

***Initial Certification Training Curriculum for Long-Term Care Ombudsman Programs***

**Glossary of Key Words**

The following key words and terms are defined relative to Ombudsman program practices and are found throughout the curriculum. Key words are also defined at the beginning of each module.

**Abuse**–Any willful mistreatment of residents by facility staff, resident representative/family/friend, other residents, or an outside individual. There are three categories of abuse: physical, sexual, and psychological. [[1]](#footnote-1)

**Activities of Daily Living (ADLs)** –Basic tasks and fundamental skills necessary to independently care for oneself, such as eating, bathing, and mobility.

**Administration for Community Living (ACL)** – A division of the U.S. Department of Health and Human Services (HHS) that manages grant programs and serves as the federal focal point on matters concerning older adults.[[2]](#footnote-2)

**Administration on Aging (AoA)** – An operating agency within the federal Department of Health and Human Services (HHS) that provides assistance in the development of new or improved programs to help older persons. It provides grants to the States for community planning and support services and for training, through research, development, or training project grants.[[3]](#footnote-3)

**Adult Protective Services (APS)** –A social services program provided by state and local governments serving older adults and, in some states, adults with disabilities who need assistance because of abuse, neglect, self-neglect, or financial exploitation.[[4]](#footnote-4)

**Advocate** – An individual who works on behalf of another individual or group of individuals or an action taken on behalf of an individual or a group of individuals. An advocate does not represent their own views but amplifies those of the person or persons they are supporting.

**ANE** – Abuse, neglect, and exploitation.

**Appeal Hearing** – A process that occurs after a resident appeals a notice of transfer or discharge to determine if the facility or the resident prevails. In some states, appeal hearings may also be referred to as “administrative hearing” or “fair hearing.”

**Area Agency on Aging (AAA)** – An agency designated by the state to address the needs of older individuals within a specific region or geographical area known as a planning and service area (PSA).

**Auxiliary Aids and Services** –Accommodations such asinterpreters,items, equipment, or services that assist with effective communication.

**Case** – Each case must have a minimum of one complaint. A case must contain a complainant, complaint code(s), a setting, verification, resolution, and information regarding whether a complaint was referred to another agency. For abuse, neglect, and exploitation codes, a perpetrator code is also required.[[5]](#footnote-5)

**Centers for Medicare & Medicaid Services (CMS)** – A division within the U.S. Department of Health and Human Services,CMS administers the nation’s major healthcare programs including Medicare and Medicaid.

**Certification** – The process of satisfying the training and other program requirements to become a representative of the Office.

**Client** – The resident whom the Long-Term Care Ombudsman program represents.

**Code** – An alphanumeric assignment to a data element of a case (e.g., complaint code, verification code, disposition code, etc.).[[6]](#footnote-6)

**Complainant** – An individual who requests Ombudsman program complaint investigation services regarding one or more complaints made by, or on behalf of, residents.[[7]](#footnote-7)

**Complaint** – An expression of dissatisfaction or concern brought to, or initiated by, the Ombudsman program which requires Ombudsman program investigation and resolution on behalf of one or more residents of a long-term care facility.[[8]](#footnote-8)

**Complaint Disposition (Resolution)** –Final resolution or outcome of the complaint.

**Complaint Verification (Verification)** – Confirmation that most or all facts alleged by the complainant are likely to be true.[[9]](#footnote-9)

**Complaint Visit** –An Ombudsman program visit to a facility in response to a complaint during which only complaint-related activities are conducted.

**Confidentiality** – Federal and state laws mandate that the Long-Term Care Ombudsman program keep all identifying information about a resident and a complainant private, within the Ombudsman program.

**Critical Access Hospital (CAH)** – A rural hospital certified by CMS as a CAH with beds that can be used as equivalent to skilled nursing facility care. Those beds must meet the requirements of the Federal Nursing Facilities Regulations. [[10]](#footnote-10)

**Culture Change** – The common name given to the national movement based on person-directed values and practices to ensure long-term services and supports are “directed by and centered on” the person receiving care.[[11]](#footnote-11)

**Demographics** –Statistical data relating to the population and particular groups within it. For the purposes of this training, the demographics used are from federal resources. States may include their own state-specific data from state resources.

