

# SINCE YOU CARE

A Series of Guides from **MetLife** in Cooperation with the National Alliance for Caregiving

## MAKING THE NURSING HOME CHOICE

### ABOUT THE SUBJECT

In many families, there is a wholehearted, confirmed agreement that nursing home placement will never be an option. We hold on staunchly to those promises we made to our loved ones, promises made with love and conviction, perhaps based more on feelings than on fact.

In the best of circumstances the potential need for a nursing home will be a gradual process. This will allow time for research into the type of facility, payment options, and location that are best suited to the needs of the individual. It can also provide time for acceptance and adjustment on the part of both family and the person going into the facility. Too often there is an acute change in physical or mental functioning of an older adult that leaves family and friends without time to plan. If the individual going into a nursing home is mentally competent, it is important to try and accommodate their preference of nursing facilities. If they have dementia and are incapable of making decisions, then you will need to act on their behalf. This is important as some facilities have special units and areas that are set up specifically for people with dementia.

Your family member's physical and mental changes, plus the various choices of care support, may help you to determine if nursing home placement is appropriate. There is no easy way to decide or guarantee if nursing home placement is the right decision, but do your homework and trust your instincts. And start

planning early for this option if it appears that your relative may need it.

The nation's nursing homes provided care to 1.6 million people in 1999. One and a half million residents, or 90%, are over age 65.<sup>1</sup> Most of the population requires assistance with bathing, dressing and toileting.<sup>2</sup> As we age, the chance of developing a dementia increases, with dementia the most common reason for placement in a nursing facility.<sup>3</sup> People over the age of 65 face a 40% lifetime risk of nursing home placement. Ten percent of those will stay at least five or more years.<sup>4</sup>

### THINGS YOU NEED TO KNOW

A nursing home is a residence that provides room, meals, nursing and rehabilitative care, medical services and protective supervision to its residents. While an individual coming from the hospital may require the services of many long-term care professionals such as nurses, therapists and social workers, a nursing home is not a hospital (acute care) setting. The goal, at a nursing home, is to help the person regain as much of their independent function as possible

*Caregivers face many challenges as they search for information and make decisions about how best to provide care to their loved ones. To help meet their needs, MetLife offers Since You Care<sup>SM</sup>—a series of guides which provide practical suggestions and useful tools on a variety of specific care-related subjects.*

in a supportive environment. Nursing homes provide assistance with the activities of daily living and recreational activities. They are certified and licensed by states and the Federal government to provide levels of care ranging from custodial (maintenance of maximum function) to skilled nursing that can be delivered only by trained professionals.

By definition, a skilled nursing facility (SNF) is required to provide continuous, 24-hour nursing supervision by registered or vocational nurses. Commonly referred to as nursing homes or convalescent hospitals, SNFs help people in need of long-term or short-term care and assistance with many aspects of daily living.

An Intermediate Care Facility (ICF) is required to provide eight hours of nursing supervision a day. It is less expensive and generally serves patients who can get around by themselves and need less supervision and care. Licensed nurses are not always readily available.

Some nursing homes are non-profit corporations sponsored by religious or charitable organizations. Others are operated as for-profit corporations and may be part of a chain of nursing homes.

### **Choosing a Facility**

One of the first things to consider when making a nursing home choice is the needs of the older individual for whom you're providing care. Make a list of special care they may need, such as dementia care or various types of therapy.

If the person is hospitalized, the discharge planner and/or social worker can assist you in assessing the needs of the individual and locating

an appropriate facility. Do not hesitate to speak up and ask for assistance or clarification. It will still be up to you to actually visit the facilities and make the final decision, but you don't have to go through the process alone.

If you are choosing a nursing facility for someone who is presently at home, ask for referrals from your physician, friends, and family. Your local Long-Term Care Ombudsman may be able to assist in providing a directory of area facilities. An ombudsman can supply information about any particular problems, strengths and weaknesses of a facility, but cannot recommend one in particular. The number for your Long-Term Care Ombudsman can be found in the blue pages of the phone book, usually under Social Services. You can also obtain the number by calling the *ElderCare Locator* (see *Resources to Get You Started*) and ask them for the local number. The ombudsman can also provide the results of the latest state inspection and survey results.

