Nursing Homes Programs and Services Georgia Department of Community Health

Definition:

Any facility who primarily provides skilled nursing care and related services to residents who require medical or nursing care; rehabilitation services to the injured, disabled, or sick; or on a regular basis, health care and services to individuals who because of their mental or physical condition require care and services (above the level of room and board) which is available to them only through these facilities, and is not primarily for the care and treatment of mental diseases.

- SNF (Skilled Nursing Facility)- certified nursing facility with a Medicare provider agreement
- NF (Nursing Facility)- Medicaid nursing facility
- SNF/NF Dual Cert- certified nursing facility for both Medicare and Medicaid
- SNF/NF Distinct Part- the certified nursing facility is a distinct part of a rehabilitation center, hospital or another SNF or NF
- Licensed only- licensed by Georgia but has no Medicare or Medicaid certification

Exemptions:

- A nursing home operated by the federal government
- An institution primarily for the care and treatment of mental diseases or the mentally retarded

Type Regulation:

State: A facility must obtain a permit.

Federal: An institution choosing to participate in federal programs must be certified.

To obtain more information about certification and general information on Nursing Homes, visit one of the following CMS (Center for Medicare and Medicaid Services) websites:

- General Information on Nursing Home Certification- Skilled Nursing Facility Center
- Compare Certified Nursing Homes- Nursing Home Compare

Legal Authority:

O.C.G.A. § 31-7-1, Definitions

O.C.G.A. § 31-7-3, Permit Required

O.C.G.A. § 31-7-300, Title 31- Health; Chapter 7 – Criminal Records Checks

Rules:

State:

- <u>Rules and Regulations for Nursing Homes</u>, Chapter 290-5-8, effective November 15, 1976, amended September 8, 2004.
- Residents' Bill of Rights, Chapter 290-5-39, effective February 25, 1982
- <u>Rules and Regulations for General Licensing and Enforcement Requirements</u>, Chapter 111-8-25 effective August 3, 2010

Fees: 1≤99 Beds \$500, >99 Beds \$750; Annually





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- Disaster Preparedness Plans, Chapter 290-5-45, effective June 7, 1984.
- Long Term Care Residents' Bill of Rights, Chapter 290-5-39, effective February 25, 1982.

Federal:

Requirements for States and Long Term Care Facilities, CFR Title 42, Chapter IV, Part 483.5 through 483.75 (for those facilities that chose to be certified)

Fees:

Permit: No chargeRules: \$5.50

Other Resources:

MDS (**Minimum Data Set**): resident assessment data that nursing homes collect on the residents at specified intervals. The measures assess the resident's physical and clinical conditions and abilities, as well as preferences and life care wishes. This data has been converted to develop quality measures that show how well nursing homes are caring for their residents' physical and clinical needs.

 CMS Nursing Home Quality Initiatives (including MDS) - broad-based initiative that includes CMS's regulatory and enforcement systems, consumer information at 1-800-MEDICARE and Medicare website, community-based nursing home quality improvement programs, and partnerships and collaborative efforts to promote awareness and support.

