



Case Study 1

Brief Engagement

**Obtaining better care at a nursing home
and getting insurance to pay for it**

*All names have been changed to respect the privacy of the patients, family,
and care providers.

Paul requested my assistance for his mother, Kathleen, 89 years old. She was a remarkably active lady who lived in an independent living facility. Unfortunately, her husband passed away recently then suddenly she started having health issues. She was sent to the hospital and diagnosed with pneumonia and a urinary tract infection. She was discharged to the skilled nursing facility to continue antibiotic therapy and rehabilitation. But as it turns out, Kathleen was also developing delirium in the hospital. After she moved to the nursing home, she became somewhat belligerent and wasn't willing to participate in therapy or even eat. After several days of unsuccessful attempts, the nursing home informed Paul that Medicare wouldn't pay for Kathleen's stay because she wasn't making any progress with her therapy. They also told Paul he would have to pay out of pocket for Kathleen to remain in the facility.



He told me the nursing home already arranged a care



plan conference call to finalize Kathleen's case in a couple of days. I agreed to attend the call to advocate for Kathleen. She clearly needed better care and more time to recover from delirium. During the call, I laid out some facts that it sometimes takes weeks or even months for older adults to completely clear delirium. Kathleen was also unlikely to be getting adequate nutrition and fluid, which was likely a big part of the problem.

Paul suggested he could bring a private caregiver to encourage Kathleen to drink and eat more. I also pointed out that Kathleen clearly had a medical necessity to stay at a skilled nursing facility so Medicare should cover. The staff did not even argue and agreed to give Kathleen two more weeks to observe her progress.

After the call, I sent Paul a summary of the call and what to expect next. Over a week later, I heard from Paul that Kathleen was doing much better and participating in therapy now. He didn't think they required my assistance at that point (especially the facility was far from me) so our engagement ended. Basically, one conference call was all Paul needed from me!

Disclaimer: This case happened to end in a quick good resolution even without me physically being with the client. But the responsiveness of the facilities vary greatly. In some cases, it may take some time and effort to even schedule a care plan conference.

The important thing that patients and their families need to know is this: nursing homes often tell the patients that their insurance won't cover their stay unless they make progress with their therapy. That is FALSE. Insurance companies must cover the stay as long as it's medically necessary. If your nursing home hints they want to discharge you due to lack of progress, you need to push back or contact a patient advocate such as me before it's too late!