

Your Guide to Choosing a Nursing Home

This **official government booklet** explains:

- What to consider when choosing a nursing home
- Questions to ask when visiting a nursing home
- How to find and compare nursing homes

[Medicare.gov](https://www.Medicare.gov)



Medicare

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Section 1:

Getting started

People go to nursing homes for different reasons, like if they're sick, hurt, had surgery and need to recover, or have chronic care needs or disabilities that require ongoing nursing care. If you need nursing home care, it's important to know how nursing homes work and where to find one that's right for you. Visit [Medicare.gov/care-compare](https://www.Medicare.gov/care-compare) to find and compare nursing homes, and get detailed information about quality of care.

What's nursing home care?

Nursing homes are facilities for people who usually need 24-hour care. Nursing homes can provide skilled nursing care, or rehabilitation care for people with short-term or outpatient care needs. They may also offer long-term and specialized care for people with Alzheimer's disease and other types of dementia.

Nursing home care includes:

- Short-term care for people who need rehabilitation after surgery, like physical therapy after a hip or knee replacement
- Short-term care for people who need skilled nursing to recover from an illness, like pneumonia
- Long-term care for people who need help with activities of daily living, like bathing, dressing, or eating

Does Medicare cover nursing home care?

Medicare may cover short-term nursing and other related care, like rehab care.

- **Medicare Part A (Hospital Insurance):** Covers short-term nursing home or rehab care (up to 100 days) in a Medicare-certified nursing home after hospitalization.
- **Medicare Part B (Medical Insurance):** Covers doctor visits and physical, speech, or occupational therapy, even if you get these services while in a nursing home.
- **Medicare Part D (drug coverage):** Covers prescription drugs you need while in a nursing home.

Visit [Medicare.gov/providers-services/original-medicare](https://www.medicare.gov/providers-services/original-medicare) for more information.

Medicare generally doesn't cover long-term nursing home stays.

What if I need long-term care?

Your state's Medicaid program may cover long-term nursing stays if you qualify, even though Medicare doesn't. It may also help cover:

- Home-and community-based services, like at-home care, home-delivered meals, home modifications, and adult day care.
- Services in an assisted living facility, depending on your needs and the state you live in.

Contact your state's Medicaid office if you have questions or need help. Visit [Medicaid.gov/about-us/where-can-people-get-help-medicaid-chip/index.html#statemenu](https://www.Medicaid.gov/about-us/where-can-people-get-help-medicaid-chip/index.html#statemenu) to find contact information for your state.

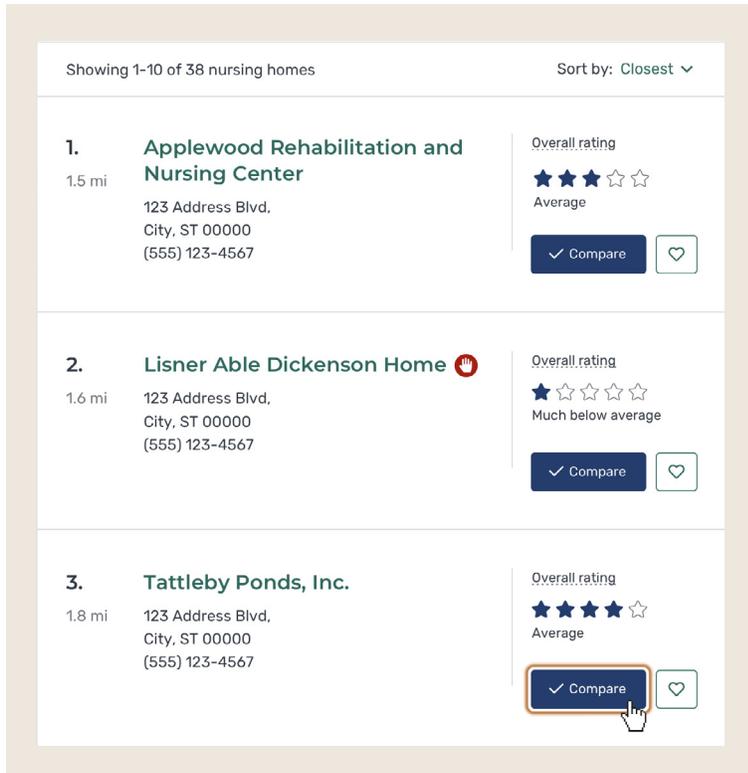
The Administration for Community Living (ACL) is a federal agency that can also help you find long-term care resources. ACL funds support programs in the community to maximize the independence, well-being, and health of older adults, people with disabilities, and their families and caregivers. Visit [ACL.gov](https://www.ACL.gov) to learn more. You can also use the Eldercare Locator at [Eldercare.acl.gov](https://www.Eldercare.acl.gov), or call 1-800-677-1116 to find help in your community.