Other factors such as location, cost, the quality of care, services, size, religious and cultural preferences and accommodations for special care need to be considered. Keep in mind the personality of the person needing care. Include the person, if at all possible, in the decision making process.

### **Location**

The facility's location is very important. Newly admitted residents will adjust more easily to their new environment when family and friends are frequent visitors. So, while a 40 minute drive may not initially seem like an exhausting venture, traveling in all kinds of weather when you're tired, or not feeling well may make visiting a chore.

Expect a time period of adjustment with feelings of anger, depression, perhaps hostility from your loved one. Allow them to vent these feelings. Accept that they are normal responses to the situation, probably even appropriate. But continue to visit regularly. Don't get into shouting matches about their feelings. Acknowledge them. This will go a long way to ease their adjustment. Just remember they need your continued presence in their lives.

### **Size**

Look at the size of the facility. A small, close knit community may be just the ticket for one resident and the wrong choice for another. Remember the personality of the individual. Were they a doer or a sitter? Does the facility have grounds for walking and getting outside? Can a resident get away from the everyday activity and still be safe, if that is what they desire?

### **Types of Services**

Check the services provided.

- ♥ Can therapies—physical, occupational, speech and respiratory—be provided in-house? Are the therapists sub-contracted or employees of the facility?
- ♥ Can the facility maintain intravenous lines?
- ♥ Can they accommodate special populations such as dialysis patients or those with dementia?
- ♥ What sort of end of life care is available?
- ♥ Is there palliative care (e.g., pain management, music therapy, counseling for terminally ill patients)?

These are all areas to consider when formalizing plans for and making decisions about nursing home placement. There is a specific checklist under *Tools* to assist you in facility-to-facility

comparison as well as other helpful material under *Resources To Get You Started* in this pamphlet.

### **Visiting a Facility**

When you've located a few facilities that you'd like to consider more thoroughly, plan on visiting each one, both with scheduled and unscheduled visits, at different times and on different days of the week.

Should you choose to, you can check out the facility's latest state inspection survey prior to visiting. This may assist you in your decision and help formulate questions for when you meet with the admission personnel.

The State Inspection Survey is done every 9-15 months. Deficiencies are those areas that the state found lacking upon inspection. Deficiencies are rated by scope (how often a certain problem occurs) and by severity (how seriously the problem impacts the health and safety of the residents).<sup>5</sup> You may obtain these inspection results from the Long Term Care Ombudsman or on the Internet at [www.medicare.gov/NHCompare/home.asp](http://www.medicare.gov/NHCompare/home.asp). This site is maintained by the federal government, and provides detailed results of Medicare and Medicaid facilities surveys by state. A facility itself must also post the results of the most recent survey results in an easily accessible, visible place within the residence.

### **The Nursing Home Tour**

If you choose to make your first visit a scheduled one, you will need to call the admissions director to make an appointment. You'll be given a formal tour of the facility on that day. If the

potential resident will need any therapy, ask to see these facilities as well. Ask if you can see the kitchen area and dietary section of the facility. Suggest that you might like to have a meal there, particularly if it is around the lunch hour so that you can see and taste the food. As you are walking around, take note of what you hear and don't hear.

- ♥ Is it silent?
- ♥ Is there activity?
- ♥ Is there interactive communication between residents and staff? How are the call bells being answered, or are they being answered?
- ♥ Is there any odor? There should not be any strong smell of urine or feces. With today's cleaning products, there is no reason for offensive smells.
- ♥ How clean does it look?
- ♥ Does it appear well-maintained?
- ♥ Are the residents dressed appropriately for the season?
- ♥ Do they appear well-groomed?
- ♥ Are activity areas busy and well used?
- ♥ Ask about the ratios of nurse to resident and aide to resident.
- ♥ What is the staff turnover rate?

