

LANE COUNTY NURSING FACILITY TIPS

SENIOR & DISABLED SERVICES

www.sdslane.org

Eugene: (541) 682-4038
TTY: (541) 682-4567


Springfield: (541) 682-3500
TTY: (541) 682-3537

Cottage Grove: (541) 682-7800
TTY: (541) 682-7821


Florence: (541) 997-8251 (Voice/TTY)

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***Important:
Read
Your Guide to
Choosing a
Nursing Home,
and complete the
facility checklist.***



Oregon offers many options for long-term care. The Oregon Model of Care promotes an individual's right to receive care in the "least restrictive" setting possible. Care provided in the home, an adult foster home, or assisted living or residential care facility all provide excellent alternatives for individuals. However, nursing facility care still serves an important purpose as either a short- or long-term option.

Nursing facilities offer specific types of *skilled care* not provided in other care facilities. Skilled nursing care is a level of care that must be given or supervised by licensed nurses and is under the general direction of a doctor (e.g., physical, occupational, and speech therapies, and complex medical problems).

Nursing facilities also offer *intermediate* or basic care that provides the necessities of daily living (e.g., bathing, grooming, and toileting). Medicare or Medicare supplements do not cover intermediate care. However, private long-term care insurance policies typically provide some coverage for intermediate care. Refer to your policy for specifics. Persons *without* adequate private resources should ask Senior & Disabled Services about a Medicaid Resource Assessment.

Your Guide to Choosing a Nursing Home

The Health Care Financing Administration (HCFA), the Federal Agency that oversees Medicare and Medicaid, has published ***Your Guide to Choosing a Nursing Home*** (HCFA-02174). The Guide is a *must read* for anyone considering nursing home placement for themselves or another. **You are urged to read the HCFA guide closely and to complete the comprehensive facility checklist** (pages 31-36).

The checklist covers:

- | | |
|---|--|
| <input type="checkbox"/> Basic Information | <input type="checkbox"/> Quality of Care |
| <input type="checkbox"/> Nursing Home Information | <input type="checkbox"/> Nutrition and Hydration |
| <input type="checkbox"/> Quality of Life | <input type="checkbox"/> Safety |

Hospital patients can also obtain information and assistance through the hospital's medical social work staff.

- Sacred Heart Medical Center, Medical Social Work, (541) 686-6965
- McKenzie-Willamette Hospital, Care Management, (541) 726-4418
- Peace Harbor Hospital, Discharge Planners, (541) 997-8412

Selecting a facility is a significant decision; take adequate time to review facilities listed on the back cover of this document. Refer to the checklist on page 2 for key questions to ask during a visit to each nursing facility.

While the initial reason for selecting a nursing facility may be the need for skilled nursing care, the resident's anticipated length of stay should also be considered. If an individual's stay in the facility may be lengthy, consider whether the facility is able to meet specific needs of the resident? Also, consider the location of the nursing facility in relation to the resident's family and friends.

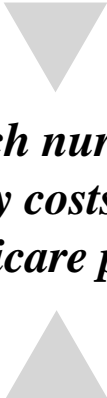
Paying for Care

Pages 10-11 of *Your Guide to Choosing a Nursing Home* discuss payment options. Some additional items are noted here.

Medicare Coverage of Skilled Nursing Care

An individual may need inpatient skilled nursing or rehabilitation services after a hospital stay. If the individual meets certain *days-of-stay* requirements, Medicare Hospital Insurance (Part A) may help pay for up to 100 days in a participating skilled nursing facility in each benefit period. Medicare pays all approved charges for the first 20 days; a co-payment is required for days 21 through 100. Covered services include a semi-private room and meals, skilled nursing services, rehabilitation services, medications, and medical supplies. The actual number of paid skilled-care days is dependent upon each patient's health status.

- Medicare Part A (hospital insurance) does *not* cover nursing facility care if the patient does *not* require *skilled* nursing or *skilled* rehabilitation services.



Which nursing facility costs does Medicare pay?

- ❑ A nursing facility must give 24 hours notice that skilled care is ending. This does not mean that the resident must leave the facility; however, it does mean that Medicare will no longer cover the cost of the care. Residents may request a review.
- ❑ Persons who pay for their own care (private pay residents) are responsible for expenses usually covered by Medicare.
- ❑ Most nursing home costs are covered for dual-eligible clients, those with Medicare and Medicaid coverage.

