



Alternatives to Nursing Homes

People usually think of nursing homes when they need long-term care. However, other long-term care services and facilities are available that might be more appropriate. Many of these provide more independent living than traditional nursing homes. You might wish to explore these options. These are listed from the lowest intensity of care to the highest level.

The Department of Elder Affairs administers the Comprehensive Assessment and Review for Long-Term Care Services (CARES) program. It provides free assessments to determine medical eligibility for nursing home care and community-based alternatives. If you are unsure about which long-term care service is the most appropriate for your needs, contact your local CARES office. The Long-Term Care Ombudsman office can also assist you and provide information about long-term care services. The numbers are listed in the Important Telephone Numbers section.

Community Based Options

Alternative community housing arrangements include retirement communities, continuing care retirement communities (CCRCs), and senior-oriented apartment complexes. Community-based services include Meals-on-Wheels, congregate meal sites, homemaker services, and simple friendly visits. Many nursing homes and assisted living facilities (ALFs) provide respite care. Respite care is a short stay (normally no more than two weeks) that allows the home caregiver a break from caring for someone who needs constant supervision. Senior centers, universities, religious institutions, and many private and charitable entities provide program options that enable seniors and disabled individuals to remain physically and mentally active in the community.

Licensed Provider Settings	Medicaid Alternative Programs
<u>Adult Day Care Centers</u>	<u>Adult Cystic Fibrosis Waiver Program</u>
<u>Adult Family Care Homes</u>	<u>Adult Day Health Care Waiver Program</u>
<u>Assisted Living Facilities</u>	<u>Aged and Disabled Adult Waiver Program</u>
<u>Continuing Care Retirement Communities</u>	<u>Alzheimer's Disease Waiver Program</u>
<u>Home Health Agencies</u>	<u>Assisted Living for the Elderly Waiver Program</u>
<u>Homemaker and Companion Agencies</u>	<u>Channeling Waiver Program</u>
<u>Hospice</u>	<u>Frail/Elderly HMO</u>
<u>Nurse Registries</u>	<u>Nursing Home Diversion Waiver Program</u>
<u>Nursing Homes</u>	<u>Program of All-Inclusive Care for the Elderly (PACE)</u>
	<u>Project AIDS Care Waiver Program</u>
	<u>Traumatic Brain and Spinal Cord Injury Waiver Program</u>

Homemaker and Companion Agencies

Homemaker and companion agencies provide domestic workers to help elderly and disabled individuals with general tasks. Homemakers provide assistance with routine household activities, such as cooking and

cleaning. Companions provide assistance during trips and outings and may prepare and serve meals. By law, homemakers and companions may not provide hands-on personal care to a client, such as assistance in bathing or undergarment changing. They may not dispense medications.

Homemaker and companion agencies must be registered by the state of Florida and include their registration number in public advertisements. Some of the individual homemakers and companions are employees of agencies. Some are contracted agents. Individual homemakers and companions are required to be background screened. Complaints against the agencies may be investigated by the state of Florida, but the individuals are not licensed or inspected by the state.

Continuing-Care Retirement Communities (CCRCs)

Continuing Care Retirement Communities are also called Life-Care Communities. They offer different levels of care based on the needs of the individual or couple. The care level ranges from an independent living apartment or house to skilled nursing in an affiliated nursing home. CCRC residents are guaranteed care for the rest of their lives. The CCRC residents move from one setting to another based on their needs but continue to remain a part of their CCRC community. Many Continuing Care Retirement Communities have an entrance fee prior to admission as well as a monthly charge. AHCA licenses and inspects the nursing facilities in a CCRC. The Department of Insurance regulates the CCRC contracts.

Licensed Nurse Registries

Nurse registries act as employment agencies between an individual patient and nurses, nursing assistants, home health aides, companions and homemakers for services in the patient's home. Each individual health care worker is contracted with the registry. Nurse registries provide nursing care services, but they are not licensed to provide physical therapy or other therapy services or medical equipment services. Unlike home health agencies, licensed nurse registries are not required to carry liability insurance. As the name implies, all licensed nurse registries must be licensed by the state of Florida and must include the nurse registry license number in public advertisements.