As you tour, look to see the inspection survey posting. If you have not yet asked questions, now would be a good time. Confirm any accreditation that the facility may have such as Joint Commission on Accreditation of Healthcare Organizations (JCAHO) or Commission on Accreditation of Rehabilitation Facilities (CARF).

## Legal Concerns

At the end of the visit, you should get written information about the facility and a contact name for any follow up questions you may have. You will also be given information to complete

regarding the prospective resident's financial status, prospective method of payment, and the admissions contract. Review them thoroughly. You may want to have an elder law attorney review the information.

If you don't have a financial and health power of attorney, as well as a living will, you should strongly consider obtaining them now. If the individual entering the facility is not competent, you will need to discuss a conservatorship with an attorney.

## Paying for Care

When considering a nursing home stay, the financial resources of the prospective resident is always part of the decision. The average cost of a nursing home stay is \$61,000 a year, with the average stay being two-and-half years.<sup>6</sup> This varies depending on the area of the country. There are various avenues to research for payment: Medicare, Medicaid, long-term care insurance, Veterans' benefits and private funding or out-of-pocket payment.

## Medicare

Medicare payments account for only about 1.2% of patient nursing home days of stay.<sup>7</sup> Medicare Part A pays for 20 days in a SNF if an individual meets certain criteria:

- ♥ A full three day hospital stay must precede the admission to a SNF.
- ♥ The services you need from the nursing home are related to the condition for which you were treated in the hospital.
- ♥ You require skilled nursing or formal therapies from a licensed professional on a daily basis.
- ♥ Your physician certifies that your care can only be provided on an inpatient basis.

Medicare pays for the first 20 days that a resident remains under Medicare criteria. From day 21-100, Medicare will pay some costs after the deductible, which varies from year to year. If you have a Medicare supplement plan, it may pick up the deductible amount for as long as Medicare Part A is billed first. Remember to check with your carrier if you are part of Medicare Plus Choice. A facility will need to be an approved or participating provider for your reimbursement.

### **Medicaid**

Medicaid is the state and federal program that will pay most nursing home costs for people who have limited incomes or have spent down their assets. Generally, the nursing home resident on Medicaid must spend down his assets to around \$2,000. There are variations from state to state regarding items such as income eligibility and spousal assets. It is best to check with your local Social Services agency regarding the application process and guidelines. Medicaid is the primary payor for 7 out of 10 nursing home residents.<sup>8</sup>

If you're anticipating having to use Medicare or Medicaid for nursing home costs, providing you meet stringent eligibility requirements, remember to pick a facility that is certified for that program. If it is not, then even if the resident is eligible, Medicaid and Medicare will not pay. In the case of Medicaid, if a person is on Medicaid and in an appropriate facility, if that facility ceases to participate in the program, the Nursing Home Resident Protection Amendment of 1999 requires that the facility continue to care for its Medicaid recipients already in residence.<sup>9</sup>

### **Long-Term Care Insurance**

Long-term care insurance is private pay insurance that can assist in reimbursement for nursing home

costs if an individual meets the eligibility criteria in the policy. The insurance must be purchased before it is needed, for example, before nursing home placement becomes necessary. There are many different plans and it is always prudent to check with your carrier regarding eligibility criteria, deductibles, and reimbursement. The National Association of Insurance Commissioners (NAIC), has free information regarding long-term care insurance. You can locate this information in *Resources to Get You Started*, at the end of this guide.

### **Veterans' Benefits**

If the person is a veteran, check with the local bureau of Veterans' Affairs to see if they are eligible for veterans' benefits.

### **Personal Financing**

Most long-term nursing home stays are financed through the resident's or family's personal funds. Estate planning and management of those financial resources can be overwhelming. Sometimes enlisting the services of an elder law attorney can be helpful.

