When Congress enacted the Nursing Home Reform Act (NHRA) in 1987, it made sweeping changes to the expectations of the Medicare and Medicaid programs in their purchase of long-term care services. The NHRA also specifically addressed a number of residents’ rights issues, and provided protections to all residents of nursing facilities that accept Medicare or Medicaid. In addition, the NHRA required that a review of a facility’s compliance with residents’ rights be included in the annual standard survey used to determine overall performance and compliance with federal regulations. It also requires facilities to protect and promote the rights of each resident.

Many state legislatures jumped on the reform bandwagon, often extending the scope of protections afforded to residents and expanding the protection to settings other than nursing facilities.

The residents’ rights protections typically fall into the following categories:

- General rights
- Admissions policies
- Transfer and discharge rights
- Access and visitation rights.
The “general rights” include such issues as freedom of choice, freedom from restraints, privacy, confidentiality, grievances, participation in resident and family groups and other activities, and accommodation of individual needs. Residents also have the right to examine the results of the facility’s annual survey. These rights must be presented to a resident orally and in writing at the time of admission.

**Legislation Affecting Residents’ Rights**

In order to properly address resident rights, a basic understanding of the general laws involved is needed. The following is a brief outline of some of the state and federal laws that may be applicable in a resident-rights issue.

**Medicare and Medicaid Statutes/Regulations**

Both Medicare and Medicaid contract with nursing facilities to provide services to program recipients. In order to become, and remain, a provider, the facility must meet the requirements for provider participation set forth in the Medicare and Medicaid statutes and regulations. As previously noted, the Nursing Home Reform Act of 1987 substantially amended these Medicare and Medicaid requirements. The basic purpose of the NHRA was to improve the standard of care and quality of life for nursing home residents by strengthening the requirements of Medicaid/Medicare participation, providing a system of intermediate sanctions for violations, revising the survey and certification process for monitoring compliance, and providing a resident “bill of rights.”

The provisions of the NHRA apply to all residents of any facility that participates in either the Medicare or Medicaid program, and set high standards for Medicare/Medicaid participation in several important areas: