



RESIDENT HANDBOOK

We welcome you to Glendive Medical Center (GMC). Our Long-Term Care facilities include Extended Care and Eastern Montana Veterans Home (EMVH). The following information is to acquaint you with the policies and procedures that govern our Long-Term Care facilities. We ask that you review the following information and encourage you to ask any questions or review any concerns you may have about our policies and procedures.

Admission Policy:

Eastern Montana Veterans Home has an open admission policy regardless of race, color, creed, age, gender, national origin, or handicap. This admission policy is limited only by our ability to properly serve the resident. To be eligible for residence at EMVH, a person must be an honorably discharged veteran, or the spouse/surviving spouse of an honorably discharged veteran who served in the armed forces of the United States.

Accommodations:

Accommodations are in semi-private rooms and furnished with a bed, bedside table with drawers, closet, and drawers for toiletries. Emergency call lights operate from each bed and bathroom. Every effort will be made to assign residents to a room of their choice; however, this is not always possible. It may become necessary to move a resident because of problems related to compatibility, level of care, or interruption with the daily routine. In such an instance the resident and/or responsible party will be notified of the move.

Levels of Care:

Upon admission, residents are classified at one of two different levels of care:

1. Intermediate:

- a. Resident needs assistance in some areas of daily living, for example, the resident may require meal assistance, assistance in bathing, dressing and/or toileting, or may be incontinent, and
- b. The mental condition may limit independent activity or require close supervision. Intermediate care may be covered by private insurance, private pay, or Medicaid.

2. Skilled: If the certified stay is accepted and approved by Medicare, Medicare will be responsible for the first 20 days of care. The resident will be responsible for partial payment for 21 to 100 days. If the resident is a veteran, the VA will pay a portion of this amount. If the resident has supplemental insurance, it may assist with payment.

To qualify for skilled level of care a resident must meet the following:

- a. Must have a 3-day qualifying hospital stay;
- b. Must fall within the Medical Criteria established by the Montana Pacific Quality Health Foundation;
- c. A doctor certifies the need of skilled nursing or skilled rehabilitation services on a daily basis. Skilled nursing care services are provided only by licensed nursing personnel. Rehabilitation services are such things as physical therapy, occupational therapy, or speech therapy.

Skilled Care may be covered by Medicare, a Medicare supplement, private insurance, private pay, or Medicaid. Glendive Medical Center will file all Medicare and supplemental insurance claims for skilled level of care. Copies of insurance cards must be provided at admission to aid in the filing process. If Medicare and/or the supplemental insurance has paid, or will not pay, the resident is responsible directly to the facility for any unpaid balance upon receipt of the monthly statement.

Becoming Intermediate from Skilled Level of Care:

When a resident no longer qualifies for a skilled level of care, the facility will issue a two day Non-Coverage notice indicating the discharge date from skilled coverage and an explanation of the appeal process. Please note that physical and occupational therapy, and nursing must abide by Medicare guidelines and appealing this decision does not guarantee the resident will resume with the skilled level of care.

Personal Furniture:

We encourage residents to decorate their room as they may wish to create a more homelike environment. However, due to the restricted amount of space in each resident's room, only a limited amount of personal furniture is allowed. Rugs are not allowed as a safety precaution. Other items not allowed in the resident's room include refrigerators, microwaves, hot plates, Christmas lights and candles. Residents are allowed to bring in a recliner chair for their comfort. Our staff recommend that the recliner has a cleanable surface so if there is an accident, it can be cleaned. The facility will make every effort to protect personal furniture, however the family is responsible for the maintenance and/or replacement/removal of damaged items.

Personal Items:

Items such as electric razors, make-up and special hair items are recommended to encourage personal grooming and neat appearance. Such personal items are the responsibility of the resident or family to replace. Other items such as skin lotion, toothpaste, denture cleanser, brushes, facial tissue and combs are provided.

Cable TV:

Televisions are provided for each resident and there is no charge for cable. If you wish to have an extended cable lineup, the resident or family will be responsible for contacting a local provider to set this up. If the volume on a resident's television set is causing a disturbance for other residents, the volume must be lowered. The facility recommends that headphones are purchased for the television.

Telephones:

Residents may have their own personal telephones. Arrangements for this service must be made with the phone company by the family or resident. Residents may place and receive calls at the phone located at designated locations within the facility. Staff is available to assist you with long distance collect calls.

