of time, you may want to apply for Medicare and/or Medicaid benefits.

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Can I remain in my home and receive long-term care benefits?

Yes, but you need to apply for long-term care benefits through the Department of Social Services for eligibility.

Do I have to sell my home to qualify for Long-Term Care benefits?

It depends on your circumstances. It may depend on how long you would need long-term care benefits, and the type of long-term care services you need.

What is a Geriatric Care Manager?

A geriatric care manager is a professional who specializes in assisting older people and their families in meeting their long-term care arrangements. Many geriatric care managers are nurses, social workers, or others who have training and/or experience in providing services to older citizens.

Families or caregivers who do not live near an older person may consider hiring a geriatric care manager to evaluate the older person's ability to remain independent in their home. Geriatric care managers can also assist with:

- Conducting care-planning assessments to identify problems, eligibility for assistance, and need for services;
- Screening, arranging and monitoring in-home help or other services;
- Reviewing financial, legal, or medical issues and offering referrals to geriatric specialists to conserve assets and avoid future problems;
- Providing crisis intervention;
- Acting as a liaison to families or caregivers at a distance by making sure that the older person is doing well and by alerting families or caregivers to potential problems;
- Moving an older person to or from a retirement community or nursing home; and
- Providing counseling and support

Long-term Care Services

1. Home-based Care Services:

- **Companion services** are available when an adult is unable to care for themselves and when there is no one available to provide the needed services without cost. The adult must meet the eligibility requirements. Services include, but are not limited to:
 - Bathing
 - Dressing

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- Toileting
 - Eating/feeding
 - Transportation
 - Meal preparation
 - Shopping
 - Supervision
 - Light housekeeping
 - Companionship
 - Household/financial management
- **Chore services** are the performance of non-routine, heavy home maintenance for adults in an independent situation who are responsible for maintenance of their residence and have no one available to provide this service without cost, and the adult is unable to perform the necessary heavy home maintenance task(s). Services include, but are not limited to:
 - Performing minor repair work on furniture and appliances in the home
 - Carrying coal, wood, and water
 - Chopping wood
 - Removing snow
 - Yard maintenance
 - Painting
- **Homemaker services** are performed by an individual or an agency provider who provides instruction in (or, where appropriate, performs) activities to maintain a household, such as:
 - Personal care
 - Home management
 - Household maintenance
 - Nutrition
 - Consumer education
 - Hygiene education
- **Home-Based Care services and Medicaid Personal Care Services (also known as Community Based-Care)** provide care to individuals who have met nursing facility criteria, but choose to receive some daily care in the home if there are additional supports to keep them safe and meet their needs the remainder of the time. These services may include, but are not limited to:
 - Bathing
 - Toileting
 - Bowel function
 - Dressing
 - Transferring

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- Bladder function
- Eating/feeding
- Supervision

2. **Adult Day Services** – day services from approved providers for a portion of a 24-hour day. Adult day services include:

- Personal supervision
- Promoting social, physical, and emotional well-being through companionship, self-education, and leisure activities.

What determines eligibility for this program?

A service specific assessment will be done utilizing the Full Uniform Assessment Instrument. Other admission and assessment procedures will be done in accordance with the Department of Social Services Standards and Regulations for Licensed Adult Day Care Centers.

Can a person receive personal care or home health and still attend day care?

Receiving one service does not preclude a client from receiving other services if needed. This, of course, depends on the availability of the service.

Is Medicaid or Medicare accepted for day care programs?

This would depend on the client's eligibility for these programs and the availability of a certified provider to offer this service.

Can this service be used for my parent while I work?

Service may be provided for purchase of respite for family caregivers.

3. **Adult Foster Care** is a locally optional program that provides room and board, supervision, and special services to an adult who has a physical or mental health need.

4. **Assisted Living Facility** provides a home for individuals who need assistance with activities of daily living, administration of medication and supervision due to behavioral problems, but do not require the level of care provided in a nursing facility.

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 of these facilities have health services on site.

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In most cases, assisted living residents pay a regular monthly rent, and then pay additional fees for the services they get. Assisted living facilities aren't paid for by Medicare. 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 meet your needs.

5. **Nursing Home** – Family members often serve as the caregivers for older people and persons with disabilities. When family members are unable to meet the needs of an older, injured or disabled person, Home Care Services are often the next option they consider. If this option is unavailable, then placement of the person in a nursing home may be appropriate.