Senior & Disabled Services' Role


Senior & Disabled Services, or S&DS, is the Area Agency on Aging and Disability Services (AAA) for Lane County, Oregon. As an AAA, the organization provides services such as home-delivered meals, senior dining centers, and rural outreach to seniors. S&DS staff also determines Medicaid eligibility and provides case management for Medicaid-eligible clients who live at home or in long-term care facilities. The agency provides a range of other services.

What is Medicaid? How Do I Apply?


Medicaid pays for the medical and long-term care costs of eligible low-income persons. Application for Medicaid begins with a call to S&DS' Information & Referral staff, (541) 682-4038. Staff gathers details about an individual's situation and makes an appointment for a Medicaid Intake appointment. During this meeting, a case manager will meet with the applicant and his or her family members. Information gathered during this appointment allows the case manager to begin to determine an individual's care needs and financial eligibility for Medicaid. Once eligibility is determined, the case manager works with the client and the family to set up a care plan. Some nursing facility residents may be required to *spend down* personal assets before they become eligible for Medicaid. People should contact S&DS for specific information on this to avoid making disqualifying transfers of funds or assets, or spending funds unnecessarily.

Pre-Admission Screening

Prior to admission to a nursing facility, every individual is asked to take part in a pre-admission screening (PAS). The PAS is a comprehensive face-to-face assessment of the individual. The nursing home



Medicaid pays for medical and long-term care costs for low-income people; Lane County residents may apply at Senior & Disabled Services.



level of care and payment is determined during this screening. It is also a time to learn about alternative care options for individuals who do not need, or do not want, to be admitted to a nursing home. The PAS also allows the opportunity to identify individuals who may be able to *relocate* to a less-restrictive care setting, such as one's home, an adult foster home, or residential or assisting living facilities.

Medicaid Clients

S&DS staff completes the PAS for individuals whose care will be paid for by Medicaid.

Hospitalized Patients

There are no charges for hospitalized patients needing a PAS in order to transfer to a nursing facility. Contact the hospital's medical social work staff.

- Sacred Heart Medical Center, Medical Social Work,
(541) 686-6965
- McKenzie-Willamette Hospital, Care Management,
(541) 726-4418
- Peace Harbor Hospital, Discharge Planners,
(541) 997-8412

Private Screening

Persons who will be paying for their own care (private pay) may obtain a list of providers who assess care needs from the Oregon Senior and Disabled Services, 1-800-232-3020.

Fees and Services

Each facility offers a range of services for an all-inclusive rate. Ask each facility to provide this information.

Review Evaluation and Complaint Files


Ongoing Monitoring

One role of S&DS is to oversee and protect clients. S&DS staff investigates all complaints of suspected neglect or abuse concerning seniors and adults with disabilities. People choosing a care facility



The pre-admission screening determines an individual's care needs, and provides an opportunity for placement in alternative care facilities.





Review surveys of Lane County care facilities at Senior & Disabled Services. Nursing facility survey summaries are available online.



Abuse of adults is not OK!



are encouraged to review the Public Disclosure Files that S&DS maintains on each long-term care facility. The files contain copies of complaints that have been made against the facility as well as staff reports documenting the outcomes of the investigations into complaints.

Annual Surveys of Facilities

The Oregon Senior and Disabled Services Division's Client Care Monitoring Unit (CCMU) conducts annual surveys (evaluations) of nursing facilities. Results of these surveys are available on the Nursing Home Compare website at <http://www.medicare.gov/nursing/home.asp>.

The survey results are also available in the S&DS Public Disclosure files, and each facility is required to display the survey in a conspicuous site.

Complaint Process

S&DS Abuse Prevention and Protective Services— (541) 682-4038

Reports of suspected neglect, fraud, or abuse against a senior or an adult with a disability may be made anonymously:

- Call Information & Referral, (541) 682-4038, or toll-free: 1-800-441-4038
- Send an e-mail message to S&DS@lane.cog.or.us.

Nursing Facility Ombudsman Program— 1-800-522-2602

Certified Ombudsmen are specially trained volunteer advocates who provide a link between the residents of long-term care facilities and the community. The Ombudsman's role is to:

- Inform individuals and their families of their rights as long-term care facility residents;
- Objectively investigate all concerns and complaints brought to their attention; and
- Seek solutions that best address the concerns of the residents.

