

Proactive Approach to Social Admissions

Addressing social admissions—hospital admissions driven by social rather than medical needs—before they occur requires a systematic approach. This process aims to identify individuals early, offer alternative support options, and enhance overall patient care. Here's a structured process to manage this proactively:

ER Physicians	ER physicians have a crucial role in the process of addressing social admissions. 1. Ensure that the family member/friend does not leave the ER. 2. Conduct a thorough medical assessment to determine the immediate healthcare needs of the patient. 3. Immediately involve Case Management / Social Workers when social admits are identified. Provide them with necessary information to facilitate a comprehensive care plan. If Case Management is not in house someone is on call 24/7. Call the operator for assistance connecting you to the on-call team member. 4. Be prepared to speak to the family about LACK OF MEDICAL NECESSITY. This should occur after CM has performed their assessment.
Case Management Social Worker	1. Perform a detailed assessment of the patient's medical, social, and psychological needs. Evaluate social determinants of health, such as housing, food security, and access to healthcare. 2. Communicate with ER physicians to understand the medical and social context of the patient's ER visit. 3. Develop a plan of care to address social needs; facilitate resource referrals, and develop a plan around the patient specific needs. 4. Identify and connect patients with community resources such as housing assistance, food banks, mental health services, and financial aid programs. Provide written materials and contact information for community resources. 5. Document the assessment findings, care plan, referral(s), and follow-up actions.
Utilization Review Nurse	1. Assess whether the admission meets medical necessity. 2. Complete an HINN 1 Form to provide beneficiary notification 3. Inform patient/family that the service may not be covered by their other insurance. 4. Have the patient sign and date the ABN form. (If before 3pm they will be responsible for today, if after 3pm they will be responsible starting tomorrow 0001. 5. Document the correct code in CarePort so billing is aware the letter has been given.
Baptist Outpatient Clinics Baptist Office	Outpatient clinics can play a pivotal role in helping hospitals prevent unnecessary hospitalizations by addressing social needs early. 1. Conduct a thorough medical assessment to determine the immediate healthcare needs of the patient. 2. Do not refer them to the ER if no medical needs exist 3. Involve the Community Case Management Social Worker when social admits are identified. (334-747-7721). 4. Provide the CCM Social Worker with the patient/families current situation 5. Provide patient/family with education and information that the Social Worker will follow up with them and develop a plan of care to address social needs; facilitate resource referrals, and develop a plan around the patient specific needs.

This unified effort not only enhances patient outcomes and improves the quality of care but also promotes more efficient use of healthcare resources, ultimately leading to a reduction in unnecessary hospital admissions and a more sustainable healthcare system.

**Private Duty Services
Homecare/Sitter Services**

Montgomery County

Answered Prayer	334-356-3911
John Knox at Home	334-315-0508
Agape Home Care	334-270-9103
Helping Hands	334-538-3673
Home Instead	334-215-9577
Right at Home	334-517-1045
Sitters for Life	334-354-9570
Home Care Assist of Montg	334-593-3988
First Light Home Care	334-271-6500
Synergy Home Care	334-203-1850
Visiting Angels	334-245-6390
Able Home Care	334-612-7252
Care Help Home Care	334-676-1400
GP In-Home Care	334-286-6129

Autauga County

Angels for the Elderly	334-356-3992
Answered Prayer	334-356-3911
Sitters for Life	334-354-9570
Caring Hands	334-505-7136
Dixie Nursing	334-568-5124
Home Instead	334-215-9577
Rescare at Home	334-277-7800
Right at Home	334-517-1045
John Knox at Home	334-284-0007
GP In-Home Care	334-286-6129
Compassionate Hands	334-595-7113
Your Choice	334-868-2227

**These services are not covered by Medicare
There may be other providers available that are not listed above
*** This list is informational only *****



Central Alabama Aging Consortium
Connecting You to Services

Serving Montgomery, Autauga, and Elmore Counties

Phone: 334-240-4670, Email completed form to caac.adrc@caac-al.org

The Central **Alabama Aging Consortium** is designated by the Alabama Department of Senior Services in developing and administering comprehensive, coordinated services, education, and information and assistance to its target populations. Programs are available to provide community resources and support to patients and families as they need additional services.

