

Nursing Homes

Description:

Chronic and Convalescent

Skilled nursing home care is available to individuals who can no longer remain at home because the care and supervision required are too extensive for family members or available home care services to manage. This level of care may also be appropriate for discharged hospital patients who require sub-acute care and are not yet ready to return home. Facilities in Connecticut that offer skilled care are called chronic and convalescent nursing homes. Residents of these facilities require ongoing nursing care and substantial assistance with activities of daily living. These facilities are required by federal and state law to provide a variety of medical and social services, which are designed to promote and maintain residents' highest levels of physical, mental and psychosocial functions.

Rest Homes with Nursing Supervision

Rest homes with nursing supervision are for individuals with chronic conditions who are unable to live independently but do not require constant skilled nursing care. Persons in rest homes usually have controlled and/or stable conditions that require minimal skilled-nursing services, nursing supervision or assistance with personal care on a daily basis. Homes provide a full range of medical, social, recreational and supportive services and 24-hour nursing supervision under medical direction.

The Connecticut Department of Public Health (DPH) licenses and serves as the regulatory and enforcement agency for nursing homes in the state. DPH achieves this by surveying nursing homes, enforcing federal requirements and certifying that nursing homes meet standards. Nursing home residents have the right to file complaints with DPH against a nursing home, its staff or other residents.

The Centers for Medicare and Medicaid Services (CMS) is a federal agency that requires every state to continually monitor its nursing homes to ensure that they meet federal laws and regulations. Nursing home complaints can also be filed with CMS. Persons should direct complaints to CMS if they believe the DPH is not adequately protecting nursing home residents' rights or if they think the action taken by the Department is slow or inadequate.

The Long Term Care Ombudsman Program works to improve the quality of life and quality of care of Connecticut citizens residing in nursing homes, residential care homes and assisted living. Ombudsmen respond to, and investigate complaints brought forward by residents, family members and/or other individuals acting on their behalf. All Ombudsmen activities are performed on behalf of and at the direction of residents. All communication with residents, their family members or legal guardians, as applicable, is held in strict confidentiality. Ombudsmen offer information and consultation to

consumers and providers, monitor state and federal laws and regulations and make recommendations for improvement.

The Department of Social Services is the certificate of need authority for nursing homes and sets the rates that can be charged to Medicaid recipients. Nursing homes must provide written notification to residents who are enrolled in Medicaid or who become eligible for Medicaid benefits identifying items and services within the home that are covered under Medicaid. They must also list those items and services that are not covered and specify the charges for them. Notification must be given to individuals at the time of admission or when they become eligible for Medicaid.

Persons who apply for nursing home care are often put on a wait list for admission. Nursing homes generally admit applicants on a first-come, first-serve basis; but, they may refuse to admit Medicaid applicants if a certain percentage of their beds are already occupied by Medicaid recipients, or if the only room that is available is a private-pay room. There are many other exceptions to the first-come, first-serve requirement; therefore, persons who feel they are improperly denied admission should contact the Regional Long Term Care Ombudsman.

Nursing homes may require some residents to pay a deposit or advance payment. Such payments may not be charged to residents who pay for nursing home care with Medicare or Medicaid. Medicare recipients may only be required to pay a deposit for services and personal comfort items, which Medicare does not cover. Medicaid applicants who are not yet determined eligible for Medicaid and whose stay in the home is not covered by Medicare may only be asked for a deposit or advance payment of up to \$1,500. When eligibility for Medicaid is established, the \$1,500 is returned to the person.

Eligibility Requirements, Service Areas and Program Year:

Eligibility Requirements:

- Nursing homes maintain wait lists of applicants when beds are not available. Homes must take persons on a “first come, first serve basis” unless they have been granted a waiting list waiver from the Department of Social Services.
- Homes may have other admission requirements; interested persons should consult the home in which they have an interest.

Service Areas:

Statewide

Program Year:

July 1 – July 30 for issues related to state regulations.

Contact Information:

For additional information on nursing homes contact:

Department of Public Health
Division of Health Systems Regulation
410 Capitol Avenue
P.O. Box 430308
Hartford, CT 06106-0308
Telephone: 860-509-7400

To file complaints against a nursing home facility:

Complaint/Compliance Unit
Facility Licensing and Investigations
Connecticut Department of Public Health
410 Capitol Avenue, MS# 12 HSR
Hartford, CT 06134

To file complaints against nursing home administrators and other staff:

Practitioner Unit
Office of Practitioner Licensing and Investigations
Connecticut Department of Public Health
410 Capitol Avenue, MS 12 INV
Hartford, CT 06134

For issues regarding residents' rights contact the local Regional [Long Term Care Ombudsman Program](#). Refer to page I – 6. :

Connecticut State Ombudsman
Nancy Shaffer
Department of Social Services
25 Sigourney Street
Hartford, CT 06106
Telephone: 860-424-5200
Fax: 860-424-4808
Email: ltcop@ct.gov
Website: <http://www.ct.gov/ltcop>

Southern Region:
401 West Thames Street
Norwich, CT 06360
Telephone: 860-823-3366
Fax: 860-859-2667

414 Chapel Street, Suite 301
New Haven, CT 06511
Telephone: 203- 974-3030
Fax: 203-789-7850

Northern Region:
3580 Main Street
Hartford, CT 06120
Telephone: 860-723-1390
Fax: 860-566-7144

3580 Main Street
Hartford, CT 06120
Telephone: 860-723-1124
Fax: 860-566-4499

Western Region:
249 Thomaston Avenue
Waterbury, CT 06702
Telephone: 203-597-4181
Fax: 203-597-4048

1057 Broad Street
Bridgeport, CT 06604
Telephone: 203-551-5530
Fax: 203-579-6903

To file complaints against the Department of Public Health:

Center for Medicare and Medicaid Services (CMS)
John F. Kennedy Building, Room 2325
Boston, MA 02203
Telephone: 617-565-1188

Related Information:

[Medicaid, refer to page IX – 6.](#)

[Medicare, refer to page IX – 9.](#)

[Money Follows the Person, refer to page X – 16.](#)

[Money Follows the Person State Funded Transition Services, refer to page X – 18.](#)