**Designation** – The authority given to the State Ombudsman to appoint or select (i.e., designate), and refuse, suspend, or remove designation of local Ombudsman entities and representatives of the Office pursuant to section 712(a)(5) of the Older Americans Act set forth in §1324.11(e)(6) of the State Long-Term Care Ombudsman Programs Rule.

**Discharge** – The movement of a resident from a bed in one certified facility to a bed in another certified facility or other location in the community, when return to the original facility is not expected.[[12]](#footnote-12)

**Disclose** – To make known or public; to expose to view.[[13]](#footnote-13)

**Empowerment** – This is a primary role of the Long-Term Care Ombudsman program in which representatives provide the tools (e.g., information about residents’ rights, facility responsibilities), encouragement, and assistance to promote resident self-advocacy.

**Facility-Initiated Transfer or Discharge** – A transfer or discharge to which the resident objects, that did not originate through a resident’s verbal or written request, and/or one that is not in alignment with the resident’s stated goals for care and preferences.[[14]](#footnote-14)

**Family Council** – A group of residents’ family members that meets regularly to discuss and offer suggestions about facility policies and procedures affecting residents’ care, treatment, and quality of life; support each other; plan resident and family activities; participate in educational activities; or for any other purpose.[[15]](#footnote-15)

**Fiduciary** – A person or organization with a legal or ethical relationship with an individual who is required to act in the individual's best interest.

**Financial Exploitation (Exploitation)** – The illegal or improper use of an individual’s funds, property, or assets for another person’s profit or advantage.[[16]](#footnote-16)

**Gross Neglect** **(Neglect)** – The failure to protect a resident from harm or the failure to meet their needs for essential medical care, nutrition, hydration, hygiene, clothing, basic activities of daily living, or shelter, which results in a serious risk of compromised health and/or safety, relative to age, health status, and cultural norms.[[17]](#footnote-17)

**Highest Practicable Level of Well-Being** – The highest possible level of physical, mental, and psychosocial functioning a resident can maintain or achieve.

**Health Insurance Portability and Accountability Act of 1996 (HIPAA, Privacy Rule) –** A federal law that required the creation of national standards to protect patient health information from being disclosed without the patient’s consent or knowledge. HIPAA sets rules and limits on who can use, review, and disclose individuals’ health information.[[18]](#footnote-18)

**Home and Community-Based Services (HCBS)** – Provides consumers needing long-term care services more choices in where and how they receive those services.[[19]](#footnote-19)

**Hospice** – An agency or organization that provides care to terminally ill individuals and has a valid Medicare provider agreement. Some hospices are located within a hospital, nursing facility, or a home health agency.[[20]](#footnote-20)

**Immediate Family** –As pertaining to conflicts of interest, is a member of the household or a relative of the representative of the Office with whom there is a close personal or significant financial relationship.[[21]](#footnote-21) Such relationships could impair the judgment or give the appearance of bias on the part of a representative of the Office.

**Incident Report (Accident Report)** – A document that records details when an unexpected event occurs, such as an accident, injury to a resident or staff, or potential abuse.

**Information and Assistance** - Information provided to an individual or facility staff about issues affecting residents (e.g., residents’ rights, care issues, services) and/or sharing information about accessing services without opening a case and working to resolve a complaint.[[22]](#footnote-22)

**Informed Consent** – The permission from a resident or a resident representative after a full explanation has been given of the facts, options, and possible outcomes of such options in a manner and language in which the resident or resident representative understands.

**Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)** –The ICF/IID benefit is an optional Medicaid benefit; however, all states offer this. ICF/IID provide active treatment for individuals with intellectual disabilities and other related conditions. Residents in ICF/IID may be non-ambulatory, have seizure disorders, mental illness, visual or hearing problems, or a combination of conditions. Currently, the Ombudsman program in very few states either visit or respond to complaints from ICF/IID.[[23]](#footnote-23)

**Law Enforcement** – People employed by a local, state, tribal, or federal justice agency. This includes police, courts, district attorney's office, probation, or other community corrections agency, and correctional facilities; including the State Medicaid Fraud Control Unit, as defined in section 1903(q) of the Social Security Act (42 U.S.C. 1396b(q)).[[24]](#footnote-24)

**Legal Services** – Entity or individual attorney providing legal representation and/or consultation to residents including but not limited to legal services funded through Older Americans Act or Legal Services Corporation funds, Ombudsman legal counsel, or any other attorney.