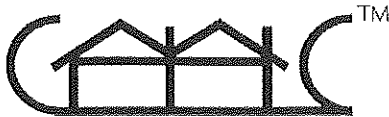
How to Contact:

Aging and Disability Resource Center at 334-240-4670

or

Complete the attached intake form and email it back to caac.adrc@caac-al.org

- Legal
 - Free legal services for power of attorney, wills, and advanced directives for anyone 60 years of age or older
- Insurance Application Assistance
 - Medicare Counseling (Open Enrollment Oct 15 - Dec 7)
 - Counselors available to assist with Long Term Medicaid application
- Ombudsman
 - Advocates for residents in nursing homes/assisted living
 - Can give info on finding a facility
- SenioRx
 - Medication assistance
- Alabama Cares
 - Caregiver education/relief program
 - Can reimburse caregivers for hired services
 - Help with walking/dressing/bathing/transferring
 - Also check out Lifespan Respite for additional respite Alabama Lifespan Respite Resource Network – Increasing access and availability of high quality respite resources for caregivers in Alabama! (alabamarespite.org)
- Dementia Friendly Home - Dementia Friendly Alabama
 - Trains business and schools to be Dementia Friendly and understand the disease and help people that may suffer when they come into your business
 - Has memory café that offers an activity for the caregiver and dementia patient to have fun and get a break from the caregiver/care receiver relationship
- Nutrition
 - Eat a meal at a senior center if you are able to get out, some provide transportation
 - Homebound frozen meals – 5 pack delivered weekly to those no longer to get out
- Medicaid Waiver Assistance– (In home services available for elderly and disabled that are medically eligible for nursing home but prefer to remain in their homes.)
 - E/D – Elderly and Disabled Waiver help in the home with walking, dressing, bathing, toileting, eating, light housekeeping, and meals
 - If approved can hire a family member to be the primary caregiver
 - ACT – transition out of a nursing home back home with services
- Wellness Programs
 - Geri-fit 6 week exercise class
 - Matter of Balance – strength building for fall risk
- Robotic Pets (Cats, Dogs, and Birds) Robotic Companion Pets - Dementia Friendly Alabama
 - For isolated people (no age requirement)
 - For dementia patients



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Phone: 334-240-4670, Email completed form to caac.adrc@caac-al.org

Name:		Address:		APT #	City	Zip
Last:	First:					
Telephone (s):		Date of birth:	Social Security Number:		Medicaid #:	
Veteran Status:		Gender:	Medicare #:		Marital Status:	
		M ☐ F ☐				
Source of Income:						
Estimated Total Monthly Income \$ _____ ☐ SS ☐ Disability ☐ Full Medicaid ☐ SSI ☐ Pension ☐ QMB/SLMB/QI ☐ Medicare ☐ Deeming						
Caregiver/contact Name:			Telephone:		Email:	
Address:			City/State:		Zip:	
Do you need assistance with		Y	N	Medical Conditions:		
Eating	☐	☐	☐ Alcoholism ☐ Hearing Impaired ☐ Gastrointestinal ☐ Alzheimer's ☐ Heart Disease/CHF ☐ Seizure ☐ Amputee ☐ HIV/AIDS ☐ Quadriplegic ☐ Arthritis ☐ Hypertension ☐ Paraplegic ☐ Asthma ☐ Incontinence ☐ Autism ☐ Mental Illness ☐ Cancer ☐ Multiple Sclerosis ☐ Cerebral Palsy ☐ Obesity ☐ COPD ☐ Paralysis ☐ Dementia ☐ Parkinson's ☐ Depression ☐ Renal Failure ☐ Diabetes ☐ Skin Disease ☐ Epilepsy ☐ Stroke ☐ Head Injury ☐ Visually Impaired			
Transferring in/out of bed/chair	☐	☐	Other:			
Walking	☐	☐				
Dressing	☐	☐				
Bathing	☐	☐				
Toileting	☐	☐				
Doing light housework	☐	☐				
Preparing meals	☐	☐				
Shopping for personal items	☐	☐				
Managing money	☐	☐				
Medication management	☐	☐				
Using telephone	☐	☐				
Access public/private transportation?	☐	☐				
Comment:						
Recent Hospitalized? Yes ☐ No ☐ Date: _____			Primary Doctor Name: _____		Phone: _____	
Wheelchair ☐	Bedbound ☐	Hoyer Lift ☐	Oxygen ☐	Dialysis: _____		
Home Health? _____		Hospice? _____		DHR? _____		Other: _____
Is Client at Risk? ☐ Y ☐ N Can client be left alone? ☐ Y ☐ N Does Client Live Alone? ☐ Y ☐ N						
Comments:						
Program Referral:						
☐ Alabama Cares (Caregiver Support) ☐ Chronic Disease Self-Management Class ☐ Nutrition Meal Program ☐ SenioRx (Medication Assistance) ☐ SHIP Medicare Counseling ☐ Legal Assistance				☐ Ombudsman (nursing home advocacy) ☐ Hospital to Home ☐ Medicaid Waiver (Elderly/Disabled Waiver) ☐ Dementia/Alzheimer's Information/PANDA ☐ Homemaker/Home Modification/Wellness Programs Other: _____		
Referral Source						
Name: _____		Telephone: _____		Agency: _____		
Additional Comments:						



When to consider senior living options

When your loved one can no longer care for themselves, there are many options to choose from including assisted living, memory care and home care.