Visiting Hours:

Visiting hours are recommended from 10:00 a.m. until 8:00 p.m. for the comfort and safety of the residents and to enable the nursing staff to carry out their nursing care. Residents have the right to deny visitation when applicable. Visitors are encouraged to check in at the nurses' station when coming to visit as some residents may have visiting restrictions. Children are encouraged to visit residents provided they are in good health and are accompanied by an adult visitor. A responsible person must sign the resident out and accept responsibility for the resident while out of the facility.

Smoking:

Residents will be allowed to smoke so long as they are determined to be safe to do so using the screening process outlined in the facility policy. Safety will be insured by requiring smoking to occur only in designated areas, at specified times and under direct supervision as outlined. All smoking materials will be kept in a locked location. No smoking materials will be permitted in resident rooms. The resident will be referred to the medical provider for assessment and counseling if there is reason to believe that he/she has current health concerns that could be exacerbated by smoking and that this may lead to a health crisis. The medical provider may provide a recommendation regarding the resident's personal health risk related to smoking and this may lead to a determination that the resident cannot be safely cared for in the facility if they choose to smoke. If this policy is not adhered to by a resident, smoking privileges may be revoked. Continued failure to comply may lead to discharge due to endangerment of residents, staff and property.

Equipment Rental or Purchase:

Broda chairs, wheelchairs and walkers will, in most cases, be provided by the facility. Each resident may purchase their own specialized equipment provided the facilities approval. Residents at EMVH are allowed to use electric scooters or wheelchairs however prior assessment for safety must be conducted.

Medical Care:

Our Long Term Care facilities meet the needs of residents who require placement. Care will be provided in accordance with the policies and procedures and State and Federal regulations. Licensed nurses are on duty at all times. Nurse's aides are available to assist residents with their personal care needs. All resident rooms are equipped with

signal lights to summon staff when assistance is needed. Residents will be seen by a doctor or physician assistant at least every thirty days for the first ninety days after admission, and at least once every sixty days thereafter.

Eye, Teeth and Ear Care:

Glendive has local providers who conduct eye, dental, and hearing exams. Annual dental examinations are a requirement. These exams will be completed by our advising dentist and/or his staff. There is no charge for this exam. Recommended follow-up care will be referred to your personal dentist. Dentures are required to have the resident's name on them. Ask your private dentist for the cost to mark the dentures.

Eyeglasses will be marked with resident's names. We recommend yearly appointments to maintain eye health. The purchase of hearing aid batteries is the responsibility of the resident. Glendive Medical Center is not responsible for the loss or breakage of eyeglasses, dentures or bridges, or hearing aid unless directly due to the facility's negligence.

Transportation:

In the event a procedure cannot be done locally, the facility will encourage the resident's family to make the appropriate arrangements, including transportation, with the doctor's office. If no family member is available, EMVH staff will arrange their schedule to assist these residents. There is a charge for out-of-town appointments. Please visit with Social Services for current transportation charges.

Safety:

Our staff is committed to providing a safe environment for all residents. Due to some residents' cognitive loss, **we ask all residents refrain from having scissors and pocketknives in their rooms.** Staff is willing to assist and residents may request scissors for a project.

Please notify staff if you have any electrical items such as lamps, TV's, razors, radios, etc. A safety check must be performed on the item and a safety sticker applied by our staff before the item can be used.

Heating pads, heating blankets or other electrical heating units are **not** to be used in the facility due to State and Federal Safety Regulations.

Personal Possessions:

Our Long Term Care facilities will hold residents personal possessions for 30 days after discharge or death. If no arrangements are made for retrieval, the possessions will be donated to charity.

SERVICES PROVIDED

Activities:

Trained personnel provide a unique activity program. These activities meet a wide variety of physical, social, cognitive and spiritual needs of the residents. The family will receive a monthly newsletter with a calendar of our events. Family members are encouraged to participate in activities with their loved ones. Examples of some activities are arts, crafts, hobbies, games, cards, cooking, movies, bingo, sing-alongs, outside entertainment, van outings, re-motivation, reality orientation, special seasonal

programs and entertainment. The activity staff makes a special effort to make meaningful contact on a daily basis with residents even if they cannot directly participate.

Physical Therapy and Occupational Therapy:

Physical and occupational therapy will conduct an evaluation for all new admissions except in special circumstances. In addition, the provider may order therapy at other times. A registered physical and/or occupational therapist directs the individual therapy programs. In certain cases, Medicare and/or supplemental insurance may pay for these skilled services otherwise the resident is responsible for payment.

A daily restorative services program is offered by rehabilitation aides who work under the direction of the therapy and nursing departments.

Pharmacy/Prescription Drug Plan Coverage:

A unit dose system of drug distribution is utilized at the facilities. All medications must be packaged to conform to this system. We observe all State and Federal regulations concerning medications and drug delivery systems. If you are receiving skilled services, pharmaceuticals are provided by Allcare Pharmacy through Billings Clinic and covered by Medicare.