Home Health Agencies

Home health agencies deliver health and medical services and medical supplies through visits to private homes, assisted living facilities (ALFs), and adult family care homes. Some of the services include nursing care, physical therapy, occupational therapy, respiratory therapy, speech therapy, home health aide services, and nutritional guidance. Medical supplies are restricted to drugs and biologicals prescribed by a physician. Along with services in the home, an agency can also provide staffing services in nursing homes and hospitals. Home health agencies are required to be licensed and inspected by the state of Florida.

Adult Day Care Centers

Adult day care provides a protective setting that is as noninstitutional as possible. Adult day care centers offer therapeutic programs of health services and social activities such as leisure activities, self-care training, rest, nutritional services, and respite care for a portion of a day. Some nursing homes provide adult day care services. Adult day care centers are required to be licensed and inspected by the state of Florida.

Adult Family-Care Homes

An adult family-care home provides a full-time, family-type living arrangement in a private home for up to five aged or disabled people who are not related to the owner. The owner lives in the same house as the residents and provides housing, meals, and personal services; however, services vary. Adult family care homes are required to be licensed and inspected by the state of Florida.

Assisted Living Facilities

An assisted living facility (ALF) provides housing, meals, and personal services. ALF services vary greatly and vary in the types of residents served. For example, some accept residents who need assistance in bathing, others do not. All ALFs are required to be licensed and inspected by the state of Florida. Some ALFs are specially licensed to provide extended congregate care (ECC). This allows the ALF to maintain residents who become more frail than would normally be permitted to remain in order for the resident to age in place. Some ALFs are specifically licensed to provide limited nursing services and/or limited mental health services.

Hospice

Hospice services emphasize comfort measures rather than aggressive curative treatment. Hospice provides a coordinated program of professional services, including pain control and counseling for patients who have a prognosis of six-months or less to live. It also provides counseling and support for the family members and friends of the terminally ill patient. Hospice services are predominately provided in the patient's home. However, the services are also available in ALFs and nursing homes. Hospice providers are required to be licensed and inspected by the state of Florida.

Nursing Homes

A nursing home provides nursing care, personal care, and custodial care to people who are ill or physically infirm. There are two main types of nursing homes in Florida - Skilled Nursing Facilities and Skilled Nursing Units.

Skilled Nursing Facilities

The Skilled Nursing Facility (SNF) is what most people think of as a nursing home. This is the type of facility that you will find listings for in this *Guide*. SNFs are freestanding, which means that they are not part of a hospital. Some SNFs are part of a continuing care retirement community (CCRC) and are governed through special contracts. All SNFs listed in this *Guide* are licensed and regularly inspected by AHCA.

Skilled Nursing Units

Skilled Nursing Units (SNUs) are based in hospitals. They typically provide only short term care and rehabilitation services. Some SNUs are located inside the hospital, and some are located in a separate building. The skilled nursing unit is licensed as part of the hospital. They are regularly inspected by AHCA.

Medicaid Alternatives

Enrollment in any Medicaid waiver program is subject to the availability and funding.

Adult Cystic Fibrosis Waiver Program (*Statewide Program*)

The Adult Cystic Fibrosis (ACF) waiver program is available statewide. This program is operated by the Department of Health. To be eligible for ACF waiver services, an individual must be 18 years of age or older, be diagnosed with cystic fibrosis, be determined to be at risk of hospitalization, and meet the Supplemental Security Income (SSI) related Medicaid or the Institutional Care Program (ICP) income and asset requirements. Waiver services include acupuncture, case management chore service, counseling (individual and family), dental services, durable medical equipment, exercise therapy, homemaker, massage therapy, nutritional services, personal care, personal emergency response service, physical therapy, prescribed drugs, respiratory therapy, respite care, skilled nursing, specialized medical equipment and supplies, transportation, and vitamins and nutritional supplements. Nursing home services are not included in this program.