Before you make any decisions about long term care, talk to someone you trust like a family member, your health care provider, or a social worker.

How can I find & compare nursing homes?

To find nursing homes, visit [Medicare.gov/care-compare](https://www.Medicare.gov/care-compare):

1. Select “Nursing homes including rehab services.”
2. Enter your location or the name of the nursing home you’re interested in and select “Search.”
3. Select the nursing home you want to view. Use the “Compare” feature to see up to 3 nursing homes side by side.



You can find information like:

- Star ratings of 1 to 5 stars
- Health and safety inspection reports
- Quality measures
- Staffing levels of each facility
- Nursing homes cited for abuse

All nursing homes on [Medicare.gov/care-compare](https://www.Medicare.gov/care-compare) are Medicare-certified. This means they offer services at a level of quality Medicare approves and have passed certain inspections.

To learn more:

- Go to page 7 for comparing nursing homes.
- Go to page 8 for star ratings.



Section 2:

Visiting a nursing home

Before choosing a nursing home, schedule a visit to help you find out if it's a good fit. If you can, talk to current residents and their family members during your visit. Tour the nursing home and observe if there are signs that staff are slow to respond to issues, pungent odors, residents calling out, or safety risks, like residents wandering unsupervised.

Questions you can ask during your nursing home visit

Your care

- How am I involved in developing my care plan? (For example, can I ask for certain equipment or supplies, or participate in setting my health goals?)
- How does the nursing home help arrange transportation for doctor visits or medical appointments if I need them?
- How many staff are assigned per resident during the day, overnight, and on weekends?

- What's the average number of residents each nurse aide is responsible for?
- What rehabilitative services does the nursing home provide?
- What happens in a medical emergency?
- How do I report concerns about my care or other issues in the nursing home? Will I be informed about how my concerns are resolved?
- Will the nursing home provide care for my specific needs? (Give examples of any specific concerns you have or types of care that are important to you.)

Dementia care

- Does the nursing home have a designated dementia care unit?
- How are staff trained to care for people with dementia?
- Is the dementia unit locked, with safe access to an outdoor area?
- What types of non-medication-based approaches does the nursing home offer for people with dementia or behavioral symptoms?
- How does the nursing home avoid the use of antipsychotics whenever possible? (Antipsychotics carry health risks for elderly individuals with dementia.)
- How does the nursing home prevent residents from wandering into areas where their safety could be at risk?

Fees & payment

- Does the nursing home accept Medicare and/or Medicaid?
- Can I get a list of services included in the private-pay rate, and what's charged separately?

Note: Nursing homes must comply with federal requirements to get Medicare or Medicaid payments. For more on this and your rights in a nursing home, download "Your Guide to Living in a Nursing Home" at [Medicare.gov/publications](https://www.medicare.gov/publications).

Activities & visitors

- How do I schedule outings other than medical appointments?
- What types of activities are available, like music or crafts? Can I get a copy of the nursing home's activity or social calendar?
- Will I get to help plan or choose the activities that are available?
- Is there a private space to visit with my guests, other than my room?
- Are there outdoor areas that I can use?
- Will the staff help me go outside?
- Will I have access to the internet, a computer, a personal phone, and a television?
- Are there amenities, like haircuts or styling, snacks, coffee, a gift shop, etc.?

Resident preferences

- Can I bring some of my own furniture and decorations?
- Is there a place where I can lock up my belongings?
- Will I have a choice of roommates?
- How does the nursing home respect my preferences for when I:
 - Want to leave the facility?
 - Get up?
 - Go to sleep?
 - Eat breakfast, lunch, and dinner?
 - Shower or bathe?
- How will you handle any concerns or complaints I might have?