**Local Ombudsman Entity (LOE)** – Public agencies or nonprofit organizations, designated by the State Ombudsman, responsible for hosting local or regional Ombudsman programs to carry out the activities of the program.

**Long-Term Services and Supports (LTSS)** – Services and supports provided to beneficiaries of all ages who have functional limitations and/or chronic illnesses that have the primary purpose of supporting the ability of the beneficiary to live or work in the setting of their choice, which may include the individual's home, a worksite, a provider-owned or controlled residential setting, a nursing facility, or other institutional setting.[[25]](#footnote-25)

**Mandated (or Mandatory) Reporter** – An individual who holds a professional position or license that requires them to report known or suspected abuse to the appropriate state agency.

**Medicaid** –A state and federal assistance program that serves low-income people of every age. It is run by state and local governments following federal guidelines.**[[26]](#footnote-26)**

**Medicare** – A federal insurance program run by CMS for those who have paid into the program. It serves people over 65 years of age, regardless of their income; younger individuals with disabilities; and persons on dialysis.[[27]](#footnote-27)

**Minimum Data Set 3.0 (MDS, MDS 3.0)** – A federally mandated assessment of all residents of Medicare and Medicaid certified nursing homes. MDS assessments are conducted upon admission, throughout the resident’s stay, and upon discharge. The data from the assessments are transmitted electronically using the MDS national database at CMS.[[28]](#footnote-28)

**National Ombudsman Reporting System (NORS)** – The uniform data collection and reporting system required for use by all State Long-Term Care Ombudsman programs.

**Office of the State Long-Term Care Ombudsman (Office, OSLTCO)** – As used in sections 711 and 712 of the Act, means the organizational unit in a State or territory which is headed by a State Long-Term Care Ombudsman.[[29]](#footnote-29)

Older Americans Act (the Act, OAA)– Federal law enacted in 1965 that provides for comprehensive services for older adults. The OAA created a National Aging Network comprised of federal, state, and local supports and services for individuals ages 60 and older. The OAA established the Long-Term Care Ombudsman program.[[30]](#footnote-30) This law is reauthorized (revised) by Congress every five years and signed into law by the President.

**Ombudsman** – A Swedish word meaning agent, representative, or someone who speaks on behalf of another. For the purposes of this manual, the word “Ombudsman” means the State Long-Term Care Ombudsman.

**Omnibus Budget Reconciliation Act of 1987 (OBRA ’87)** –Also known as the “Federal Nursing Home Reform Act.”

**PEP Method (Point, Evidence, Repeat Point)** - A method of specific communication skills and problem-solving approaches.

**Perpetrator** – Person(s) who appears to have caused the abuse, neglect, or exploitation.[[31]](#footnote-31)

**Preadmission Screening and Resident Review (PASRR)** – A federally required assessment tool to help ensure that persons with mental illness or developmental disabilities are not inappropriately admitted to nursing facilities.

**Protection and Advocacy (P&A)** - A system to protect and advocate for the rights of individuals with developmental disabilities; as designated by the State, and as established under the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15001 et seq.).[[32]](#footnote-32)

**Referral Agency** - The agency or agencies to which a complaint was referred as part of the Ombudsman program’s plan of action for complaint resolution.[[33]](#footnote-33)

**Representatives of the Office of the State Long-Term Care Ombudsman (Representatives)** – As used in sections 711 and 712 of the Act, means the employees or volunteers designated by the Ombudsman to fulfill the duties set forth in §1324.19(a), whether personnel supervision is provided by the Ombudsman or his or her designees, or by an agency hosting a local Ombudsman entity designated by the Ombudsman pursuant to section 712(a)(5) of the Act.[[34]](#footnote-34)

**Resident** – An individual of any age who resides in a long-term care facility.[[35]](#footnote-35)

**Resident Council** – A group of residents that meets regularly to discuss and offer suggestions about facility policies and procedures affecting residents’ care, treatment, and quality of life; support each other; plan resident and family activities; participate in educational activities; or for any other purpose.[[36]](#footnote-36)

**Resident-Initiated Transfer or Discharge** – Means the resident or, if appropriate, the resident representative, has provided verbal or written notice of intent to leave the facility. Leaving the facility does not include the general expression of a desire to return home or the elopement of residents with cognitive impairment.[[37]](#footnote-37)

**Resident-Directed** – The core of the Ombudsman program’s foundation is to follow the direction of the resident to the fullest extent possible. For example, the Ombudsman program does not make decisions for the resident but does support and advocate on behalf of the resident’s wishes.