Allcare Pharmacy is contracted with some of the many prescription drug plans available. In the event that we are not contracted with your plan, we can assist you in choosing a contracted plan. You will be responsible for any pharmacy charges.

No medications of any kind (including over-the-counter) are allowed in resident rooms unless specifically ordered by a health care provider and the resident is assessed to safely self-administer medication.

Dietary:

A registered dietitian is on staff and available for dietary counseling. All diets are arranged with the dietitian in accordance with the health care provider's diet order. Residents are encouraged to use the dining room for all meals and visitors are able to dine with the residents. There is a charge for visitor meals. Please ask Social Services for plate prices.

Social Services:

Social Services are available to all residents and family members providing assistance with financial, emotional, and personal needs. Social services can also provide referral information to other community agencies.

Spiritual Needs:

Weekly church activities are provided by local ministers or designee and are available for those who wish to attend. The minister of your choice is always welcome to visit you at your request.

Laundry Services:

The facility is responsible for labeling all person clothing items. Family may choose to provide laundry services otherwise the facility will launder clothing items. Soiled items will be sent to the facilities laundry service to promptly clean the item(s). To prevent the

loss of items, please give the facility all clothing items to be marked before they are used. We discourage having any clothing on the premises that is not central laundry washable and permanent press, but we do realize the necessity in some cases. Personal clothing processed in some other manner must conform to the standards of regulatory agencies and/or the sanitary standards. For further questions or concerns please contact the supervisor of laundry at 345-2605.

The facility will not accept responsibility for the following:

- ❖ Dry cleaning
- ❖ Hand washing
- ❖ Clothing not color-fast, bonded knits, etc.
- ❖ Woolens
- ❖ Valuable items such as fur coats
- ❖ Clothing in need of pressing

Hair Care:

Beautician and barber shop services are available to residents. Please speak with Activities to discuss cost.

Miscellaneous:

Valuables:

Residents are encouraged not to keep monetary or sentimental valuables (watches, jewelry, heirlooms etc.) and more than \$10 cash in their rooms.

At your request, money can be deposited in an individual resident trust account. Money deposited in the trust account is available to you during business office hours, 8:00 a.m. to 5:00 p.m., Monday through Friday. A lockbox is available for valuable items upon request. Our facility will make reasonable efforts to ensure the safety of the residents' personal possessions. EMVH cannot guarantee the safety of all personal items and the facility is not responsible for loss or damage of the residents' personal property unless directly due to the facility's negligence or as required by law. We recommend substitution of items of lesser value for watches, rings, jewelry of great sentimental or monetary value.

Resident Care Plans:

A written resident care plan is developed on admission and is coordinated by nursing in cooperation with the physician, registered dietitian, activities and social services staff. The plan of care is a working tool which provides a profile of the needs of each resident. The plan identifies each department's role in meeting these needs and supportive measures each department will use to accomplish the overall plan of care. The plan of care is reviewed quarterly and is updated as needed. Residents and families are encouraged to participate in the development of this plan. Families will receive a letter of invitation informing them of the date and time to attend. Please confirm your appointment by calling the phone number on the invitation.

Resident Council:

We encourage all residents to participate in resident council. Resident Council is to provide residents a forum in which they feel free to discuss and share problems, grievances, etc. The council may request meetings with staff, conduct resident surveys, write letters to the administrator or seek to identify and work out problems related to

the facility. Your opinion is important! Use this council to have your voice heard.

BED HOLD POLICY

A. Hospitalization/Medical Services outside GMC Extended Care

A bed will be held in the long-term care facility for residents in the case of hospitalization. Residents will continue to be charged the room rate if they choose to hold a resident's bed during their hospitalization. Please request further information on our bed hold policy.

B. Therapeutic Home Visits for Medicaid Residents

A bed will be held for residents in the case of a therapeutic home visit for 24 days per resident in each rate year (July 1 - June 30). If the resident desires days in excess of 24, other financial arrangements must be made with the facility. Therapeutic home visits may be used for trial placement in the home and with community service. Requirements for therapeutic home visits:

The residents' Plan of Care provides for therapeutic home visits.

1. The resident may be absent from the facility for no more than 72 consecutive hours per absence unless a longer absence is deemed medically appropriate. The Department of Public Health & Human, Services Senior & Long Term Care Division must authorize the longer absence in advance for Medicaid residents.
2. A request for a therapeutic home visit bed hold must be submitted to the Department of Public Health and Human Services Senior and Long Term Care Division on the appropriate form provided by the Department within 90 days of the first day a resident leaves the facility for a therapeutic y home visit.

