

State Long-Term Care Ombudsman Program

2025 Revised Primer for State Agencies



The National Long-Term Care
Ombudsman Resource Center

The **NATIONAL LONG-TERM CARE OMBUDSMAN RESOURCE CENTER (NORC)** provides support, technical assistance, and training to the 53 State Long-Term Care Ombudsman Programs and their statewide networks. The Center's objectives are to enhance the skills, knowledge, and management capacity of the State programs to enable them to handle residents' complaints and represent resident interests in both individual and systems advocacy. Funded by the Administration for Community Living (ACL), the Center is operated by The National Consumer Voice for Quality Long-Term Care, in cooperation with ADvancing States. *For more information, visit ltcombudsman.org or ombudcenter@theconsumervoice.org, 1025 Connecticut Ave., NW, Suite 1000, Washington, DC 20036.*

ADVANCING STATES was founded in 1964 under the name National Association of State Units on Aging (NASUA). In 2019, the organization changed its name to ADvancing States. Today, ADvancing States represents the nation's 56 state and territorial agencies on aging and disabilities and long-term services and supports directors. ADvancing States supports visionary leadership, the advancement of state systems innovation, and the articulation of national policies that support long-term services and supports for older adults and people with disabilities. ADvancing States' mission is to design, improve, and sustain state systems delivering long-term services and supports for older adults, people with disabilities, and their caregivers. *For more information, contact: ADvancing States, 241 18th Street South, Suite 403, Arlington, VA 22202, (202) 898-2578, Fax: (202) 898-2583, www.advancingstates.org.*

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Table of Contents

Contents

Introduction	5
Older Americans Act Requirements.....	8
Older Americans Act.....	8
Elder Rights and the Long-Term Care Ombudsman Program.....	9
Long-Term Care Ombudsman Program.....	10
Introduction To The Ombudsman Program Rule	12
The Ombudsman Program Rule: Key Provisions.....	14
Establishment of the Office of the State Long-Term Care Ombudsman	14
Policies and Procedures.....	15
Functions and Responsibilities of the State Long-Term Care Ombudsman.....	17
State Agency Responsibilities Related to the Ombudsman Program	21
Responsibilities of Agencies Hosting Local Ombudsman Entities.....	24
Duties of the Representatives of the Office	25
Conflicts of Interest	26
Unique Role and Responsibilities of Long-Term Care Ombudsman	29
The Ombudsman Program in a Changing Long-Term Services And Supports Landscape.....	34
Appendices	36
Appendix A: History of the Long-Term Care Ombudsman Program	37
Appendix B: Glossary Of Useful Terms.....	40
Appendix C: Acronyms	42
Appendix D: Resources	43

Appendix E: Fact Sheet: Long-Term Care Ombudsman Program.....	45
Appendix F: Infographic: Long-Term Care Ombudsman Program	46
Appendix G: Report: State Long-Term Care Ombudsman Programs: Organizational Structure	47

Introduction

Why an Ombudsman Program Primer for State Agencies?

Ombudsman: a Swedish word meaning agent, representative, or someone who speaks on behalf of another.

State Long-Term Care Ombudsman Programs serve as advocates for residents of nursing homes, board and care homes, assisted living and similar adult care facilities. They work to resolve individual residents' problems and improve residents' care and quality of life at the local, state, and national levels. Beginning in 1972 as a demonstration program, Ombudsman programs today exist in all states, the District of Columbia, Puerto Rico, and Guam, under the authorization of, and appropriations to implement, the Older Americans Act ([OAA](#)). These states and territories have an Office of the State Long-Term Care Ombudsman (the Office), headed by a full-time State Long-Term Care Ombudsman (the Ombudsman)¹.

This Primer is intended to support State Agency² Directors' understanding of the unique role of the State Long-Term Care Ombudsman Program. By Congressional intent, the administration and functions of the Ombudsman program are in many ways distinct from other programs administered by state agencies. For instance, the Long-Term Care Ombudsman Program (Ombudsman program) is a statewide program headed by the Ombudsman, who directs the Office and leads the Ombudsman program under an established set of policies and procedures. These federal provisions also mean that the Ombudsman program may not easily fit within a typical agency structure. While the Ombudsman may work as a state employee or under the direction of the State Agency director, the Ombudsman does have specific functions that require independence and autonomy. The Ombudsman's duties also require a good

¹ In this document, Ombudsman refers to the State Long-Term Care Ombudsman who heads the Office of the State Long-Term Care Ombudsman as stipulated in the OAA.

