



Next Steps in Your Care

Good news! Your health condition is stable or improving and you no longer need to see a doctor on a daily basis. Spending some time in a skilled nursing facility is often the next step in your recovery so you can obtain 24 hour nursing care and access to rehabilitation, including physical, occupational and speech therapy.



Founded in 1950, the California Association of Health Facilities is a non-profit, professional organization representing more than 800 skilled-nursing facilities. Each year, more than 140,000 caregivers provide short-term rehabilitation, long-term care, end-of-life assistance and habilitative nursing services for 370,000 people. CAHF is the largest provider of continuing education for long-term care providers in California.

For more information, visit www.cahf.org



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For patients moving from the hospital to skilled nursing





Finding the Right Facility

You may have less than 48 hours to locate a skilled nursing facility. **Go online and search for Nursing Home Compare** on Medicare.gov. Enter your zip code to find skilled nursing centers near your home. Look at the overall rating and other factors to help make your decision.

Have a family member call/visit the facility to discuss services and availability.

Notify the hospital discharge coordinator about your choice so they can initiate the admissions process.

Coverage and Cost

If you have Medicare Part A, you must have a qualifying inpatient three-day hospital stay to obtain coverage at the facility.

Depending on your skilled care needs, up to 20 days of a stay are covered 100 percent by Medicare Part A.

Stays of between 21 and 100 days are covered 80 percent by Medicare Part A. Co-insurance/private pay covers the remaining 20 percent. For enrollees in Medicare Advantage, coverage and time frames may vary.



Beginning Your Stay

It often takes time for the hospital to obtain a release from your physician and coordinate transportation to the facility, and you may arrive after business hours.

Upon admission, you will be thoroughly examined by a nurse who will document your vital signs, pain level and range of motion.

You or your representative will be asked to sign paperwork and a consent form for treatment.

Within the first week, members from the facility care team will meet with you to review your individual plan of care, which will include a discussion about the appropriate time of your discharge to a lower level of care or home.

Remember, most residents recovering from a serious illness experience a combination of days where there are challenges mixed with days of progress.

If you have concerns or unmet needs, direct your comments to the licensed nurses, director of nursing, or social services staff.



The Road to Independence

While all residents are unique, initially most need assistance in performing a number of daily living activities.

Because you are healing, expect to interact with certified nurse assistants (CNAs) more frequently as they help you with your personal needs. Licensed nurses will distribute medication and monitor your progress.

Many residents obtain physical, speech and occupational therapy assessments that will lead to a determination about the level of rehabilitation that is needed to reach a safe level of independence.

While a variety of factors will affect your length of stay, most short-term patients require two to four weeks of assistance before heading home.

During your stay, the dietary team will determine your eating preferences and nutritional needs and make any necessary modifications.

The business office will work with your insurance carrier to manage your stay.

The social services department will work with home health and your family to develop an appropriate discharge plan.



The Physician's Role

It is usually not necessary to see a doctor on a regular basis, however the nursing staff is in regular phone contact with a physician to review your care plan, medical condition and medication needs.

You will see a doctor once a month at a minimum, or on an as-needed basis.

If you relapse and return to the hospital:

Existing Medi-Cal patients: Medi-Cal will pay to reserve your bed for up to seven days, after which you may be discharged from the facility.

Medicare or other payor sources: You can pay privately for a bed hold if you wish to return or you may be discharged when you go to the hospital.



What to Bring

- Advance Directive
- List of current medications from home
- Easy to remove clothes marked with your name
- Shoes
- Socks and underwear
- Toiletries
- Insurance and ID cards
- Bathrobe
- Walker, cane, glasses, hearing aids, dentures, etc.
- Family pictures, crossword puzzles, iPad

What to leave behind

Leave behind any valuables including money and jewelry. All personal items are signed into the inventory list. You may request a locked drawer for storage of personal items.

For more information about skilled nursing services visit

www.ElderCareCa.org

To access a PDF copy of this information visit

www.cahf.org//Resources/NextStepsInCare



Additional Services

Many facilities provide personal, comprehensive specialized care

- Wound care
- Physical, occupational, speech, respiratory therapy
- Pain management
- IV therapy
- Hip and knee recovery
- Stroke and cardiac recuperation
- Enteral feeding
- Memory care
- Diabetic management
- Long term care
- Comfort care and hospice
- Dialysis