A resident whose therapeutic home visits exceed the bed-hold period under the State plan is re-admitted to Long-Term Care immediately upon the first availability of a bed in a semi-private room if the resident:

1. Requires the services provided by the facility
2. Is eligible for Medicaid nursing facility services.

TRANSFER AND DISCHARGE OUTSIDE GLENDIVE MEDICAL CENTER

Discharge Planning:

The discharge potential of each resident is evaluated by the interdisciplinary team. If discharge is anticipated, the interdisciplinary team members will assist the resident and family in making appropriate arrangements for discharge.

Voluntary Discharge:

Residents may not be transferred or discharged from EMVH unless is:

1. it is necessary for his/her welfare and his/her welfare cannot be met in the facility.
2. the resident no longer needs the services provided by the facility.

3. the health or safety of individuals in the facility is endangered.
4. failure, after reasonable and appropriate notice, to pay for (or to have paid under Medicare and Medicaid) his/her stay at the facility.
5. the facility ceases to operate.

Involuntary Discharge:

Before a transfer or discharge is made, EMVH will notify the resident. A family member or legal representative will also be notified in writing of the transfer or discharge and the reasons for it if contact information is provided. The written notice will include:

1. The reason for transfer or discharge;
2. The effective date of transfer or discharge;
3. The location to which the resident is transferred or discharged;
4. A statement that the resident has the right to appeal the action to the Office of Fair Hearings;
5. The name, address, and telephone number of the State Long Term Care Ombudsman;
6. For residents with developmental disabilities the mailing address and telephone number of the agency responsible for protection and advocacy of developmentally disabled individuals;
7. For residents who are mentally ill, the mailing address and telephone number of the agency responsible for the protection and advocacy of mentally ill individuals;
8. EMVH will provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility.

If the transfer or discharge is involuntary, the resident has the right to 30 days advance notice to ensure an orderly transition, except in cases of emergency, for medical reasons, to protect the health or safety of individuals in the facility, or if he/she has not resided in the facility for 30 days. Eastern Montana Veterans Home will inform the resident of his/her appeal rights relating to transfer or discharge decisions.

RESIDENT FUND MANAGEMENT POLICY

1. The resident has the right to manage his/her financial affairs and the long-term care facility does not require residents to deposit their personal funds with the facility.
2. Upon written authorization of a resident, the facility will hold, safeguard, manage and account for the personal funds of the resident deposited with the facility.
3. Deposit of Funds.
 - a. Funds in excess of \$50 - Funds will be deposited in an interest-bearing account that is separate from any of the facility's operating accounts and will credit all interest earned on the resident's funds to that account. There is a trust account in the bank with a separate accounting for each resident's share.
 - b. Funds less than \$50 - Funds will be kept in an interest-bearing account. These funds will be kept in the Business Office. The resident will have access to such funds upon request.
4. Accounting and records - A full, complete and separate accounting will be kept of each resident's personal funds entrusted to the facility on the resident's behalf.

- a. There will be no co-mingling of resident funds with facility funds or with the fund of any person other than another resident.
 - b. The individual financial record will be provided through quarterly statements, and also upon receipt of a request of the resident or his/her legal representative.
5. Notice of certain balances – the Glendive Medical Center Business Office will notify each resident that receives Medicaid benefits:
- a. When the amount in the resident's account reaches \$200 less than the SSI resource limit for one person and
 - b. If the amount in the account in addition to the value of the resident's other non-exempt resources reaches the SSI resource limit for one person, the resident may lose eligibility for Medicaid or SSI.
6. The facility may not impose a charge against the personal funds of a resident for any item or service for which payment is made under Medicaid or Medicare except for applicable deductible and coinsurance amounts.
7. Conveyance upon death:
 The facility may satisfy a debt owed by the deceased resident to the facility from the deceased resident's personal funds that are held by the nursing facility and would have been payable to the facility from those funds. This will not include any amount for which payment is to be made under Medicare or Medicaid except for applicable deductible and coinsurance amounts.
 If the resident has a surviving spouse, minor child or a disabled adult child and received Medicaid benefits, or if the resident had not received Medicaid benefits at any time during their stay at this facility, the funds will be paid to the resident's estate within 30 days following the resident's death. In those cases, the funds will be subject to the probate code.
 Any remaining funds in the deceased resident's personal fund after satisfying 7a and 7b, will be refunded by this facility within 30 days following the resident's death to the Third Party Liability Unit, Department of Public Health and Human Services, P.O. Box 202953, Helena, MT 59620-2953 if that resident had received Medicaid benefits at any time during their stay at this facility.

