NORTH DAKOTA
DEPARTMENT of HEALTH

Long-term Care Decision Tree

Nursing, Assisted Living, and Basic Care Facilities provide a variety of services, both medical and personal, to people who are unable to manage independently in their homes or communities.

Home health care is available in some communities as an option to help stay at home. Consider all available service and costs before deciding on which type of service or facility to choose for yourself or your loved one.

The North Dakota Aging & Disability Resource LINK provides information and counseling about choices for care and support services at home and in the community. An options counselor can help find services that are currently needed or plan for future needs. The North Dakota Aging & Disability Resource LINK can be accessed at:

https://carechoice.nd.assistguide.net/

1-855-GO2LINK (1-855-462-5465)

ND Relay TTY (1-800-366-6888)

Assisted Living

- An assisted living facility is a congregate residential setting with private apartments and contracted services.
- Residents generally have to meet certain mobility and independence requirements.
- Residents choose a la carte services, which are written into a service plan contract; monthly rental is based on the number of services provided by the contract and the square footage of the unit that is rented.
- A basic service package generally includes meals, housekeeping, activities, transportation, cable TV and laundry.
- Facilities often offer up to three meals per day.
- Facilities may offer additional services, for additional fees:
  - o Housekeeping and laundry
  - o Medication management
  - o Bathing assistance
  - o Transportation
  - o Activities
  - o Religious services and entertainment
- If a resident is in need of hospice care, some facilities allow the tenant to remain in the facility if the tenant contracts with a third party or utilizes family support to meet their end-of-life needs.

- People who choose assisted living facilities generally do so because they can maintain more independence and can enjoy the social interactions these facilities provide.
- Assisted living facilities are regulated by the North Dakota Department of Human Services and the North Dakota Department of Health.
- More information on assisted living facilities can be found at: http://www.ndltca.org/image/cache/NDLTCA_FactsFigures2015.pdf.
- A listing of assisted living facilities can be found at: http://www.nd.gov/dhs/services/medicalserv/medicaid/docs/assisted-living/al-facility-list.pdf.

Basic Care

- A basic care facility is a congregate residential setting with mostly private rooms and assistance available 24 hours a day consistent with the resident's care plan.
- Basic care facilities generally offer an all-inclusive rate which covers room, meals, assistance with personal care, supervision, activities, transportation, medication administration, nursing assessment and care planning.
- People who choose basic care often have a need for supervision and some assistance with daily personal care and medication administration.
- Basic care facilities may be licensed to provide end of life care services to residents who have an agreement with a hospice agency.
- Basic care facilities are regulated by the North Dakota Department of Health.
- More information on basic care facilities can be found at: http://www.ndltca.org/image/cache/NDLTCA_FactsFigures2015.pdf.
- A list of basic care facilities can be found at: http://www.ndhealth.gov/HF/PDF_files/Basic%20Care/basic_care_march_2015_with_total_beds.pdf.

Nursing Facilities

- Nursing facilities are for residents whose needs are complex and who need 24-hour nursing care and supervision.
- The people who choose to or must live in a nursing facility cannot take care of their personal needs, require care throughout the day, and need the safety that 24-hour staffing can provide.
- If a nursing facility is the most appropriate choice for you or a loved one, the following information is designed to help you choose a facility that fits your needs.
- All nursing facilities in North Dakota are licensed by the North Dakota Department of Health and are Medicare and Medicaid certified by the Centers for Medicare & Medicaid Services (CMS) to participate in the Medicare/Medicaid program.

Basic Questions

Cost

Quality of Care

Basic Questions

What are the admission criteria?

An individual must meet certain medical eligibility requirements to be approved for admission to a nursing facility. The Preadmission Screening and Resident Review (PASRR) is a federally required screening tool that ensures individuals meet eligibility requirements for the facility.

An individual will need an order from their physician before they will be admitted. The last appointment with their physician must be within 30 days of admission.

Where are nursing facilities located?

Facilities are located throughout the state, but are not available in every town. Selection should depend partly on the proximity and convenience of the facility to the individual's physician, family, or persons who will visit most often.