Oregon Peer Review Organization (OMPRO)—

1-800-344-4354

OMPRO works to protect your Medicare rights, at no cost to Medicare recipients or their families. OMPRO staff works with health care providers to improve the quality of care received. Staff investigates complaints about care. Peer Review Organizations exist in each state.

Special Notes on Discharge and Transfer

As stated on pages 22-23 of the HCFA Guide, nursing facilities cannot discharge residents unless:

- It is necessary for the welfare, health, or safety of the resident or others;
- The resident's health has declined to the point that the nursing facility cannot meet their care needs;
- The resident's health has improved to the point that nursing facility care is no longer necessary;
- The nursing facility has not been paid for services; or
- The nursing facility has closed.

Nursing facilities may discharge a resident if their behavior creates a serious and immediate threat to themselves or other residents. If a resident experiences a medical emergency, nursing facilities may transfer a resident to a hospital.

Should a nursing facility choose to ask a resident to leave its facility, the resident has a right to a hearing and cannot be transferred involuntarily until a hearings officer has issued a decision. Prior to discharging the resident, the nursing facility must identify another environment available to the resident, that can better meet the resident's needs.


More Details Online

The Health Care Financing Administration's web site is at **www.hcfa.gov**.

Senior & Disabled Services' web site is at **<http://www.lcog.org/sds>**.



***Stand Up For
Your Rights!
Help is available.***




***Check these
Internet sites for
helpful
information.***



NURSING FACILITIES IN LANE COUNTY

Note: All Lane County Nursing Facilities accept Medicare and Medicaid payments.

	Alzheimer's Endorsement Locked/ Secured Units	Number of beds	Smoking	Pets Allowed*	Adult Day Care (rates and conditions)
Coast Fork Nursing Center, (541) 942-5528 515 Grant Avenue, Cottage Grove, OR 97424	No endorsement. Secured area for residents with dementia.	74	Outside	Yes	Yes, as available. Call for rates.
Creswell Care Center, (541) 895-3333 525 S. 2 nd St., Creswell, OR 97426	No endorsement. Code alert system.	76	No	May visit. Standard Poodle visits daily.	\$6.75/hour. Four-hour minimum. Extra for bathing.
Eugene Rehab & Specialty Care, (541) 687-1310 2360 Chambers St., Eugene OR 97405	<i>Wander Guard</i> system-locked doors	116	Outside	With Admin. Approval	No
The Good Samaritan Health Center, (541) 687-9211 3500 Hilyard St., Eugene, OR 97405	No	154	Yes, inside and outside	May Visit	No
Grandview Rehab, (541) 998-2395 530 Birch St., Junction City, OR 97448	No	68	Outside	May Visit with Admin. Approval	\$10/hour, three-hour minimum. \$59/day.
Green Valley Rehabilitation Health Center (541) 683-5032; 1735 Adkins St., Eugene, OR 97401	No	101	Outside	May Visit	No
Hillside Heights Rehabilitation Center, (541) 683-2155 1201 McLean Blvd., Eugene, OR 97405	No	79	Outside	May Visit	No
Marquis Care, (541) 746-6581 1333 N. 1 st St., Springfield, OR 97477	No. Alarms on exterior doors.	120	Outside	May Visit. Resident cat. Therapy dog. Other visiting animals.	No
Riverpark Nursing & Rehabilitation, (541) 345-6199 425 Alexander Loop, Eugene, OR 97401	No	119	Outside, sub-acute. No smoking	May Visit	No
Siuslaw Care Center, (541) 997-8436 1951 21 st St., Florence, OR 97439	No endorsement. Doors secured.	65	No	No	No
South Hills Health Care Center, (541) 345-0534 1166 E 28 th Ave., Eugene, OR 97403	No	110	Outside	Yes	\$5/hour, minimum \$25/day
Valley West, (541) 686-2828 2300 Warren St., Eugene, OR 97405	Yes 16 beds	120	Outside	Yes, if resident able to maintain.	No

* Facilities that accept pets require that the animals be housebroken and pest-free. Owners should be able to provide proof of immunizations.