² The term State Agency, State Unit on Aging, State unit, and State agency are sometimes used interchangeably and have the same meaning.

working relationship among agencies that support the intent of the OAA as laid out in the statute and the implementing regulation for the Ombudsman program. The Ombudsman collaborates with the State Agency to design and implement an elder rights agenda within the aging network but must represent long-term care residents autonomously.

In 2015, the Administration on Aging (AoA), housed within the federal agency Administration for Community Living (ACL), promulgated the first federal rule specifically focused on the Ombudsman program and aimed to create greater alignment and consistency across state Ombudsman programs.³ The regulation clarifies and delineates the functions and responsibilities of the Ombudsman, Ombudsman program, and the State Agency, and articulates specific provisions for State Long-Term Care Ombudsman operations, such as conflict of interest and exemption from mandatory reporting requirements, among other key requirements. The rule was later updated in 2024 with minor revisions to ensure consistency with the OAA.⁴ For example, the rule clarified the authority and responsibilities of the Ombudsman, confidentiality requirements, and conflict-of-interest identification and remediation.

Throughout this Primer, you will find boxes titled **“For Consideration”**, **“Conversation Starters”** and **“Key Resources”** to highlight the program’s unique aspects and resources.

- **“For State Agency Consideration”** prompts may assist State Agency Directors to think through key points regarding State Agency responsibilities to the Ombudsman program.
- **“Conversation Starters with State Ombudsman”** invites State Agency Directors to initiate conversations with the Ombudsman.
- **“Key Resources”** identifies resources to assist with understanding and partnering with a State Long-Term Care Ombudsman Program.

³ 45 CFR §§ 1321 and 1324, <https://www.federalregister.gov/documents/2015/02/11/2015-01914/state-long-term-care-ombudsman-programs>. The Administration on Aging (AoA) of the Administration for Community Living (ACL) administers the State Long-Term Care Ombudsman Programs and other OAA programs.

⁴ 45 CFR § 1324 (2024), OAA Final Rule, <https://www.federalregister.gov/documents/2024/02/14/2024-01913/older-americans-act-grants-to-state-and-community-programs-on-aging-grants-to-indian-tribes-and>

Get to Know the Ombudsman

The Ombudsman has unique expertise and understanding of long-term care services and supports, offers an independent perspective, and has direct, open lines of communication with residents in long-term care facilities. Developing an understanding of the Ombudsman program work and communicating with them regularly gives the State Agency Director a compelling perspective of the consumer's experience with long-term supports and services.

Questions a State Agency Director can ask the Ombudsman include:

- What are the most common complaints the State Ombudsman receives from residents and their caregivers?
- What do you see as the most important advocacy issues?
- How often does the Ombudsman program visit facilities?
- Are resident and family councils available at each facility? What are the common concerns or issues presented at the meetings?
- How does the Ombudsman program support a resident who will be prematurely discharged or evicted?
- As a way to learn more about the Ombudsman program role and resident experiences, I would like to visit a facility with you or a representative; how can we do that while protecting your role and resident privacy?

Older Americans Act Requirements

Older Americans Act

In 1965, Congress enacted the Older Americans Act (OAA), establishing a federal agency and state agencies to address the social services needs of the aging population. While the general mission of the OAA is to help older adults maintain maximum independence in their homes and communities, in 1972, Congress established an Ombudsman demonstration program to help provide a source of independent support for nursing home residents. The Ombudsman program was added to the OAA in 1978 through an amendment that defined program functions and responsibilities and mandated that each state have an Ombudsman program. Unlike other OAA programs, the Ombudsman program focused solely on the needs of individuals living in long-term care facilities. The Ombudsman program provides information to consumers about their long-term care options, works to resolve problems on behalf of residents, and advocates for improvements in the long-term services and supports system. The Ombudsman program has several unique characteristics that distinguish it from other parts of the OAA. The OAA includes provisions to protect vulnerable elders by strengthening the Ombudsman program and elder abuse screening and prevention efforts.