### **State Health Insurance Assistance Programs (SHIPS)**

SHIPS is a group of programs administered by individual states and funded by the Center for Medicare & Medicaid Services (CMS). The program is set up to answer questions about paying for long-term care, or programs available to help pay for care. The purpose is to provide education, outreach, counseling and information to Medicare beneficiaries, their families and caregivers. In other states, programs such as SHIPS are known by other names such as:

- ♥ SHIBA (Statewide Health Insurance Benefits Advisors)

- ♥ HIBAC (Health Insurance & Benefits Assistance Corporation)
- ♥ MMAP (Medicare Medicaid Assistance Program)<sup>10</sup>

## HELPFUL HINTS

### Protecting You and the Resident

When you've finally decided upon a facility, you need to know your rights and those of your family member. Before you or the resident sign the admissions agreement, understand what you're signing. Remember, this is a legal contract and outlines the facility's responsibilities and its relationship with the resident.

The admissions contract should, at a minimum, contain the daily room rate, items covered in the basic rate, reasons for discharge and transfer, and the policy regarding payment of the daily room rate if the resident goes to the hospital or the family takes the resident out for a vacation. The contract should also cover facility liability for resident injury, and loss of personal property.

Do not sign any paperwork unless everything has fully been explained. A facility cannot require a family member or friend to sign as a "guarantor" or "responsible party." That can happen only if the family member or friend signs papers stating specifically that they intend to pay for the care. If you sign as Power of Attorney (POA) or guardian, attach that to your signature. Using "responsible party" or "guarantor" indicates personal liability for the cost of care; this is illegal for residents on Medicaid and unenforceable for privately paying residents.<sup>11</sup>

Make sure to ask for a copy of the patient's bill of rights. There are both state and federal statutes supporting this. Ask for a copy of the facility's grievance process. Inform the facility that you want a copy of the plan of care for the resident

once completed. You will want to keep this and update it with future family care planning meetings.

### What's Covered and What's Not

- ♥ Know what is and is not covered in basic fees, and when a prepayment or deposits are required. Personal items, such as TV, phone, and incontinent supplies may cost extra.
- ♥ Physicians' visits are extra.
- ♥ A facility cannot require prepayment from a resident relying on Medicare or Medicaid to pay for their nursing home stay, but may require a deposit if the resident plans on paying for their stay out-of-pocket.<sup>12</sup>
- ♥ Also, be sure to check on policies for holding a nursing home room when the person goes into the hospital for a period of time. Will there be an extra cost to hold the room?

### Handling Complaints

Even in the best of facilities, issues may arise that cause concern to residents and family members. Make certain if you are interceding on behalf of the resident that you fully understand the circumstances of the situation or incident. Sometimes it is just a misunderstanding, a language barrier or even a personality conflict that can be easily resolved.

If you determine that indeed something needs further investigation, take the appropriate steps:

- ♥ Direct your concern to those staff members who are directly involved. Try to be non-confrontational. Make a note of the date/time/names of people involved.
- ♥ If direct staff communication is not productive, take the following steps: go to the charge nurse or director of nursing and be specific about the issue if they do not have a first-hand account of the complaint.

- ♥ Review the nursing home's formal grievance process and call the nursing home administrator.
- ♥ Contact your local Long-Term Care Ombudsman. The ombudsman has the power, based on federal law, to intervene on behalf of consumers having problems with nursing home care. The inquiry can be kept confidential.
- ♥ The State Survey Agency licenses and conducts annual inspections to monitor and evaluate the care the facility provides. This agency is required to investigate complaints involving health and safety of patients within two working days.<sup>13</sup>

Always keep a written record of the information, who you spoke with and on what day, and the responses and proposed action and answers.

