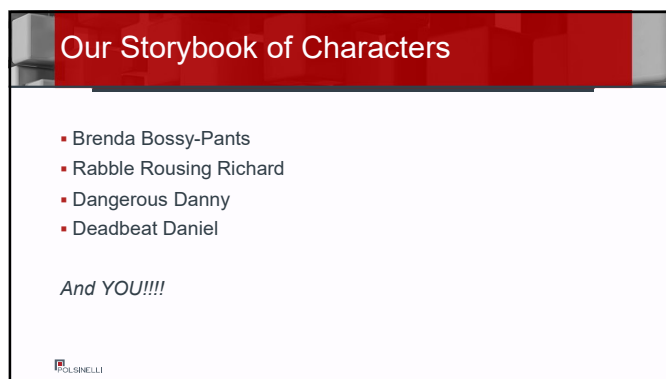
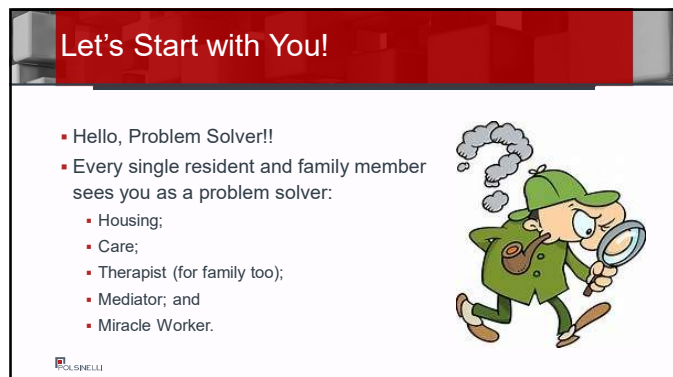




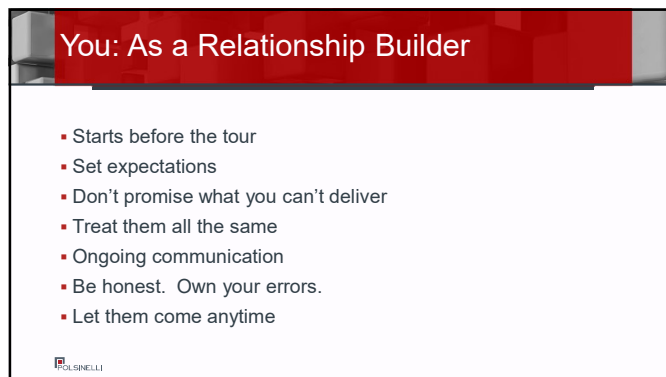
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You: On Move-In Day

- No paperwork
- Lots of introductions
 - Show them around, especially common space near their apartment
 - Perhaps have an "ambassador" resident come say hello
- Perhaps a thoughtful token
 - Favorite color expressed in flowers
 - Welcome note signed by all the staff
 - Provide a meal to the apartment for the family

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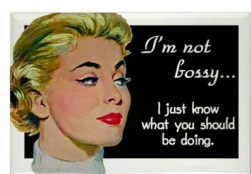
You: An Ongoing Relationship

- Call with good news on occasion
- Hand-written notes are great
- Newsletter, internet
- Your front desk person is critical
 - Scripting on how to handle situations
 - Train to not give too much information
- Dementia specific tactics

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Meet Brenda Bossy-Pants



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Brenda Bossy-Pants' Greatest Hits

- *"Don't listen to my sister. Listen to me!"*
- *"Don't listen to my mother. Listen to me!"*
- *"I don't care how you do that here. This is how you should do it."*
- *"You people are so incompetent."*
- *"I'm the POA and I make the decisions" (even though Mom competent).*

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"Don't listen to my mom"

- Is the resident competent?
- If not, is there a designated decision maker for health care?
- If not, is there a designated surrogate?
- Is the direction improper?
- Document discussions and agreements.
- Document the resident's wishes and statements regarding her independence.

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Squabbling Siblings

- What about the rest of the family?
- Bossy Brenda's sister is Controlling Cathy
- Infighting between multiple family members can cause layers of complexity.
- Who should you listen to?



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Who Decides

- The Patient – unless clearly incompetent
- Guardian *of person* – health care powers
 - Be careful about extraordinary treatments
 - Belligerent Brigade telling you different things – always look for *court stamped orders* for guidance.
- Health Care Power of Attorney.
 - Revocable

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Who Decides

- Health Care Surrogate.
- DNR Order.
- Living Will – Most Limited. Only certain issues are covered.
- *Always check the paper work.*

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Rabble Rousing Richard

- "I swear we'll sue you."
- "IDPH is going to hear about this!"
- "This is unbelievable!!"



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Sometimes Richard wants to be heard

- Serial Complaints
 - As hard as it is, embrace each complaint.
 - Take an interest
 - Document the complaint
 - Make them feel heard.
 - Follow-up with an update

KEEP A FOLDER! YOU MAY NEED IT LATER.....

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Sometimes Richard wants to make trouble

- Avoid finger pointing among staff.
- Encourage staff to instruct family members to take complaints to management.
- Staff should document complaints and provide the complaints to appropriate management daily.
- Then, take action and follow-up! A great way to show you are on top of things!

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Sometimes Richard wants to tell on you.

- If a family member wants to call IDPH, they will.
- Anyone can file a lawsuit about anything.
- If Richard's mind is made up, there is little you can do.
- Focus on what you can control – documentation, investigation, follow-up.