While the OAA was reauthorized numerous times, the 2016 reauthorization had several provisions regarding the Ombudsman program, including clarification of these two functions:⁵

- The Ombudsman program has the authority to serve (and utilize OAA appropriations to serve) residents of long-term care facilities, regardless of age. Section 711(6) reads, “The term ‘resident’ means an individual who resides in a long-term care facility.”
- The responsibilities of the Ombudsman program expanded to include services to residents transitioning from a long-term care setting to a home or community-based setting. Section 712(a)(3) reads, “The Ombudsman... shall, personally or through representatives of the Office...(I) when feasible, continue to carry out the functions

⁵ This excerpt of the ACL frequently asked question on the OAA reauthorization is not a comprehensive review of all OAA reauthorization provisions. See <https://acl.gov/sites/default/files/about-acl/2017-04/OAA-Summary-Final.pdf> for a full review of the 2016 OAA reauthorization.

described in this section on behalf of residents transitioning from a long-term care facility to a home care setting.”

Ombudsman programs can determine feasibility based on having resources to provide services to individuals living in a home care setting during a transition period, without diminishing services to the resident population.⁶

The 2020 reauthorization clarified that Ombudsman programs are not prohibited from using funds to recognize volunteers that represent the Ombudsman program, or from reimbursing or providing financial support, for costs incurred while serving as a volunteer representative (e.g., transportation costs).⁷

Elder Rights and the Long-Term Care Ombudsman Program

Title VII of the OAA includes the Ombudsman programs (Chapter 2), Programs for Prevention of Elder Abuse, Neglect, and Exploitation (Chapter 3), and State Legal Assistance Development Program (Chapter 4). These sections are linked together under Elder Rights to emphasize multi-disciplinary and collaborative approaches to promoting the health, safety, welfare, and rights of long-term care residents and support the State agency’s coordination of programs [to address elder abuse, neglect and exploitation] with other state and local programs and services for the protection of vulnerable adults.⁸

The goal of the State Long-Term Care Ombudsman Program, legal assistance, and the elder abuse prevention programs are to develop strong linkages, both inside and outside the traditional aging network, to support older persons’ advocacy needs. In developing an elder rights system, each state is required to:

- Obtain the views of older adults, Area Agencies on Aging (AAAs), service providers, and other interested persons and entities regarding Title VII programs;
- Identify and prioritize statewide elder rights activities;⁹ and

⁶ ACL Frequently Asked Questions on the 2016 OAA Reauthorization. See <https://acl.gov/sites/default/files/about-acl/2017-04/2016-OAA-FAQs.pdf>.

⁷ Section 712 (a)(5)(A)

⁸ Section 721(d) of the Act. Under Title VII, grants are provided to State agencies for preventing and remedying elder abuse, neglect, and exploitation.

⁹ Section 705 of the Act.

- Coordinate Ombudsman services with legal assistance provided under section 306(a)(2)(C) through adoption of memoranda of understanding.¹⁰

Throughout their history, Ombudsmen have built skillful coalitions and successfully negotiated agreements with a variety of agencies and programs and involved residents and families in developing their advocacy agenda. This creates an interesting dynamic as the Ombudsman partners with the state to design and implement an elder rights agenda and administer a program within the aging network but is also responsible for independently representing long-term care residents.

Long-Term Care Ombudsman Program

The OAA calls upon the Ombudsman to undertake official duties of the Office and work pursuant to the Long-Term Care Ombudsman Program. Additionally, the Ombudsman must be responsible for the management, including the fiscal management, of the Office of the Ombudsman and personally or through representatives of the Office:

- Identify, investigate, and resolve complaints made by or on behalf of residents;
- Provide information to residents about long-term services and supports (LTSS);
- Ensure that residents have regular and timely access to Ombudsman program services;
- Represent the interests of residents before governmental agencies and seek administrative, legal, and other remedies to protect residents;
- Analyze, comment on, and recommend changes in laws and regulations pertaining to the health, safety, welfare, and rights of residents;
- Promote the development of and assist citizen advocacy groups that want to protect the well-being and rights of residents; and
- Provide technical support for the development of resident and family councils to protect the well-being and rights of residents.¹¹

¹⁰ Section 712 of the Act. The 2024 OAA regulation mandates State Ombudsman programs have a memorandum of understanding (MOU) with legal assistance programs under 306(a)(2)(C) of the Act addressing referral processes and strategies to be used when the Ombudsman program and a legal assistance program are both providing program services to a resident (§ 1324.13 (h)(1)(i)). State Ombudsman Programs may have MOUs with Legal Assistance Developers, Adult Protective Services, and other entities.

¹¹ This is a broad overview of the functions and responsibilities. For specific details, see Section 712, State Long-Term Care Ombudsman Program of the Older Americans Act, and [45 CFR 1324.13](#), *Functions and responsibilities of the State Long-Term Care Ombudsman*.