You can help improve your loved one's quality of life and prevent any future urgent needs by having a plan in place.

A Place for Mom's local senior living advisors are experts in finding the best care options to meet their physical, emotional, and social needs.

"Our A Place for Mom advisor was a lifesaver. We were given 24 hours to find a place and our advisor listened to our needs and scheduled tours within minutes."

— A Place for Mom family caregiver

Get the support you need every step of the way

A Place for Mom's free personalized process will help you make a confident decision:

- 1 Connect with your local senior living advisor
- 2 Receive a range of local communities and home care agencies
- 3 Evaluate, tour, and decide with confidence

Our expert senior living advice comes at no cost to your family as we're paid by our participating communities and providers.

Connect with your local advisor to get started today:

Jacquelyn Brooks
(913) 933-3271

jacquelyn.brooks@aplaceformom.com



aPlaceforMom.

THE PLACE FOR SENIOR LIVING ADVICE

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How can the right senior care improve your loved one's quality of life?

A Place for Mom is the nation's most trusted senior living advisory service and can help you understand your care options.

Connect with your local advisor to get started today:

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(913) 933-3271

jacquelyn.brooks@aplaceformom.com



aPlaceforMom.

THE PLACE FOR SENIOR LIVING ADVICE



A Place for Mom is the place for senior living advice

Our local, expert senior living advisors offer customized guidance so you can make a confident decision. And, best of all, our service comes at no cost to your family, as we're paid by the communities and providers in our national network.

Our senior living advisors will:

- Evaluate your care needs, budget and timing
- Provide a range of local options
- Arrange community tours
- Guide you on ways to finance senior living
- Help you navigate the transition and move-in process for your loved one

Our expert advisors can help you understand your senior living options

Assisted Living

Perfect for seniors who do not require skilled care provided at a nursing home, but need help with activities of daily living (ADLs):

- Bathing, cooking, cleaning, dressing
- Medication management
- Transportation

Memory Care

Provides safe spaces for seniors with dementia/Alzheimer's disease

- Offers around-the-clock care
- Creates a customized curriculum to help seniors with dementia thrive
- Focuses on improving a patient's quality of life
- Aids with all ADLs and transportation services



Home Care

Provides minor assistance with ADLs to seniors living at home, including:

- Mobility assistance
- Personal and incontinence care
- Housekeeping and laundry
- Transportation

Independent Living

Great for seniors who can handle their own daily care, including:

- Bathing
- Using the bathroom
- Medication management
- Offers meal preparation and other amenities
- Provides transportation and housekeeping services

Respite Care

Short-term care provided at home or at a community

- Can be arranged for a few days to several weeks
- Provides relief to a caregiver or used after a hospital discharge

TIPS FOR APPLYING FOR INSTITUTIONAL (Nursing Home) MEDICAID

When a loved one or family friend needs nursing home care or care in an institution, it can be very stressful. There are many worries, especially about how to pay for this care. The Alabama Medicaid Agency works with families to help pay for this care.

Due to many federal and state laws and regulations, the process of applying for this type of Medicaid requires patience and understanding on both sides.

There are things you can do to make the process easier for you and the worker who will be working on your application.

1) Check to see if your loved one qualifies for any benefits from another source, such as benefits provided through the VA. Having to check on this later may hold up your application.

2) Be aware that the worker is required by federal law to “look back” 60 months before the application date to see how the applicant’s income or resources were spent. This date starts the month before the month you apply.

3) Try to make your application as complete as possible when you turn it in! This means finding all the documents that will be needed and putting it together in a box or folder. Many applications are held up because of missing information or documents. This information along with other information is used to determine if an individual is eligible for Medicaid. Please send copies of all items that apply to you or your spouse. Make copies of anything you need to keep.