A list of nursing facilities by location is at: http://www.ndltca.org/membership/membership-facilities/.

This North Dakota Long-term Care Association site provides a map of nursing facilities by region, and includes addresses and contact information.

A list of nursing facilities in the state is located at: https://www.ndhealth.gov/HF/PDF_files/Nursing%20Home/nursing_home_march_2015_with_total_beds.pdf.

Nursing facilities can also be researched at: https://www.medicare.gov/nursinghomecompare/search.html.

Are all applicants admitted to the facility for which they have applied?

No. If a nursing facility does not have the staff or resources to care for an individual, the facility is not required to admit that person. Nursing facilities may also deny admission when they are unlikely to be paid for the resident's care. Nursing homes may require both a primary and a secondary payment source before approving admission. Sources of payment include your own income and resources, long-term care insurance, and Medicaid for those with limited income and resources. Coverage by Medicare is limited based on specific medical criteria and a qualifying three day in-patient stay in a hospital. More information on Medicare requirements for nursing home payment is available at: http://longtermcare.gov/medicare-medicaid-more/medicare/.

Can a resident choose a single or double room?

Residents have a choice of a single or private room based on availability and ability to pay. A facility may charge a higher rate for a private room.

What personal items can a resident bring to their room?

Residents of all nursing facilities have the right to keep and use personal belongings and property as long as they do not interfere with the rights, health and safety of the resident and others. Space in rooms is usually limited, so the facility may set restrictions on the size and amount of furnishings, personal items and clothing a resident may have. Be sure to inquire at the nursing facility to determine whether specific furniture will be allowed.

Nursing facilities often have policies covering what items of value a resident may keep in their rooms, so check with each facility to determine what is appropriate. Facilities will often limit the number of items with monetary value for liability reasons.

Cost

How do I pay for my stay at a nursing facility?

The average rate for a North Dakota nursing facility in 2015 was approximately $250 per day. Rates for North Dakota nursing facilities are provided by North Dakota Department of Human Services at: http://www.nd.gov/dhs/services/medicalserv/medicaid/docs/nf-rates.pdf.

Fees for nursing facilities can be paid in different ways. Residents may pay through private resources, with Medicaid, or through long-term care insurance. Most people who enter a nursing facility initially pay for care out of pocket. As personal resources are used over a period of time, an individual may eventually become eligible for Medicaid. A person will have to apply for Medicaid coverage; receiving coverage is not an automatic process.

Medicaid:

Medicaid nursing facility services are available only when other payment options are unavailable and the individual is eligible for the Medicaid program.

If a person has a certain amount of assets, they will not qualify for Medicaid until those assets are depleted or reduced. This can happen as a person pays for nursing care with their own assets. Even if an individual is eligible for Medicaid, all of their income (except for a monthly personal needs allowance) will go to pay for nursing facility expenses and Medicaid will cover the rest. Individuals can learn more about the income and asset limits or how to apply for Medicaid at their local county social service office at: http://www.nd.gov/dhs/locations/countysocialserv/.

Even when a person receives Medicaid, they can retain a certain amount of money each month to meet their personal needs. In 2015, this amount was $65 per month. They can also keep enough income to cover their health insurance premiums and other allowable expenses. If the individual has a spouse who is not in the nursing facility, the spouse can retain a portion of their joint income to allow them to remain in the community.

Medicare:

Medicare generally does not cover long-term care stays in a nursing facility, but does provide health coverage for hospital care, doctor services and medical supplies while a resident is in a nursing facility. Medicare may cover expenses for a short stay in a nursing facility if the resident requires skilled nursing care. Skilled nursing care is a term used for specific services provided by trained professionals on a temporary basis to a resident who is ill or injured. Examples include nursing care for a post-operative wound, or occupational therapist services to help a resident become independent after a fall. In order for Medicare to help pay, the following conditions must be met:

- Had a 3-day qualifying hospital inpatient stay; not including observation days
- Admitted to a Medicare-certified nursing facility within 30 days of a prior hospital stay
- Need skilled care such as skilled nursing services, physical therapy or other types of therapy

If all conditions are met, Medicare may pay for some of the costs up to 100 days as long as the resident's condition continues to improve. For the first 20 days, Medicare pays 100 percent of costs. For days 21 through 100, Medicare will pay a portion of the costs.