Many individuals living in long-term care facilities, as well as their family members, may not have regular access to the internet, so it is likely Ombudsman programs will need to make resources and information available in print (e.g., fact sheets regarding resident rights, posters about the Ombudsman program).

Introduction To The Ombudsman Program Rule

The State Long-Term Care Ombudsman Program is governed by the federal regulation at 45 C.F.R. Part 1324 which outlines the structure, functions, and conflict of interest standards for ombudsman services. The functions of the Ombudsman program have been outlined in the OAA since the program's creation in the 1970s; however, regulations were not promulgated specifically focused on States' implementation of the program. In the absence of regulation, there was significant variation in the interpretation and implementation of these provisions among states. The State Long-Term Care Ombudsman Program rule, published in February 2015, became effective on July 1, 2016, and was updated in 2024 as part of the OAA regulation.

Purpose of the Rule: Administration for Community Living Perspective

“AoA believes that consumers (particularly residents of long-term care facilities) and long-term care providers will benefit from the implementation of this rule. Consumers and other complainants across the country will receive services from Ombudsman programs with more consistent quality and efficiency of service delivery. For years, States, Ombudsmen, and representatives of the Offices of State Long-Term Care Ombudsmen have reported to AoA that they have found some provisions of the Act confusing to implement. This rule seeks to provide the clarity that Ombudsman program stakeholders have requested.”

Administration on Aging/Administration for Community Living, preamble of the Long-Term Care Ombudsman Program Rule, 7704 Federal Register/Vol. 80, No. 28/ Wednesday, February 11, 2015 / Rules and Regulations

The State Long-Term Care Ombudsman Program rule addresses:

- Responsibilities of key figures in the system, including the Ombudsman and representatives of the Office of the Ombudsman;
- State agency responsibilities related to the Ombudsman program;
- Responsibilities of the entities in which Ombudsman programs are housed;

- Criteria for establishing consistent, person-centered approaches to resolving complaints on behalf of residents, including the role of Ombudsman programs in resolving abuse complaints; and
- Processes for identifying and remedying organizational and individual conflicts of interest so that residents have access to effective, credible Ombudsman services.

Key Resources

This Primer does not intend to cover all aspects of the Ombudsman program rule or the Older Americans Act. Visit the National Long-Term Care Ombudsman Resource Center (NORC) [website](#) for additional resources.

The Ombudsman Program Rule: Key Provisions

This rule guides the implementation of the portions of the OAA governing grants to states for administering Ombudsman programs.¹²

Program Structure

Visit NORC's Ombudsman Program Structure and Management page for more information, including the State Long-Term Care Programs: Organizational Structure at ltcombudsman.org.

Establishment of the Office of the State Long-Term Care Ombudsman

The rule, in accordance with the OAA, requires the State agency to establish the State Long-Term Care Ombudsman Office as a “distinct entity” that is “separately identifiable” to provide ease of access for residents and complainants and to effectively meet other statutory requirements of the Office. The State agency may establish and operate the Office, and carry out the program, directly, or by contract or other arrangement with any public agency or nonprofit private organization.

¹² This overview does not cover all provisions of the regulation, to view the full regulation, see [45 CFR 1324](https://www.ecfr.gov/current/title-45/chapter-I/subchapter-A/part-1324).

Conversation Starters with State Ombudsman: Ombudsman Program Structure

What are your program's strengths and weaknesses regarding:

- Visibility and accessibility of the program?
 - How do individuals contact the program?
 - Is there a direct link to the program on your agency's website?
 - What information is shared with residents and the public?
 - How often do Ombudsmen visit facilities?
- Conflicts of interest with other entities?
 - Are there any organizational conflicts of interest?
 - If the State Unit on Aging is within a larger organization, which might include Medicaid or Adult Protective Services (APS), what safeguards have been established to ensure autonomy of the Ombudsman program?

What efforts has the program made to address identified weaknesses?

What structural changes could the program or agency make to address such weaknesses?

What are the benefits and challenges regarding program effectiveness and collaboration in the current structure?

Policies and Procedures

Policies and procedures specify how the Ombudsman program is carried out in accordance with the Act. Some states convey legal authority upon the Ombudsman to establish policies and procedures, in consultation with the State agency. In states that do not have a law that provides the Ombudsman with legal authority to establish policies and procedures, the Ombudsman shall recommend policies and procedures to the State agency or other agency in which the Office is organizationally located, and such agency shall establish Ombudsman program policies and procedures. The development of policies and procedures must include consultation with the agencies hosting local Ombudsman entities, such as AAAs and representatives of the Office.

