

## EVALUATING SENIOR FACILITIES

Please make as many copies of this as you need to compare your options. Some facilities you visit may not offer all types of living arrangements or levels of care in this checklist.

*Life at* \_\_\_\_\_

### Independent Living

What services and assistance are provided to people in independent living? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is any of this at an additional cost? \_\_\_\_\_ If so, what are the costs? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which of your doctors comes here? \_\_\_\_\_  
\_\_\_\_\_

Which do not? \_\_\_\_\_  
\_\_\_\_\_

How would you get to your doctors, your dentist, your ophthalmologist or other medical providers? \_\_\_\_\_  
\_\_\_\_\_

Would someone accompany you to take notes? \_\_\_\_\_

If so, who? \_\_\_\_\_ How much would you pay? \$ \_\_\_\_\_

Would they share information from and with this facility? \_\_\_\_\_

If so, how? \_\_\_\_\_

How would your doctor's observations and recommendations be communicated? \_\_\_\_\_

*Even very expensive Continuing Care Retirement Communities ("CCRCs") may have an arrangement with one general practitioner or internist and perhaps a geriatric psychiatrist who come to the CCRC. All residents must see this person or make their own arrangements to see someone else, just as they must to see a specialist. Some doctors, nurse practitioners, dentists and lawyers make house calls.*

Will you be allowed to remain in independent living while receiving some help with "activities of daily living" (bathing, dressing, toileting, continence, moving from one position to another ["transferring"] getting sufficient nutrition and hydration["eating"]) and medication management? \_\_\_\_\_

If so, which activities? \_\_\_\_\_

If so, who provides this help? \_\_\_\_\_

Is there a cost? \_\_\_\_\_ If so, what? \$ \_\_\_\_\_

Are you allowed to hire people from outside to help? \_\_\_\_\_

If so, who? \_\_\_\_\_

How much would it cost? \_\_\_\_\_

Assisted living

Is there an additional entrance fee for assisted living? \_\_\_\_\_

If so, what? \$ \_\_\_\_\_

Are people living here given a waiting list preference? \_\_\_\_\_

What help could you receive in independent living while waiting for a place in assisted living? \_\_\_\_\_

What is the monthly cost for assisted living? \_\_\_\_\_

What does it include? \_\_\_\_\_

What is the certified nurse's assistant ("CNA") : patient staffing ratio at different times of day? \_\_\_\_\_

How is medication dispensed? \_\_\_\_\_

When are R.N.s present? \_\_\_\_\_ On call? \_\_\_\_\_

Is a physician on call? \_\_\_\_\_ If so, when? \_\_\_\_\_

Will your bed/room/apartment be held if you enter a hospital, rehabilitation or nursing facility? \_\_\_\_\_ If so, for how long? \_\_\_\_\_

What happens if you decide to enter a facility somewhere else? \_\_\_\_\_

Memory care

Does this facility have a separate memory care facility? \_\_\_\_\_

Is there an additional entry or monthly fee? \_\_\_\_ If so, how much? \_\_\_\_\_

What is the staffing? \_\_\_\_\_

What services are provided? \_\_\_\_\_

What is the physical layout like? \_\_\_\_\_

Are people moved from one room to another? If so, why? \_\_\_\_\_

What is the written policy on administering psychotropic drugs? \_\_\_\_\_

Nursing home

*Most post-hospitalization nursing home and rehabilitation facility stays are about 30 days (21 at Green House nursing home "cottages.") Most last no more than 90 days, too short to trigger third-party payment. But 20% are for more than 5 years. 51.6% of us die in a nursing home.*

Is there an additional entry, monthly or daily fee for the nursing home? \_\_\_\_\_ If so, how much? \$ \_\_\_\_\_

Are private rooms available? \_\_\_\_\_ If so, are they only available if "medically necessary"? \_\_\_\_\_ What is the additional cost? \$ \_\_\_\_\_

How many Medicare beds are available? \_\_\_\_\_

What is the turnover? How does that relate to Medicare payments? \_\_\_\_\_

How many Medicaid beds are available? \_\_\_\_\_

How long can you afford private pay at current rates? \_\_\_\_\_

How are nonprescription medicines, disposable items, communication and entertainment devices and other personal needs such as lotions and booties paid for? \_\_\_\_\_

*Medicaid permits a person to keep only \$60/month for these; the VA \$90. Medicaid planning before or early in retirement is ideal. After entering a nursing home but before applying for Medicaid other, more limited planning can be done.*

If there is no bed (or no Medicare or Medicaid bed) available, what arrangements are made? \_\_\_\_\_

If you enter a hospital or rehabilitative facility, how long will your bed be held? \_\_\_\_\_

How can you move between the nursing home, assisted and independent living? \_\_\_\_\_

What is the CNA/patient staffing ratio during the day? \_\_\_ in the evenings? \_\_\_ at night? \_\_\_ on holidays? \_\_\_\_\_

How is medication dispensed? \_\_\_\_\_

What is the L.V.N./patient staffing ratio during the day? \_\_\_ in the evenings? \_\_\_ at night? \_\_\_ on holidays? \_\_\_\_\_

Is there an R.N. present? \_\_\_\_\_ When? \_\_\_\_\_

Is there an R.N. on call? \_\_\_\_\_ When? \_\_\_\_\_

Is there a physician on call? \_\_\_\_\_ When? \_\_\_\_\_

What is the staffing hierarchy? \_\_\_\_\_

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*Generally speaking, the fewer levels and more autonomy, the better and less expensive the facility.*

What is the CNA absentee rate? \_\_\_\_\_ What is the turnover rate? \_\_\_\_\_

*Nursing homes typically have a high CNA absentee rate and a 100-170% turnover rate.*

Are you permitted to hire a private duty nurse? \_\_\_\_\_

If so, how much would that cost? \_\_\_\_\_

### Hospice

Does hospice care involve additional costs? \_\_\_\_\_ If so, what? \_\_\_\_\_

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Are there facility requirements for receiving hospice care? \_\_\_\_\_

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*Previously Medicaid hospice services were only provided to a person whom a doctor certified could be expected to live no longer than six months. Now it is recognized that certain*

*progressive diseases, such as ALS and Parkinson's, have no clear progression timeline. Medicaid also no longer requires giving up "cure" to receive pain management and related palliative care, including hospice.*

What services does this hospice provide? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Some include companionship, a chaplain, and counseling for the family continuing for up to 13 months after the person's death.*

Do hospice workers come to you and follow you through various levels of care? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Long-Term Care Insurance

Is the facility currently licensed for the type of care covered by the policy in the bed and building in which you would reside? (check [www.dads.state.tx.us](http://www.dads.state.tx.us)) \_\_\_\_\_

In which you might reside in the future? (check this, too) \_\_\_\_\_

Does it provide the R.N. availability required by the policy in the bed and building in which you would reside? (get this in writing) \_\_\_\_\_

In which you might reside in the future? (get this in writing) \_\_\_\_\_

If your policy covers home health care, does it include or exclude locations at the facility where you would reside now or might reside in the future? For example, does it limit home health care to “your own home” and exclude “assisted living”? What does the policy provide regarding “assisted living” or “independent living” or “facility?” \_\_\_\_\_

How does this fit with this facility’s rules? \_\_\_\_\_

**Before signing any facility contract, get specific, written pre-approval from your long-term care insurer including a doctor-specified plan of care and the number of hours or visits and amount of money the insurer will reimburse, including payment terms. Make sure that it is just what the doctor ordered and that it can be easily and quickly changed to meet your changing needs.**

**The written contract governs, not what you are told. Read it carefully, twice.**