### **Have you made the right decision?**

It will seem that you will never find the right facility with all the bells and whistles that you want for your family member. You'll question if you're really making the right decision to place them at all. But once you've looked at a few facilities, compared them and really assessed the needs of your family member and the ability of each facility to meet them, then you will be ready to make your decision. Once you make your decision, you'll probably doubt yourself again. Give yourself time. Stay involved and visible in your family member's life, which will be beneficial to both of you. Speak up for what you feel is important; ask about what you don't understand. Stay open to suggestions, and don't be afraid to reassess the situation and make changes if you feel they are appropriate. Remember, you can do no more than your best, and if you've done that, neither you nor your family member can ask any more of you.

## SOME RESOURCES TO GET YOU STARTED

### **Books and Publications**

- ♥ AARP makes available free pamphlets assisting in the nursing home choice and payment areas.
  - *Choosing Good Care: A Family Guide to Finding a Nursing home* (D17064)
  - *Paying for Nursing Homes: Understanding Medicaid* (D17249)
  - *Solving Nursing Home Problems: A Guide for Families* (D17065)

They may be obtained by sending a request to: AARP Fulfillment, 601 E St., N.W., Washington, D.C. 20059. Please include the title, stock number and your mailing address.

- ♥ *Centers for Medicare and Medicaid Services (CMS)* in conjunction with individual states oversees nursing home quality and certification. CMS offers a booklet, "Guide to Choosing a Nursing Home." Go to [www.medicare.gov](http://www.medicare.gov) and choose "Publications." You may also call 800-633-4227 for further information.
- ♥ *When Someone You Love Needs Nursing Home, Assisted Living, or In-Home Care*  
A comprehensive book, written by psychologists, that covers essential material in easy-to-understand language. Included is a comprehensive resource section, checklists and worksheets. Bornstein, R. and Languirand, M. (2002). New York, NY: Newmarket Press, \$16.95 ISBN: 1557045348
- ♥ *The New Nursing Homes: A 20 Minute Way to Find Great Long-Term Care*  
This book was written and created by nurses at the University of Missouri-Columbia and University of Wisconsin for consumers looking at nursing home care. The book may be ordered from Fairview Press, 2450 Riverside Ave., Minneapolis, MN 55454; \$14.95, ISBN: 1577490991.

## Internet Sites

- ♥ **American Health Care Association (AHCA)**  
This organization was established in 1949 to monitor, promote and educate public and official understanding of member nursing homes. The site has much information for consumers relating to long-term care, specific to the subject of nursing home care with state-specific areas of information. The site can be accessed at [www.ahca.org](http://www.ahca.org).
  
- ♥ **American Association of Homes and Services for the Aging (AAHSA)**  
The site offers useful information about nursing homes including how to choose one, and general terms and information. The site can be accessed at: [www.aahsa.org](http://www.aahsa.org).
  
- ♥ **Administration on Aging**  
This site is maintained by the U.S. Department of Health and Human Services and provides resources, news and developments and information for older adults. [www.aoa.dhhs.gov](http://www.aoa.dhhs.gov)
  
- ♥ **Benefits Checkup**  
This is a site sponsored by the National Council on the Aging, which identifies programs for which seniors are eligible. [www.benefitscheckup.org](http://www.benefitscheckup.org)
  
- ♥ **National Association of Area Agencies on Aging (N4A)**  
The National Association of Area Agencies on Aging is the umbrella organization for the 655 Area Agencies on Aging throughout the United States which provide information and services, and coordinate and administer programs for older adults. The federally-funded *Eldercare Locator*, established by the U.S. Administration on Aging in 1991, and administered by N4A, provides callers with information about local services by zip code. Call 800-677-1116, 9:00 a.m.-8:00 p.m. ET, or go to [www.n4a.org](http://www.n4a.org).

- ♥ **The National Association of Elder Law Attorneys**  
The site can assist in locating an attorney that specializes in the field of elder law, estate planning, Medicaid issues, etc. Access it at [www.naela.com](http://www.naela.com).
  
- ♥ **U.S. Department of Health and Human Services**  
The government offers a guide to choosing a nursing home that can be accessed at: [www.medicare.gov/Publications/Pubs/pdf/nhguide.pdf](http://www.medicare.gov/Publications/Pubs/pdf/nhguide.pdf). If you do not have Internet access, the guide can also be ordered by calling 800-644-4227.