However, most people admitted to a nursing home are there to receive acute post-hospital care for an injury or illness. Nursing home care may also be needed to:

- Allow an individual to continue their recovery process;
- Provide hospice services for a terminally ill patient;
- Facilitate an individual's rehabilitation; or
- Maintain nursing care for a person with chronic medical needs.

Nursing homes that receive federal funds must comply with federal legislation that calls for a high quality of care. Though all states must comply, at a minimum, with the federal regulations, some states have adopted tougher laws. To participate in the Medicare and Medicaid programs, nursing homes must be in compliance with the federal requirements for long term care facilities as prescribed in the U.S. Code of Federal Regulations.

Under the regulations, the nursing home must:

- Have sufficient nursing staff.
- Conduct initially a comprehensive and accurate assessment of each resident's functional capacity.
- Develop a comprehensive care plan for each resident.
- Prevent the deterioration of a resident's ability to bathe, dress, groom, transfer and ambulate, toilet, eat, and communicate.
- Provide, if a resident is unable to carry out activities of daily living, the necessary services to maintain good nutrition, grooming, and personal oral hygiene.
- Ensure that residents receive proper treatment and assistive devices to maintain vision and hearing abilities.
- Ensure that residents do not develop pressure sores and, if a resident has pressure sores, provide the necessary treatment and services to promote healing, prevent infection, and prevent new sores from developing.
- Provide appropriate treatment and services to incontinent residents to restore as much normal bladder functioning as possible.
- Ensure that the resident receives adequate supervision and assistive devices to prevent accidents.

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- Maintain acceptable parameters of nutritional status.
- Provide each resident with sufficient fluid intake to maintain proper hydration and health.
- Ensure that residents are free of any significant medication errors.
- Promote each resident's quality of life. Maintain dignity and respect of each resident.
- Ensure that the resident has the right to choose activities, schedules, and health care.
- Provide pharmaceutical services to meet the needs of each resident.
- Administer the nursing home in a manner that enables it to use its resources effectively and efficiently.
- Maintain accurate, complete, and easily accessible clinical records on each resident.

What can I do if I have a concern or complaint about my long-term care service provider?

The mission of the Ombudsman Program is to serve as an advocate for older persons receiving long-term care services. Local Ombudsmen provide older Virginians and their families with information, advocacy, complaint counseling, and assistance in resolving care problems. The program also represents the interests of long-term care consumers before state and federal government agencies and the General Assembly.

The objective is to receive, investigate, and work to resolve complaints involving quality of care issues.

- Assist residents in exercising their rights.
- Mediate concerns between residents and/or their families and the facility.
- Provide residents and their families with information about government benefits and other agencies that may be of assistance.

REFERRAL:

Office of the State Long-Term Care Ombudsman
 Virginia Association of Area Agencies on Aging
 530 East Main Street, Suite 800
 (804) 565-1600
 (800) 552-3402

Can I cancel my Long-Term Care Services?

Yes. You need to notify the agency that provides the services and the Department of Social Services.

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I have been denied, terminated, or services have been reduced. Can I file an appeal?

Yes. Applicants and recipients may request an appeal whenever their claim for Long-Term Care Services through Medicaid has been denied, terminated, or reduced.

Admission to Nursing Home

For people seeking admission to the nursing home, the nursing home must provide (orally and in writing), and prominently display, written information about how to apply for and use Medicare and Medicaid benefits. They must also provide information on how to receive refunds for previous payments covered by such benefits.

Resident Rights

Nursing home residents have patient rights and certain protections under the law. The nursing home must list and give all new residents a copy of these rights.

Resident rights usually include:

Respect: You have the right to be treated with dignity and respect.

Services and Fees: You must be informed in writing about services and fees before you enter the nursing home.

Money: You have the right to manage your own money or to choose someone else you trust to do this for you.

Privacy and Confidentiality: You have the right to privacy, and to keep and use your personal belongings and property as long as it doesn't interfere with the rights, health, or safety of others.

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.

Change Nursing Homes

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.

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Freedom from Abuse and Neglect

You have the right to be free from verbal, sexual, physical, and mental abuse, corporal punishment, and involuntary seclusion by anyone. This includes, but isn't 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. 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. The nursing home must investigate and report to the proper authorities all alleged violations and any injuries of unknown origin within five working days of the incident.

Freedom from Restraints

A physical restraint is any manual method or physical or mechanical device, material, or equipment attached or next to the resident's body that the resident can't remove easily, which restricts freedom of movement or normal access to one's own body. A chemical restraint is a drug that is used for discipline or convenience and not required to treat medical symptoms.