Adult Day Health Care Waiver Program (*Palm Beach and Lee county residents only*)

The Adult Day Health Care waiver program is a home and community-based services program operating in Palm Beach and Lee counties. The program is designed to meet the health and supportive needs of adults with functional and/or cognitive impairments through an individual plan of care implemented at an adult day health care center. This program serves adults who are physically impaired or mentally confused and may require supervision, increased social opportunities and assistance with personal care or other daily living activities. To be eligible for the Adult Day Health Care Waiver Program, an individual must be 75 or older and live with a caregiver, be a resident of Lee or Palm Beach county, meet nursing home level of care as determined by CARES, not be a resident of an institution or other institutional setting, not be enrolled in a hospice, and not be enrolled in another Medicaid home and community-based waiver program. Services include intake and assessment; case management; and other direct care services such as transportation; medication management, medical direction, rehabilitation therapies including OT, PT, ST; social services/counseling, nutritionally balanced meals/snacks, recreation/therapeutic activities, personal care assistance, assistance with daily living activities, and health care monitoring. Nursing home services are not included in this program.

Aged and Disabled Adult Waiver Program (*Statewide Program*)

The Aged/Disabled Adult (A/DA) Waiver is a home and community-based services program that was implemented statewide on April 1, 1982. The Florida Department of Elder Affairs and the Department of Children and Families have operational responsibility for the A/DA Waiver. To be eligible for the Aged/Disabled Adult Waiver services, an individual must be 60 years old or older or be ages 18 to 59 and determined disabled according to Social Security standards; meet Supplemental Security Income (SSI), or Medicaid waiver assistance income and asset requirements; meet nursing facility level-of-care criteria as determined by CARES; and be enrolled in the waiver. Waiver services include adult companion, adult day health care, attendant care, case aide, case management, chore services, consumable medical supplies, counseling, environmental accessibility adaptation, escort, family training, financial risk reduction, health support, home-delivered meals, homemaker and personal care services, nutrition, personal emergency response systems, pest control, physical risk reduction, physical therapy, respite care, skilled nursing, specialized medical equipment and supplies, and speech therapy. Nursing home services are not included in this program.

Alzheimer's Disease Waiver Program (*Broward, Dade, Palm Beach, and Pinellas*)

county residents only

The Alzheimer's Disease waiver program is a home and community-based program intended to delay or prevent nursing home placement for persons with this disease. To be eligible for this program, an individual must be age 60 or older; reside in Broward, Dade, Palm Beach or Pinellas county; meet Supplemental Security Income (SSI), or Medicaid waiver assistance income and asset requirements; have a diagnosis of Alzheimer's Disease made or confirmed by a Memory Disorder Clinic, neurologist, or a physician with experience in neurology; meet the nursing home level of care criteria as determined by CARES; and live with a capable caregiver in a private home or apartment. Services under this waiver include case management, adult day health care, respite care, behavioral assessment and intervention, caregiver training, environmental modification, incontinence supplies, personal care, pharmacy review, wander alarm system and wanderer identification system. Nursing home services are not included in this program.

Assisted Living for the Elderly Waiver Program (Statewide Program for ALF residents)

The Assisted Living for the Elderly (ALE) waiver program is a home and community-based services program that was implemented statewide on February 1, 1995, for recipients who reside in qualified Assisted Living Facilities (ALFs). The Florida Department of Elder Affairs (DOEA) has operational responsibility for the ALE Waiver. To be eligible for ALE waiver services, an individual must be age 65 and older or be ages 60 to 64 and be determined disabled according to Social Security standards; meet nursing facility level-of-care criteria as determined by CARES; meet Supplemental Security Income (SSI), or Medicaid waiver assistance income and asset requirements; and meet one or more of the following: require assistance with four or more activities of daily living (ADLs); require assistance with three ADLs plus supervision or administration of medication; require total help with one or more ADLs; have a diagnosis of Alzheimer's disease or another type of dementia and require assistance with two or more ADLs; have a diagnosed degenerative or chronic medical condition requiring nursing services that cannot be provided in a standard ALF, but are available in an ALF licensed for limited nursing or extended congregate care; or be a Medicaid-eligible recipient who meets ALF criteria; be awaiting discharge from a nursing facility placement; and be unable to return to a private residence because of a need for supervision, personal care, periodic nursing services, or a combination of the three. The waiver includes the three services of case management, assisted living, and if needed, incontinence supplies. The components of assisted living include an attendant call system, attendant care, behavior management, chore services, companion services, homemaker, intermittent nursing, medication administration (within the ALF license), occupational therapy, personal care, physical therapy, specialized medical equipment and supplies, speech therapy, and therapeutic social and recreational services. Nursing home services are not included in this program.