**Resident Representative** – An individual chosen by the resident to act on their behalf, or a person authorized by federal or state law (e.g., agent under a Power of Attorney, representative payee, and other fiduciaries) to act on behalf of a resident in order to support the resident in decision-making; access medical, social, or other personal information of the resident; manage financial matters; or receive notifications; legal representative (as used in Section 712 of the Act), or a court-appointed guardian or conservator of a resident.[[38]](#footnote-38)

**Residential Care Community (RCC)** – A type of long-term care facility as described in the Older Americans Act (Act) that, regardless of setting, provides at a minimum, room and board, around-the-clock on-site supervision, and help with personal care such as bathing and dressing or health-related services such as medication management. Facility types include but are not limited to, assisted living; board and care home; congregate care; enriched housing programs; homes for the aged; personal care homes; adult foster/ family homes; and shared housing establishments that are licensed, registered, listed, certified, or otherwise regulated by a state.[[39]](#footnote-39)

**Routine Access Visit (Routine Visit)** – A representative’s visit to a facility to conduct activities that promote regular and timely access to the LTCOP and as determined in the state program’s policies and procedures (e.g., visit with multiple residents, share information about the Ombudsman program, observe activities in the facility).[[40]](#footnote-40)

**Setting** – Description of where Ombudsman services are provided.[[41]](#footnote-41)

**Serious Mental Illness** – A mental, behavioral, or emotional disorder resulting in serious functional impairment, which substantially interferes with or limits one or more major life activities.[[42]](#footnote-42)

**Skilled Nursing Facility or Nursing Facility** – Also known as a “nursing home,” is a certified facility that provides skilled nursing care for residents who require medical or nursing care rehabilitation or provides health-related 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 can be made available to them only through institutional facilities.[[43]](#footnote-43) For the purposes of this training and to be consistent with the National Ombudsman Reporting System (NORS), we use the term “nursing facility” for both skilled nursing facilities and nursing facilities.[[44]](#footnote-44)

**Social Security Administration (SSA)** – A government agency that administers Social Security, a social insurance program with retirement, disability, and survivor benefits.[[45]](#footnote-45)

**State Agency/State Unit on Aging (SUA)** – The designated state agency responsible for developing and administering programs that provide assistance to older individuals, their family members, and in many states, for adults with disabilities.

**State Long-Term Care Ombudsman (Ombudsman, State Ombudsman)** – As used in sections 711 and 712 of the Act, means the individual who heads the Office and is responsible personally, or through representatives of the Office, to fulfill the functions, responsibilities, and duties set forth in §1324.13 and §1324.19.[[46]](#footnote-46)

**State Long-Term Care Ombudsman program (Ombudsman program, the program, LTCOP)** – As used in sections 711 and 712 of the Act, means the program through which the functions and duties of the Office are carried out, consisting of the Ombudsman, the Office headed by the Ombudsman, and the representatives of the Office.[[47]](#footnote-47)

State Long-Term Care Ombudsman Programs Rule **(LTCOP Rule)** – The Federal Rule that governs the Long-Term Care Ombudsman program (45 CFR Part 1324).[[48]](#footnote-48)

**State Survey Agency** –The state agency responsible for certifying and/or licensing long-term care facilities and conducting inspections and investigations to ensure federal and state compliance.

**State Surveyor** – An individual who works for the State Survey Agency to conduct in-depth surveys, inspections, and investigations of long-term care facilities.