It is against the law for a nursing home to use physical or chemical restraints, unless they are necessary to treat your medical symptoms. Restraints may not be used for punishment, or for the convenience of the nursing home staff. You have the right to refuse restraint, except if you are at risk of harming yourself or others.

Information on Services and Fees

You must be informed in writing about all facility services (those that are charged and not charged to you) and fees before you move into the nursing home. The nursing home can't require a minimum entrance fee as a condition of admission if your care is paid for by Medicare or Medicaid. Also, you must be informed when any services and fees change. You also have the right to choose to either work or not work for the facility.

You must be provided with information on the facility's policies, procedures, rules and regulations, as well as state survey reports on the facility. All policies and procedures must be upheld by the facility the same for all individuals, regardless of payment source. You must also be given information about how to contact the state ombudsman and licensure office and advocacy groups.

You have the right to daily communication in your own language, and assistance if there is a sensory impairment.

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Participation in Care

You have the right to receive adequate or appropriate care, and to participate in activities in the facility.

You have the right to be fully informed in a language you understand about your total health status, including your medical condition and medications. You have the right to see your own doctor.

You have the right to take part in developing your care plan, including discharge planning. You can also express any grievances you may have about your care and treatment. You also have the right to create an advance directive.

You have the right to self-administer medications unless the nursing home finds this unsafe. You also have the right to refuse medications and treatments (but this could be harmful to your health) and refuse to participate in experimental treatment.

You have the right to access all your records and reports, including clinical records (medical records and reports), within 24 hours. You also have the right to photocopy your records for a standard fee when you provide two days notice to the nursing home.

Finally, the nursing home must notify your physician and, if known, your legal representative or an interested family member when:

- (1) you are involved in an accident that resulted in an injury or may require a physician's intervention;
- (2) there is a deterioration of your health, mental, or psychosocial status in a life threatening condition or clinical complications;
- (3) your treatment needs to change significantly;
- (4) the nursing home decides to transfer or discharge you from the home.

Visitors

You have the right to spend private time with visitors. 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, social, legal, or other 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.

Privacy and Confidentiality

You have the right to confidentiality regarding medical, personal, and financial affairs. The nursing home must provide you with privacy for phone calls, mail and meetings with family, friends and residents.

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You have the right to manage your personal financial affairs in privacy. You also have the right to file a complaint with the state for abuse, neglect, or misappropriation of property

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. They also have to provide you with an appropriate activities program designed to meet your needs.

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. 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 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.

Residents' Groups

You have a right to form a residents' group to discuss issues and concerns about the nursing home's policies and operations. Most homes have such groups, often called a residents' council. The home must give you meeting space, and must listen to and act upon grievances and recommendations of the group.

Concerns and Complaints

Residents have the right to:

- present grievances to the staff or others without fear of reprisal
- have grievances promptly resolved by the facility

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 isn't resolved, ask to talk with the supervisor, the social worker, the Director of Nursing, Administrator, or your doctor.

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

The nursing home must post the name, address, and telephone number of state groups, such as the State Survey Agency, the State Licensure Office, the State Ombudsman Program, the

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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.

Transfers and Discharges

You have the right to be transferred or discharged only for medical reasons, if health or safety is endangered, for nonpayment of services, or if the facility closes. In most instances, you have the right to be notified of the transfer 30 days in advance.

You have the right to know the reason for the transfer, the date it's effective, the location to which you will be discharged and a statement of the right to appeal. The facility must ensure a safe and orderly transfer.

I am married, but my spouse needs to go into a nursing home. Do I have to sell the house?

The home does not have to be sold but you should contact your local legal aid office or a private attorney to get legal advice.

How can I ensure my family member will be provided proper care in the nursing home?

Federal law requires that all patients have a plan of care developed for them and the family must be included in developing that plan of care. Ask to see this plan and read it carefully; obtain a copy and keep it with you when you visit your family member to monitor the care provided. If the care plan does not address all of your loved one's needs, discuss this with the Director of Nursing. Ask if the Certified Nursing Assistant (CNA) who cares for your family member sees the care plan to know what daily care is needed. If they do not routinely review the care plan, the CNA may not know the special needs of your family member.

Will a Last Will and Testament protect my home from being sold if I go into a nursing home?

No. A Will takes effect at death. There are many things that can happen that may affect your home and assets before you pass. We suggest that you talk to someone about estate planning.

If I live in a Nursing Home may I keep any of my Social Security money?

Yes. You are supposed to be given \$40 a month from your benefits check.

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**Free Legal information by Web and Phone: www.vlas.org and
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