Here are the types of documents Medicaid will need from the applicant/spouse:

Annuities	Trusts	Property Deeds
Life Insurance policies	Bonds	Burial contracts/policies
Medicare Part D policies	Promissory Notes	Loans
Long-term care policies	Stocks	IRA’s/CD’s/Mutual funds
Tag receipts/titles	Social Security Card	Medicare Card
Power of Attorney	Conservatorship	Guardianship documents
Wills	Other documents as required	

Proof of income

You will need to show the applicant's gross income (before anything is taken out) that is now used to purchase food, shelter other basic needs of life; Examples: Veterans Administration (VA), Social Security (SSA) benefits, Rental Income, Railroad Retirement, Pensions, Earned income/Wages, Civil Service, and Royalties, Timber Sales, etc., and Interest.

SPECIAL RULES

COUPLES

One of the biggest concerns families have is what happens to assets (such as a house) that the applicant and his or her spouse share. There are special rules for this situation that may allow some or all of the assets – including the home of the couple – to be protected, or set aside. In addition, some of the applicant's income may be allocated to the spouse who is living in the community.

During the application process, an assessment of the couple's resources will be completed.

LIENS

Medicaid does not take a lien on a home when there is a spouse, child who is under 21, or a blind or disabled child lawfully living in the home, or when a sibling with equity interest in the home is lawfully living in the home and was there for at least one year immediately prior to the applicant being admitted to the nursing home.

There is no requirement for a lien when these criteria are met for any reason from any facility or organization in order to qualify for Medicaid. *IMPORTANT NOTE: Before liquidating any assets or assigning a lien to the nursing home, please contact a District Office or Customer Service Center for help.*

COVERAGE PERIOD

Coverage may begin three months before the month the application was made, if medical services were received and all eligibility requirements are met. Submitting an application when an individual initially enters the nursing home is encouraged so Medicaid can possibly cover expenses not covered by Medicare or other a long-term care policy.

VETERANS

Veterans and spouses are eligible to keep \$90 for their needs from their VA income.

HINN1
**Preadmission/Admission Hospital Issued Notice of
Noncoverage.**

Hospital Facility: _____

Name of Patient: _____ *Name of Physician:* _____

Patient ID Number: _____ *Date Issued:* _____

We believe that Medicare is not likely to pay for your admission for (specify service or condition) _____ because:

_____ *it is not considered to be medically necessary*

_____ *it could be furnished safely in another setting*

_____ *other* _____

However, this notice is not an official Medicare decision.

If you disagree with our finding:

- *You should talk to your doctor about this notice and any further health care you may need.*
- *You also have the right to an appeal, that is, an immediate review of your case by a Quality Improvement Organization (QIO). The QIO is an outside reviewer hired by Medicare to make a formal decision about whether your admission is covered by Medicare. **See page 2 for instructions on how to request a review and contact the QIO.***

- ***If you decide to go ahead with the hospitalization, you will have to pay for:***

Customary charges for all services furnished during the stay, except for those services for which you are eligible under Part B.

If notified before 3pm all services furnished after receipt of this hospital notice

If notified after 3pm..... all services furnished on the day following the day of receipt of this notice

If you want an immediate review of your case:

Preadmission:

- *Call the QIO immediately at the number listed below, but no later than 3 calendar days after you receive this notice. If you are admitted, you may call the QIO at any point in the stay.*

Admission:

- *Call the QIO immediately at the number listed below or you may call the QIO at any point during your stay.*
- *You may also call the QIO for quality of care issues.*

QIO Contact Information: The QIO, Acentra Health @ 1-888-317-0751 or 1-855-843-4776.

If you do not want an immediate review:

- *You may still request a review within 30 calendar days from the date of receipt of this notice by calling the QIO at the number below.*

Results of the QIO Review:

- *The QIO will send you a formal decision about whether your hospitalization is appropriate according to Medicare's rules, and will tell you about your reconsideration and appeal rights.*
- *IF THE QIO FINDS YOUR HOSPITAL CARE IS COVERED, you will be refunded any money you may have paid the hospital except for any applicable copays, deductibles, and convenience items or services normally not covered by Medicare.*
- *IF THE QIO FINDS THAT YOUR HOSPITAL CARE IS NOT COVERED, you are responsible for payment for all services beginning on ____ (specify date)____. (See footnote^{1 on} page 1).*

For more information, call 1-800-MEDICARE (1-800-633-4227), or TTY: 1-877-486-2048.

Please sign your name, the date and time. Your signature does not mean that you agree with this notice, just that you received the notice and understand it.

Signature of Patient or Representative

Date

Time