Dining

- What dining options are available?
- What food choices do I have at every meal?
- How does the nursing home accommodate special dietary needs (like low-salt or no-sugar-added diets)?
- How does the staff help residents eat and drink at mealtimes, if needed?
- Is there a policy about bringing in outside food and drink?
- Are snacks available 24/7 (and what are they)?
- Is there a microwave and refrigerator available for use?



Section 3:

Comparing nursing homes on Medicare.gov

You can visit [Medicare.gov/care-compare](https://www.medicare.gov/care-compare) to search and compare nursing homes and other types of providers and facilities. For any nursing homes you're considering, you can review information about:

- Health and fire safety inspection results
- Staffing levels
- Specific elements of care, like if residents have gotten their flu shots
- Any penalties the federal government has issued against the nursing home

The information you get, in addition to visiting nursing homes, is a good tool for finding the nursing home that's right for you.

Nursing home overall ratings



Each nursing home is rated on a scale of one to 5 stars – one meaning quality much below average, 3 meaning average quality, and 5 meaning quality much above average. The overall rating is based on the nursing home’s combined ratings for health inspections, staffing, and quality measures.

Remember: While star ratings can give you important information and help you compare nursing homes, they aren’t a substitute for visiting a nursing home. Go to page 4 for details about scheduling a visit.

Health inspections

This rating reflects the nursing home’s performance on comprehensive yearly inspections, inspections focusing on infection control, and inspections based on complaints or concerns from residents or others. When you view a nursing home’s health inspections rating, you can select “View Inspection Results” for full reports about:

- **Three years of health inspections**

State inspectors conduct health and safety inspections of nursing homes for compliance with Medicare and Medicaid regulations. These usually happen every year. The inspectors issue a citation for any failure to meet federal standards.

- **Three years of complaint inspections**

A nursing home resident or others (like a family member) can file a complaint when they have a concern about their quality of care and didn’t get a satisfactory resolution from the nursing home. When they file a complaint, your State Survey Agency may visit a nursing home to investigate the quality of care you and other residents experience. The State Survey Agency will issue a citation for failure to meet federal standards.

- **Three years of infection control inspections**

Infection control inspections are an abbreviated type of inspection focused specifically on a nursing home’s infection control policies.

Staffing

This star rating is based on the nursing home’s reports of hours worked by different types of staff and staff turnover. When you view the Staffing rating, you can select “View Staffing Information” for details about:

- **The ratio of “nurse staff hours per resident per day,” for all types of nursing staff, including Registered Nurse (RN) staffing**

This describes the average amount of time staff are available to spend with each resident each day. (It doesn’t indicate the number of staff present at any given time, or reflect the amount of care given to any one resident.) A higher number is better, if you’re comparing staffing levels among different nursing homes.

- **Staff turnover, including nursing and administrative staff**

Low turnover means a nursing home generally retains its staff for longer periods of time. This is good, because the longer staff work in a nursing home, the more

familiar they become with the residents they care for and the nursing home’s operating procedures. They may better understand residents’ preferences and needs, and more readily identify and care for a resident’s condition. A lower number is better, if you’re comparing staff turnover among different nursing homes.

Quality measures

This star rating is based on information Medicare collects about the nursing home’s performance in specific areas of care, like if residents got their flu shots, are hospitalized, were injured by falling, or are getting antipsychotic medications. These are often called quality measures. The rating is calculated from 2 different types of quality measures: short- and long-stay resident quality measures. When you view this set of star ratings, select “View Quality Measures” to see the nursing home’s complete set of ratings, and compare them with other nursing homes you may be considering. These quality measures are based on the average level of a nursing home’s performance and don’t detail a single resident’s experience.

Alerts for special focus facilities

 If you see this symbol instead of a star rating, it means that the nursing home has a history of serious quality issues. These nursing homes aren’t rated, and are subject to more frequent inspections, penalties, and may lose the ability to get paid for providing care to people with Medicare or Medicaid. If that happens, residents with Medicare or Medicaid will be moved to a nursing home that’s certified to provide their care.

Alert for abuse

 If you see this symbol next to a nursing home’s name, it means that the nursing home has been cited for issues related to abuse. For more information about this, and what to do if you suspect abuse, visit [Medicare.gov/care-compare/resources/nursing-home/preventing-abuse](https://www.medicare.gov/care-compare/resources/nursing-home/preventing-abuse).