## USEFUL TOOLS

Here is a tool to help you evaluate nursing homes you may be considering.

- ♥ Facility Checklist<sup>14</sup>

<sup>1</sup> *The National Nursing Home Survey: 1999 Summary*, Vital and Health Statistics, Series 13, Number 152, Department of Health and Human Services.

<sup>2</sup> Ibid.

<sup>3</sup> Burke, J.R., and Morgenlander, J.C., *Managing Common Behavioral Problems in Dementia: How to Improve Quality of Life for Patients and Families*, Postgrad Medicine 106(5): 131-140, 1999.

<sup>4</sup> *Guide to Choosing a Nursing Home*, Centers for Medicare & Medicaid Services, Department of Health & Human Services, 2001.

<sup>5</sup> Ibid.

<sup>6</sup> *MetLife Market Survey on Nursing Home and Home Care Costs 2002* MetLife Mature Market Institute, 2002.

<sup>7</sup> Jones, A., *The National Nursing Home Survey: 1999 Summary*. The National Nursing Home Survey, National Center for Health Statistics Vital Health Stat 13(152). 2002.

<sup>8</sup> *Guide to Choosing a Nursing Home*, U.S. Department of Health & Human Services Centers for Medicare & Medicaid Services, Baltimore, MD, April 2002.

<sup>9</sup> Fact Sheets: *Involuntary Transfer and Discharge*, A Consumer Guide to Choosing a Nursing Home, National Citizens Coalition for Nursing Home, Washington, D.C. 2002.

<sup>10</sup> Fact Sheet - *What is Arizona SHIP?*, Arizona Department of Economic Security, Accessed 9/9/02.

<sup>11</sup> *Nursing Home Admission Contracts*, AARP, Washington, D.C., 2002.

<sup>12</sup> *Guide to Choosing a Nursing Home*, Centers for Medicare & Medicaid Services, Department of Health & Human Services, 2001.

<sup>13</sup> Fact Sheets: *Involuntary Transfer and Discharge*, A Consumer Guide to Choosing a Nursing Home, National Citizens Coalition for Nursing Home, Washington, D.C. 2002.

<sup>14</sup> *Guide to Choosing a Nursing Home*, Centers for Medicare & Medicaid Services, Department of Health & Human Services, 2001.

**FACILITY CHECKLIST**

**Name of Facility** \_\_\_\_\_

♥ **Staffing**

What is the staff to resident ratio? \_\_\_\_\_

What are the facility's hiring and staffing policies? \_\_\_\_\_

How are prospective employees screened? \_\_\_\_\_

What kind of training do new employees receive? \_\_\_\_\_

♥ **Health Care and Services**

Can residents retain their personal physician if they wish? \_\_\_\_\_

Will a resident be moved out of the facility if additional care is needed? \_\_\_\_\_

Do residents have input in the development of care plans? \_\_\_\_\_

Are rehabilitation programs and therapies offered, as appropriate? \_\_\_\_\_

What are the policies on "do not resuscitate" and "advance directives"? \_\_\_\_\_

If applicable, does the facility meet the Alzheimer's Association criteria? \_\_\_\_\_

Does the facility offer specialized programs or services? \_\_\_\_\_

♥ **Accommodations**

Is there adequate privacy and space in resident rooms? \_\_\_\_\_

What personal possessions are permitted in resident rooms? \_\_\_\_\_

How are items protected from theft? \_\_\_\_\_

If rooms are shared, how are roommates selected? \_\_\_\_\_

What happens if roommates are not compatible? \_\_\_\_\_

What are the policies on transfer and relocation of residents? \_\_\_\_\_

Are there activity rooms and lounge areas for resident use? \_\_\_\_\_

Are the bathing and food preparation areas clean and accessible? \_\_\_\_\_

♥ **Meals and Resident Activities**

Are meals served in an appealing manner and at proper temperature? \_\_\_\_\_

Can you sample a meal? \_\_\_\_\_

Are there food choices? \_\_\_\_\_

Are there accommodations for special diets? \_\_\_\_\_

Are snacks and drinks available between meals? \_\_\_\_\_

Is there an active residents' council? \_\_\_\_\_

Are special events held at or outside the facility and what is scheduled? \_\_\_\_\_