For more information on Medicare coverage visit: https://www.medicare.gov/.

Long-term Care Insurance:

Long-term care insurance policies vary widely. Some policies cover only nursing home care, while others cover assisted living, adult care, other home or community based care, and medical equipment. Long-term care polices typically reimburse policyholders a daily amount depending on the services provided. Policies may also have limits on how long coverage is provided and how much the policy will pay.

Review your long-term care insurance coverage or call your insurance company to determine whether you have appropriate coverage for anticipated needs.

Individuals who purchase long-term care insurance policies that meet certain requirements specified by the Deficit Reduction Act of 2005 (Partnership Policies) can apply for Medicaid under special rules that allow them to protect assets equal to the insurance benefits received from a Partnership Policy.

Self-pay:

Individuals can use their personal income and savings to pay for nursing facility care. You may also be able to use your life insurance policy to pay for long-term care. Check with your life insurance agent to determine whether this option is available under your policy.

If an individual's personal assets become depleted, the person may apply for Medicaid coverage.

For more information on how to pay for nursing facility care, go to: http://longtermcare.gov/costs-how-to-pay/.

What therapies and services does the facility provide?

Nursing facilities must provide residents with preventive care or therapy so that they can maintain or regain health. The facility must provide treatment or arrange appointments and provide transportation to specialists. Here are a few sample questions you may want to ask the facility:

- What specialty services are provided?
  - Are specialists like eye doctors, dentists and podiatrists, available to see residents on a regular basis?
  - What types of therapy and rehabilitation services are available?
  - Who provides the services?
- Are there specialized services for residents with dementia?
- Can I keep my regular primary physician?
  - Does my primary physician have privileges to see me in the facility?
  - How often can I see a physician?
- Does the facility provide transportation for appointments?

What kinds of activities are available?

Ask what activities are available and whether the facility has specific staff devoted to planning and engaging residents in activities.

Can I leave the nursing facility for outings unattended by staff?

Anyone can leave the facility as long as the person can remain safe. The facility must consider a resident's safety, including their medical needs and conditions, and generally will work with the family or care giver to assure needs are met during the leave or outing. Dementia units may have a different policy.

Quality of Care

What quality of care can I expect from the facility?

Nursing facilities must meet standards of care defined by both the state and federal government in order to remain licensed. Residents and others can file a complaint with the North Dakota Department of Health if they believe the facility has not met the standards. The Department of Health investigates complaints and, if violations are found, will issue a deficiency statement and require corrective action by the facility. A record of deficiency statements, including the scope and severity of the cited issues, are located at:

https://www.ndhealth.gov/hf/deficiency/ds-search.aspx.

To compare the quality of care provided at every Medicare and Medicaid-certified nursing facility in the country, visit:
http://www.medicare.gov/nursinghomecompare/search.html.

Another service, Nursing Home Compare, uses a 5-star rating system to assess quality of care at a given nursing facility. The rating is based on 1) Health Inspections, 2) Quality Measures (QMs), and 3) Staffing. More stars indicating better quality. Their website can be found at:
https://www.medicare.gov/NursingHomeCompare/About/Ratings.html

How do I know whether the facility has adequate staff to meet my needs?

Nursing facilities provide 24-hour staffing and are required to meet the needs of the residents. Adequate staffing, both in terms of numbers and in terms of training levels, is critical to a safe and healthy environment. Nursing facilities are required to post information about the number of nursing staff, including certified nursing assistants, they employ. Information about staffing levels and a facility's rating is collected by the Nursing Home Compare service, and can be found here:
http://www.medicare.gov/nursinghomecompare/search.html.

Disclaimer

This document is intended to help people learn more about long-term care (LTC) before making LTC decisions. It is intended as a guideline ONLY; it does not present comprehensive information about long term care. Any person who is considering long term care is responsible for obtaining the comprehensive information needed to make an informed and sound decision about LTC. Links to websites outside of North Dakota state government are provided for information purposes only, and are not an endorsement of the site or its owner.