The truth will set you free!!

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Dangerous Danny

- The individual is engaging in unsafe conduct or making decisions that are not in the resident's best interest.
- Not required to follow direction, even if the person is the designated decision maker.
- Draw the line at interference with care or interference with other residents.
- Criticism is not interference.
- Understand the role you may play in their life.
- May need to address through incremental steps.

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If That Doesn't Work

- Set limitations and parameters.
- Document interactions.
- Document the problem.
- Get other family members involved.
- Get ombudsman involved.
- Letter from lawyer.
- Prohibit entrance to facility.
- Involuntary discharge / Denial of Access.

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Barring An Individual

- Depends on the setting, but arguably within the community's power.
- Should have an attorney draft the notice.
- Understand that this is not an easy road to go down.
- There is a right to appeal.

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Possible Limitations / Parameters For Family Member

- Must follow service plan.
- Can't interfere with care.
- Can only visit at certain times.
- Can only visit with supervision.
- May not bring in food or medicines.
- May not talk with certain staff.

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Potential Partners

- The Ombudsman
- Geriatric Care Managers
- Department on Aging
- IDPH
- Other family but be careful!



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The story of Deadbeat Daniel

- *I'll gladly pay you on Tuesday*
- *Invoice? What invoice?*
- *No one told me the balance was that high!*



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Deadbeats

- Constant contact and reminders.
- Set a cutoff date.
- Promises do not pay the bills.
- Blame the board / attorney.
- Failure to pay may be exploitation of the resident. May be a crime in your state.
- Unpaid accounts only get more difficult to pay the longer they are out there.

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Deadbeats

Set timeline and stick to it:

- Initial Notice;
- Nasty Letter / Final Demand;
- Notice of involuntary discharge;

Notice to authorities should be separate

- Do not use reporting obligation as a threat to recover payment
- Could violate the Consumer Fraud and Deceptive Business Practices Act.

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Managing accounts and payments

- Have a system for monitoring accounts receivable and outstanding balances
- Don't let any residents slip through the cracks
- Don't set aside an account that is accruing an outstanding balance to address it later
- Set a target dollar amount or a certain time frame that initiates action on the account



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Managing accounts and payments

- Designate a "bad guy"
 - The person wrangling payment from a resident's family should not be a front-line care-giver or someone whom family contacts first about care issues
 - The only contact the family should have with the bill collector is the bill collecting
 - Who?
 - business office manager; person who sends the bills; facility's accountant; attorney



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Smart Admissions

- Allowed to review and individual's financial wherewithal.
- Allowed to make admissions decisions based upon finances.
- Make financial application a clear basis for admission with the applicant AND family certifying the accuracy of the application.



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Contract requiring 3rd party to use resident's funds

- "Responsible Party" - does a third party that controls resident funds?
- Include residency contract provision requiring third party to use the resident's income and assets for the resident's care.
- Require responsible party to sign the contract.
- Great for clearly communicating expectations of proper use of Resident's assets
- Does not have "teeth" / hard to enforce
 - Difficult to impose personal liability on third party
 - **BUT** could invite reporting of financial exploitation, criminal consequences, etc.



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Fee Guarantee

- Guarantor must pay the outstanding balance with Guarantor's own funds
- Cannot be a condition of admission in a SNF
- May be a part of debt settlement negotiations
- Must be carefully crafted and executed.

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Admission Deposit

- Deposits are not common, but they are not necessarily prohibited for all residents
- **SNF** - "The contract shall specify the amount of deposit paid... If the deposit is nonrefundable, the contract shall provide express notice of such nonrefundability." 77 Ill. Adm. Code 330.730(p).
- **AL** - The establishment contract shall also include: ... (2) The amount and purpose of any fee, charge and deposit, including any fee or charge for any days a resident is absent from the establishment. 77 Ill. Adm. Code 295.2030(b)(2)
- However, 42 CFR 483.12(d)(3) suggests that the Facility **CANNOT** accept a deposit as a requirement for admission from a Medicaid beneficiary – would need to waive the deposit required for Medicaid applicants.
- MCO contracts all prohibit deposits for their members.

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If that *still* doesn't work

- Legal Remedies
 - Involuntary Termination of Residency
 - Guardianship
 - Collections actions



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Reasons for Involuntary Discharge

ASSISTED LIVING

- Non-payment
- Does not meet admission requirements (295.2000)
- Failure to comply with agreement
- Threat to self or others

SNF/ SHELTERED CARE

- Non Payment **
- Medical reasons
- Physical safety

****Cannot be Medicaid pending**

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Involuntary Discharge

- Important Points
 - Have documentation to support compliance with time frames
 - Provide notices to required parties and keep a record
 - Make sure you have **contemporary evidence** of the reason for issuing the discharge



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Pursuing Guardianship

- May be appropriate when the resident is unable to manage own health care or estate
- Can be used to revoke power of attorney when agents have neglected or exploited the resident
- Can be used to protect assets from other individuals who may be exploiting the resident



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Pursuing Guardianship

- Guardian can coordinate Medicaid applications and appeals
- Creditors (unpaid facilities) can file claims against the estate
 - Only useful if the ward has assets and/or available income
- Facility can petition for guardianship



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It Doesn't Have to End There

- Just because involuntary termination has been carried out, resident has voluntarily vacated, a guardian has been appointed, or the resident has died, doesn't mean the facility is out of options
- There are many options for collection of outstanding balance even after these events occur



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Questions?

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