Other information on nursing homes

Legal business name	Ownership type
Wellstonn Nursing Center, Inc.	For profit – Corporation
Affiliated entity name	Affiliated entity ID
Pine Tree Healthcare Group	209
Open affiliated entity performance information	
Ownership Details	

To learn more about all the facilities owned by or affiliated with this facility’s owner (like a chain of nursing homes), you can select “Open affiliated entity performance information.” You can use this to help you choose a nursing home, by checking if the facility you’re considering is part of a chain with overall high (or low) quality ratings. You can also select “Ownership Details” to learn more about the facility, like the owner’s names.

Use [Medicare.gov/care-compare](https://www.medicare.gov/care-compare), in-person visits to the nursing homes you’re considering, conversations with nursing home residents and their visitors, and talking with your physician or a social worker to make your decision. For free, personalized help, visit theconsumervoice.org/get_help or contact the Office of the Long-Term Care Ombudsman in your state.

Accessible Communications

Medicare provides free auxiliary aids and services, including information in accessible formats like braille, large print, data or audio files, relay services and TTY communications. If you request information in an accessible format, you won't be disadvantaged by any additional time necessary to provide it. This means you'll get extra time to take any action if there's a delay in fulfilling your request.

To request Medicare or Marketplace information in an accessible format you can:

1. Call us:

For Medicare: 1-800-MEDICARE (1-800-633-4227)

TTY: 1-877-486-2048

For Marketplace: 1-800-318-2596

TTY: 1-855-889-4325

2. Email us: altformatrequest@cms.hhs.gov

3. Send us a fax: 1-844-530-3676

4. Send us a letter:

Centers for Medicare & Medicaid Services

Offices of Hearings and Inquiries (OHI)

7500 Security Boulevard, Mail Stop DO-01-20

Baltimore, MD 21244-1850

Attn: Customer Accessibility Resource Staff (CARS)

Your request should include your name, phone number, type of information you need (if known), and the mailing address where we should send the materials. We may contact you for additional information.

Note: If you're enrolled in a Medicare Advantage Plan or Medicare drug plan, contact your plan to request its information in an accessible format. For Medicaid, contact your State Medical Assistance (Medicaid) office.

Nondiscrimination Notice

The Centers for Medicare & Medicaid Services (CMS) doesn't exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, color, national origin, disability, sex, or age in admission to, participation in, or receipt of the services and benefits under any of its programs and activities, whether carried out by CMS directly or through a contractor or any other entity with which CMS arranges to carry out its programs and activities.

You can contact CMS in any of the ways included in this notice if you have any concerns about getting information in a format that you can use.

You may also file a complaint if you think you've been subjected to discrimination in a CMS program or activity, including experiencing issues with getting information in an accessible format from any Medicare Advantage Plan, Medicare drug plan, state or local Medicaid office, or Marketplace Qualified Health Plans. There are 3 ways to file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

1. Online:

[HHS.gov/civil-rights/filing-a-complaint/complaint-process/index.html](https://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html)

2. By phone:

Call 1-800-368-1019.

TTY users can call 1-800-537-7697.

3. In writing: Send information about your complaint to:

Office for Civil Rights

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
7500 Security Blvd.
Baltimore, MD 21244-1850

Official Business
Penalty for Private Use, \$300

Need a copy of this booklet in Spanish?

To get a free copy of this booklet in Spanish, visit [Medicare.gov](https://www.Medicare.gov) or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

Esta publicación está disponible en Español. Para obtener una copia gratis, visite es.Medicare.gov o llame al 1-800-MEDICARE.



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The information in this booklet describes the Medicare Program at the time this booklet was printed. Changes may occur after printing. Visit [Medicare.gov](https://www.Medicare.gov), or call 1-800-MEDICARE (1-800-633-4227) to get the most current information. TTY users can call 1-877-486-2048.

“Your Guide to Choosing a Nursing Home” isn’t a legal document. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings.

You have the right to get Medicare information in an accessible format, like large print, braille, or audio. You also have the right to file a complaint if you feel you’ve been discriminated against. Visit [Medicare.gov/about-us/accessibility-nondiscrimination-notice](https://www.Medicare.gov/about-us/accessibility-nondiscrimination-notice), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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