RESIDENT AND FAMILY/GUARDIAN RESPONSIBILITIES

It is the responsibility of each resident admitted to this facility to:

1. Provide, to the best of his/her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his/her health.
2. Report unexpected changes in his/her condition to the responsible health care provider or nursing staff.
3. Make it known whether he/she clearly comprehends a contemplated course of action and knows what is expected of him/her.
4. Participate in the Plan of Care recommended by the health care providers primarily responsible for his/her care. This includes following instructions of nurse and health professionals as they carry out the coordinated Plan of Care and implement the responsible health care provider's orders, and as they enforce the applicable facility rules and regulations.

5. Accept responsibility for his/her actions if he/she refuses treatment or does not follow the health care provider's instructions.
6. Assure that the financial obligations of his/her health care are fulfilled as promptly as possible.
7. Control his/her own behavior and be considerate of other resident's rights (example: noise, smoking)
8. Be respectful of the property, of other persons and of the facility.
9. Give their pharmacy a 48-hour notice if he/she plans to be out of the facility for more than 12 hours. If he/she plans to be out of the facility less than 12 hours, he/she needs to give the Pharmacy a 2-hour notice.

RESIDENT GRIEVANCE PROCEDURE

If you have a concern or grievance that you feel needs to be considered, we ask that you follow the guidelines listed below. EMVH believes good care is your right and is committed to resolving grievances in an equitable manner.

1. Please make your grievance as specific as possible. If you wish, you may make your concern a written one. You and/or your family may report concerns, incidents or grievances without the fear of retribution.
2. The grievance should be presented to the charge nurse on duty. If the matter cannot be satisfactorily resolved with the charge nurse, the next step would be to present the complaint to the Director of Nurses or Social Services staff.
3. If you are not completely satisfied at this point you may meet with the Eastern Montana Veterans Home Administrator to discuss the matter and seek a fair solution.
4. You may also contact the ombudsman for the facility. An Ombudsman works on behalf of residents in long term care facilities and Assisted Living sites. The ombudsman can be reached at 406-939-2229.

Explanation of Daily Rates

(Rates effective 7/1/2022)

Veterans Cost

Full Cost: \$300.00 per day

VA Contribution: \$121.00 per day

Total: \$179.00 daily

Daily rate x 30 days=\$5,370.00

Daily rate x 31 days=\$5,549.00

Non-Veteran Cost

Full Cost: \$300.00 per day

VA Contribution: \$0.00

Total: \$300.00 daily

Daily rate x 30 days=\$9,000

Daily rate x 31 days=\$9,300

*Charges for medications, physician visits and therapy services are not included in the daily rate.

The VA will cover all room and board costs for Veterans that are service-connected at 70%-100%.

Veterans under 70% will be either private pay or will need to obtain Long-Term Care Medicaid insurance coverage to cover all costs for nursing home stay.

Non-Veterans will be either private pay or will need to obtain Long-Term Care Medicaid insurance coverage to cover all costs for nursing home stay.

*Note: Daily charges are subject to change. All daily charges must be requested and approved by the State of Montana. If you qualify for Skilled Care, insurance will be billed until Skilled Nursing is discontinued. At that time, an invoice will be sent for the remaining days in the month. Payment is due upon receipt. The last week of the month, an invoice will be sent for the next month's daily room charges. Payment is due by the 1st of the month.

VETERANS BENEFITS

For assistance in obtaining potential VA benefits for a veteran, spouse or remaining spouse of a veteran, please contact the Veterans Services Officer at 406-232-1203.

Revised 7/2022

Phone Listing

Eastern Montana Veterans Home:

Charge Nurse and Residents: 377-8855
Director of Nursing: 377-8116
Assistant Director of Nursing: 377-8139
Resident Care Coordinator: 377-8134
Social Services: 377-8166/377-8167
Activity Department: 377-8160
Business Office: 345-3307
Administrator: 377-8115

Community Numbers

Voice Formal Complaints or Concerns:

****For minor complaints or concerns please contact a staff member above from the facility.***

Vice President of Patient Care Services
Jill Domek: 406-345-3348

Ombudsman-Resident and Family Advocate
Irina Pulse - 406-939-2229

Montana Department of Public Health and Human Services: 406-444-2099
or www.dphhs.mt.gov/qad

U.S. Department of Health and Human Services: 1-800-633-4227

Phone Companies for Dawson County:

Mid-rivers Telephone Company-406-377-3336

CenturyLink Telephone Company-877-744-4416