**Subsection Symbol (§)** – The subsection symbol is used to denote an individual numeric statute or regulation (rule).

**Systems Advocacy** – Work to change a system (e.g., a long-term care facility, a government agency, an organization, a corporation, policies, regulations, and laws) to benefit long-term care residents.[[49]](#footnote-49)

**Transfer** – The movement of a resident from a bed in one certified facility to a bed in another certified facility when the resident expects to return to the original facility.[[50]](#footnote-50)

**U.S. Department of Health and Human Services (HHS)** – The principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves.[[51]](#footnote-51)

**Willful Interference** – Actions or inactions taken by an individual in an attempt to intentionally prevent, interfere with, or attempt to impede the Ombudsman from performing any of the functions or responsibilities set forth in §1324.13 or the Ombudsman or a representative of the Office from performing any of the duties set forth in §1324.19.[[52]](#footnote-52)

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1. <https://ltcombudsman.org/uploads/files/support/NORS_Table_2_Complaint_Code_10-31-2024.pdf> [↑](#footnote-ref-1)
2. <https://acl.gov/> [↑](#footnote-ref-2)
3. Older Americans Act <https://acl.gov/sites/default/files/about-acl/2020-04/Older%20Americans%20Act%20Of%201965%20as%20amended%20by%20Public%20Law%20116-131%20on%203-25-2020.pdf> [↑](#footnote-ref-3)
4. <https://acl.gov/programs/elder-justice/supporting-adult-protective-services> [↑](#footnote-ref-4)
5. CA-04 Table 1: Part A <https://ltcombudsman.org/uploads/files/support/NORS_Table_1_Case_Level_10-31-2024.pdf> [↑](#footnote-ref-5)
6. These codes are also referred to as “element numbers” in NORS Tables 1, 2, and 3. Links to NORS Tables are available here: <https://ltcombudsman.org/omb_support/nors/nors-training> [↑](#footnote-ref-6)
7. <https://ltcombudsman.org/omb_support/nors> [↑](#footnote-ref-7)
8. CA-04 Table 1: Part B - Complaint Data Components <https://ltcombudsman.org/uploads/files/support/NORS_Table_2_Complaint_Code_10-31-2024.pdf> [↑](#footnote-ref-8)
9. CD-07 Table 1: - Complaint Data Components <https://ltcombudsman.org/uploads/files/support/NORS_Table_1_Case_Level_10-31-2024.pdf> [↑](#footnote-ref-9)
10. <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/CAHs> [↑](#footnote-ref-10)
11. What Is Culture Change? Pioneer Network. <https://www.pioneernetwork.net/elders-families/what-is-culture-change/> [↑](#footnote-ref-11)
12. <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf> [↑](#footnote-ref-12)
13. Merriam-Webster <https://www.merriam-webster.com/dictionary/disclose> [↑](#footnote-ref-13)
14. <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf> [↑](#footnote-ref-14)
15. State Operations Manual Appendix PP Guidance to Surveyors DEFINITIONS §483.10(f)(5)-(7) [↑](#footnote-ref-15)
16. <https://ltcombudsman.org/uploads/files/support/NORS_Table_2_Complaint_Code_10-31-2024.pdf> [↑](#footnote-ref-16)
17. <https://ltcombudsman.org/uploads/files/support/NORS_Table_2_Complaint_Code_10-31-2024.pdf> [↑](#footnote-ref-17)
18. Centers for Disease Control and Prevention (CDC). Health Insurance Portability and Accountability Act of 1996 (HIPAA). <https://www.cdc.gov/phlp/publications/topic/hipaa.html> [↑](#footnote-ref-18)
19. *Home and Community Based Services* National Long-Term Care Ombudsman Resource Center <https://ltcombudsman.org/home-and-community-based-services> [↑](#footnote-ref-19)
20. <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/Hospices> [↑](#footnote-ref-20)
21. 45 CFR Part 1324 Subpart A §1324.1 Definitions [↑](#footnote-ref-21)