Are there religious or cultural activities offered? \_\_\_\_\_

♥ **Family Visits**

What are the facility's policies concerning family visits? \_\_\_\_\_  
 Are there designated visiting hours? \_\_\_\_\_  
 What space is available for visits? \_\_\_\_\_  
 Are there limitations on the number of visitors or frequency of visits? \_\_\_\_\_  
 Are family members permitted to join relatives for occasional meals? \_\_\_\_\_

♥ **Payment Policies**

Is the facility approved to accept Medicare or Medicaid patients? \_\_\_\_\_  
 What is the billing and payment policy? \_\_\_\_\_  
 What is included in the daily/monthly rate? \_\_\_\_\_  
 Are there any additional charges? \_\_\_\_\_  
 How long will the bed be held if the resident is hospitalized? \_\_\_\_\_

♥ **Facility Environment**

Do the residents appear to be well cared for, properly groomed, and dressed appropriately for the season and time of day? \_\_\_\_\_  
 Do staff seem to be friendly, caring and accommodating to residents, visitors and others?  
 \_\_\_\_\_  
 Do staff members respond promptly to resident's requests? \_\_\_\_\_  
 Is the facility clean? \_\_\_\_\_  
 Are there strong odors in the facility? \_\_\_\_\_  
 Is the facility well maintained, pleasing and cheerful? \_\_\_\_\_  
 Are the exits clearly marked and accessible? \_\_\_\_\_

♥ **Survey Reports**

When was the facility's last survey conducted? \_\_\_\_\_  
 Is the most recent survey report available in the facility? If so, where? \_\_\_\_\_  
 Have cited deficiencies been corrected? \_\_\_\_\_  
 If corrected, when and how were they corrected? \_\_\_\_\_  
 How will the facility prevent them from recurring? \_\_\_\_\_  
 If deficiencies are not yet corrected, what is the facility's plan for correcting? \_\_\_\_\_

## ABOUT THE AUTHORS OF SINCE YOU CARE<sup>SM</sup>

**SINCE YOU CARE** guides are prepared by the MetLife Mature Market Institute in cooperation with the National Alliance for Caregiving and MetLife's Nurse Care Managers.

**MetLife Mature Market Institute<sup>SM</sup>** is the company's information and policy resource center on issues related to aging, retirement, long-term care and the mature market.

**MetLife Nurse Care Managers** are available to MetLife's long-term care customers and their caregivers, on a daily basis, to help identify and resolve caregiving questions and concerns through counseling and referral.

**National Alliance for Caregiving** is a non-profit coalition of 38 national organizations that focuses on issues of family caregiving.

Mature Market Institute  
MetLife  
57 Greens Farms Road  
Westport, CT 06880  
E-Mail – [MatureMarketInstitute@metlife.com](mailto:MatureMarketInstitute@metlife.com)  
[www.maturemarketinstitute.com](http://www.maturemarketinstitute.com)

National Alliance for Caregiving  
4720 Montgomery Lane, Fifth Floor  
Bethesda, MD 20814  
[www.caregiving.org](http://www.caregiving.org)

MetLife provides long-term care insurance, annuities and retirement solutions to individuals and groups. MetLife, a subsidiary of MetLife, Inc. (NYSE: MET), is a leading provider of insurance and other financial services to individual and institutional customers. The MetLife companies serve approximately 12 million individuals in the U.S. and companies and institutions with 33 million employees and members.

---

*This information is general in nature. It is not a substitute for obtaining guidance from a health care, financial or other professional.*

---

SiNCE YOU CARE

**MetLife**