Channeling Waiver Program (Dade and Broward county residents only)

The Channeling waiver program is a home and community-based services program that was implemented on July 1, 1985, and is operated through an annual contract with an organized health care delivery system in Dade and Broward Counties. To be eligible for Channeling waiver services, an individual must be age 65 or older; meet nursing facility level-of-care criteria as determined by CARES; meet the Supplemental Security Income (SSI) or Medicaid waiver assistance income and asset requirements; have two or more unmet long-term care service needs; and reside in Broward or Dade counties. The waiver program includes the following services of adult day health care, case management, chore services, companion services, counseling, environmental accessibility adaptations, family training, financial education and protection services, home health aide services, occupational therapy, personal care services, personal emergency response systems, physical therapy, respite care, skilled nursing, special home delivered meals, special drug and nutritional assessments, special medical supplies, and speech therapy. Nursing home services are not included in this program.

Frail/Elderly HMO (Dade and Broward county residents only)

The purpose of the frail/elderly portion of a Medicaid HMO is to provide, coordinate and manage services for the frail and elderly who need services to prevent or delay placement in a nursing home. A variety of mandatory and supportive services are available to members to achieve this goal. To be eligible for the frail/elderly program, beneficiaries must reside in Dade or Broward County, be assessed by CARES as having met nursing home level of care and be in need of a service(s) to live in their homes or in the homes of relatives or caregivers as an alternative to being placed in a nursing home facility, be 21 years of age or older, and an Supplemental Security Income (SSI) beneficiary. Services include case management, adult day health care, adaptive equipment, medical supplies, homemaker/personal care, home health services, caregiver training, financial education, emergency alert response systems, identity bracelets, pharmaceutical management, respite, and nursing home services.

Nursing Home Diversion Waiver Program (Select Central and Southern counties)

The Medicaid Nursing Home Diversion (NHD) waiver program provides home and community-based services to functionally impaired elderly that are at risk of nursing home placement. The Department of Elder Affairs (DOEA) has operational responsibility for the NHD Waiver. Individuals must meet the following criteria: be age 65 and over; dually eligible for Medicaid and Medicare; be determined by the CARES (Comprehensive Assessment and Review for long-term care services) unit at the Department of Elder Affairs to meet a nursing home level of care and meet one or more established clinical criteria. Services are currently available in Brevard, Broward, Charlotte, Collier, Dade, Duval, Hernando, Hillsborough, Indian River, Lake, Lee, Manatee, Martin, Okeechobee, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Johns, St. Lucie, and Volusia Counties. Services include community mental health services, dental, hearing and visual services, independent laboratory and x-ray, inpatient hospital and outpatient hospital/emergency, physician services, prescribed drugs, transportation services, adult companion, adult day health, assisted living, case management, chore, consumable medical supplies, environmental accessibility and adaptation, escort, family training, financial assessment and risk reduction, home delivered meals, homemaker, nutritional assessment and risk reduction, personal care, personal emergency response systems, respite care, occupational, physical and speech therapies, home health and nursing facility services.

Program of All-Inclusive Care for the Elderly (PACE) (*Dade county residents only*)

Florida PACE Centers Inc. in Miami-Dade county is currently the only approved PACE provider in Florida. PACE provides a comprehensive range of medical and home and community-based services for individuals who would otherwise qualify for placement in a nursing home. Individuals must meet the following criteria of being age 55 and over, be determined by the CARES (Comprehensive Assessment and Review for long-term care services) unit at the Department of Elder Affairs to meet nursing home level of care and meet one or more established clinical criteria, live in the PACE service area, and be able to live safely in the community without being a danger to themselves or others. PACE organizations provide primary care, social, restorative and supportive services for Medicaid and Medicare eligible individuals age 55 and over who live in a PACE service area. All Medicare and Medicaid services must be available, including personal care, acute care services, recreational therapy, nutritional counseling, meals and transportation. The services also include adult day health care, home care, prescription drugs, inpatient and nursing home care.

Project AIDS Care Waiver Program (*Statewide Program*)

The Project AIDS Care (PAC) waiver program is administered by the Agency for Health Care Administration. The waiver was implemented statewide in 1989. In order to participate in the Project AIDS Care waiver, the individual must meet the following criteria: have a diagnosis of AIDS documented by a physician; have the presence of AIDS related opportunistic infections; be determined eligible for Supplemental Security Income (SSI) or Institutional Care Program (ICP); be determined by CARES to be at risk of hospitalization or institutionalization in a skilled nursing facility; be determined disabled according to Social Security Administration standards; not be enrolled in a Medicaid HMO except one contracted as part of the 1915(b) HIV/AIDS Specialty Waiver; be capable of remaining safely in the home and community; need and receive PAC waiver case management services; and have completed, signed, and dated a PAC waiver enrollment application. PAC waiver services include case management, chore services, day health care, education and support, environmental accessibility adaptations, home delivered meals, homemaker, personal care, restorative massage, skilled nursing, RN and LPN, specialized medical equipment and supplies, specialized personal care for foster care children, and therapeutic management of substance abuse. Nursing home services are not included in this program.

Traumatic Brain and Spinal Cord Injury Waiver Program (*Statewide Program*)

The Traumatic Brain and Spinal Cord Injury (TBI/SCI) waiver program is available statewide and is operated by the Department of Health. To be eligible for TBI/SCI waiver services, an individual must be considered medically stable meaning the absence of any active, life threatening condition (e.g., sepsis, respiratory, or other condition requiring systematic therapeutic measures); IV drip to control or support blood pressure; or arterial monitoring of intracranial pressure. An individual must meet level of care criteria for nursing facilities; be age 18 or older; be referred to the state's Brain and Spinal Cord Injury Program Central Registry in accordance with 381.75, F.S.; and meet the Supplemental Security Income-related or the Institutional Care Program income and asset requirement for Medicaid eligibility, and have one of the following conditions: *Traumatic Brain Injury* - defined as an insult to the skull, brain or its covering from external trauma, which produces an altered state of consciousness or anatomic, motor, sensory, or cognitive/behavioral deficits; *Spinal Cord Injury* - defined as a traumatic injury to the spinal cord with evidence of motor deficit, sensory deficit, and/or bowel and bladder dysfunction. The lesions must have significant involvement with two of the above three. Waiver services include adaptive health and wellness, assistive technologies, attendant care, behavioral programming, case management, companion services, community support coordination, consumable medical supplies, environmental accessibility adaptations, life skills training, personal adjustment counseling, personal care, and rehabilitation engineering evaluation. Nursing home services are not included in this program.

The Licensure Inspection

Florida SNFs are licensed annually and inspected by the Agency for Health Care Administration (AHCA) once every 9 to 15 months. SNUs are similarly inspected, but are licensed as part of the hospital they are in. When necessary, AHCA also investigates complaints against nursing homes. Inspections are unannounced and include a facility tour; interviews with residents, families, staff, visitors and volunteers; and a review of sample medical records, policies, and procedures. Different facilities are inspected on different days throughout the year.

If noncompliance is found, the facility has 10 days to submit a written plan of correction. AHCA conducts follow-up visits to monitor the facility's progress and to ensure that all deficiencies are corrected. Severe or uncorrected deficiencies can result in fines, a halt to new admissions (known as a moratorium), or closure of the facility.

By law, nursing homes are required to post their most recent inspection report. Copies of this report are available from AHCA or the Long-Term Care Ombudsman Council.

Determining if a Nursing Home is the Most Appropriate Setting

You should discuss your needs and options for long-term care with many trusted people including your primary care physician. A doctor must authorize a nursing home admission and sign off on the care plan. Take advantage of a free CARES assessment or call the Long-Term Care Ombudsman Office, if you think that another type of long-term service might better suit your needs. See the Important Telephone Numbers section.

[Top of Page](#)