22. <https://ltcombudsman.org/omb_support/nors> [↑](#footnote-ref-22)
23. <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/ICFIID> [↑](#footnote-ref-23)
24. CD-06 Table 1 Part C <https://ltcombudsman.org/uploads/files/support/NORS_Table_1_Case_Level_10-31-2024.pdf> [↑](#footnote-ref-24)
25. <https://www.law.cornell.edu/cfr/text/42/438.2> [↑](#footnote-ref-25)
26. <https://www.hhs.gov/answers/medicare-and-medicaid/what-is-the-difference-between-medicare-medicaid/index.html> [↑](#footnote-ref-26)
27. <http://www.medicare.gov> [↑](#footnote-ref-27)
28. <https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/Minimum-Data-Set-3-0-Public-Reports/Minimum-Data-Set-3-0-Frequency-Report> [↑](#footnote-ref-28)
29. 45 CFR Part 1324 Subpart A §1324.1 Definitions [↑](#footnote-ref-29)
30. <https://acl.gov/about-acl/authorizing-statutes/older-americans-act> [↑](#footnote-ref-30)
31. <https://ltcombudsman.org/uploads/files/support/NORS_Training_Part_II_Principles_2021.pdf> [↑](#footnote-ref-31)
32. <https://acl.gov/programs/aging-and-disability-networks/state-protection-advocacy-systems> [↑](#footnote-ref-32)
33. CD-06 Table 1 Part B – Complaint Data Components <https://ltcombudsman.org/uploads/files/support/NORS_Table_1_Case_Level_10-31-2024.pdf> [↑](#footnote-ref-33)
34. 45 CFR Part 1324 Subpart A §1324.1 Definitions [↑](#footnote-ref-34)
35. SEC. 711. Definitions Older Americans Act <https://acl.gov/sites/default/files/about-acl/2020-04/Older%20Americans%20Act%20Of%201965%20as%20amended%20by%20Public%20Law%20116-131%20on%203-25-2020.pdf> [↑](#footnote-ref-35)
36. State Operations Manual Appendix PP Guidance to Surveyors DEFINITIONS §483.10(f)(5)-(7) [↑](#footnote-ref-36)
37. <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf> [↑](#footnote-ref-37)
38. LTCOP Final Rule §1324.1 Definitions <https://www.govinfo.gov/content/pkg/CFR-2017-title45-vol4/xml/CFR-2017-title45-vol4-part1324.xml> [↑](#footnote-ref-38)
39. CA-04 02 Residential Care Community Table 1 Part C Case and Complaint Definitions <https://ltcombudsman.org/uploads/files/support/NORS_Table_1_Case_Level_10-31-2024.pdf> [↑](#footnote-ref-39)
40. <https://ltcombudsman.org/omb_support/nors> [↑](#footnote-ref-40)
41. <https://ltcombudsman.org/omb_support/nors/nors-training#training> [↑](#footnote-ref-41)
42. National Institute of Mental Health retrieved from [www.nimh.nih.gov](http://www.nimh.nih.gov) [↑](#footnote-ref-42)
43. This definition is a combination of Requirements for, and assuring Quality of Care in, Skilled Nursing Facilities, Section 1819(a) of the Social Security Act [42 U.S.C. 1395i–3(a)] <https://www.ssa.gov/OP_Home/ssact/title18/1819.htm> and Requirements for Nursing Facilities, Section 1919(a) of the Social Security Act [42 U.S.C. 1396r(a)] <https://www.ssa.gov/OP_Home/ssact/title19/1919.htm> [↑](#footnote-ref-43)
44. NORS Table 1 <https://ltcombudsman.org/uploads/files/support/NORS_Table_1_Case_Level_10-31-2024.pdf> [↑](#footnote-ref-44)
45. Social Security Administration <https://www.ssa.gov/> [↑](#footnote-ref-45)
46. 45 CFR Part 1324 Subpart A §1324.1 Definitions [↑](#footnote-ref-46)
47. 45 CFR Part 1324 Subpart A §1324.1 Definitions [↑](#footnote-ref-47)
48. <https://www.govinfo.gov/content/pkg/CFR-2017-title45-vol4/xml/CFR-2017-title45-vol4-part1324.xml> [↑](#footnote-ref-48)
49. <https://ltcombudsman.org/uploads/files/support/systems-advocacy-lltco.pdf> [↑](#footnote-ref-49)
50. <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf> [↑](#footnote-ref-50)
51. <https://www.hhs.gov/about/strategic-plan/introduction/index.html> [↑](#footnote-ref-51)
52. 45 CFR Part 1324 Subpart A §1324.1 Definitions Long-Term Care Ombudsman Programs Final Rule [↑](#footnote-ref-52)