The policies and procedures must address the following provisions:

- **Program administration** to monitor local Ombudsman entities by the Ombudsman; standards of promptness for complaint responses; and procedures for standard retention periods for records and other information.
- **Procedures for access** to facilities, residents, and appropriate records, including when the resident is unable to communicate consent and does not have a legal representative;
- **Procedures for disclosure**
 - Disclosure of identifying information of any resident about whom the program has files, records, or information is prohibited unless there is resident consent or a court order.
 - Must identify criteria for disclosure of resident information when the resident is unable to provide consent and does not have a legal representative.
 - Must address steps required to disclose resident identifying information for purposes of complaint resolution.
 - Must clarify that the files, records, and information maintained by the Ombudsman program may be disclosed only at the discretion of the Ombudsman.
 - Must exclude the Ombudsman and representatives of the Office from abuse, neglect, and exploitation reporting requirements, including when such reporting would disclose identifying information of a complainant or resident without appropriate consent or court order.
- **Conflicts of interest** (both individual and organizational) for Ombudsmen and representatives, and for program placement at the state and local level.
- **Systems advocacy** requires the Office to have sufficient authority to carry out its statutory responsibilities to monitor, comment on, and analyze Federal, State, and local laws and regulations, as the Office determines is appropriate, and regardless of State lobbying laws.
- **Designation** by establishing criteria and the process by which the Ombudsman shall designate and refuse, suspend, or remove designation of local Ombudsman entities and representatives of the Office.
- **Grievance process** to describe the receipt and review of grievances regarding the determinations or actions of the Ombudsman and representatives of the Office.
- **Emergency planning**, including continuity of operations procedures.
- **Determinations** of the Office the Ombudsman, as head of the Office, to independently make determinations and establish positions of the Office and carry out the functions and responsibilities authorized by 45 CFR § 1324.13 without interference and not be constrained by or necessarily represent the determinations or positions of the State agency or other agency in which the Office is organizationally located.

Conversation Starters with State Ombudsman: Policies and Procedures

- In your state, does the Ombudsman have the legal authority to establish policies and procedures?
- Does the Ombudsman make determinations, establish positions of the Office, and carry out the responsibilities independently and without representing the positions of the State agency or other agency in which the Office is located?
- Are there any remaining policies and procedures to complete?
- Are there any roadblocks to achieving full implementation of the Ombudsman program regulation?
- Have representatives of the Office and local Ombudsman entities (if applicable) received training on the program policies and procedures?
- If the Ombudsman program is contracted to another government entity or non-profit, how does the State Unit on Aging ensure the appropriate policies and procedures are in place?

Functions and Responsibilities of the State Long-Term Care Ombudsman

The Ombudsman, as head of the Office, is responsible for and has the authority to lead and manage the Office in coordination with the State agency, and, where applicable, any other agency carrying out the Ombudsman program. This management includes programmatic oversight of the local Ombudsman entities and representatives of the Office.

Functions and Responsibilities

In addition to the complaint investigation and systems advocacy previously described, the Ombudsman, as head of a unified statewide program, is responsible for a variety of programmatic functions. The Ombudsman must:

1. Require representatives of the Office to fulfill the duties in accordance with Ombudsman program policies and procedures.
2. Establish or recommend policies, procedures, and standards for administration of the Ombudsman program.
3. Determine the use of the fiscal resources appropriated or otherwise available for the operation of the Office.

4. Designate local Ombudsman entities, staff, and volunteer representatives of the Office, including the following programmatic requirements:
 - Review and approval of plans or contracts governing local Ombudsman entity operations, including, where applicable, through AAA plans, in coordination with the State agency.
 - Monitor local Ombudsman entities.
 - Establish staff and volunteer certification training requirements for purposes of designation, following ACL/AoA training standards.
 - Investigate allegations of misconduct by representatives of the Office.
 - Implement procedures for refusal, suspension, or removal of the designation of entities and representatives.

Conversation Starters with State Ombudsman: Program Management

- Do all individuals who may need Ombudsman program services have access to the program?
- What is your standard of timeliness?
- Do they receive timely responses to their complaints?
- Within the past year, what has the Ombudsman program done to try to address consumer access to the program?
- Are there standards in place for representatives of the Office to submit timely documentation of complaints and activity data?
- Do you see differences in complaint trends between nursing homes and residential care communities? If you do, how do you and the Ombudsman understand the differences?
- How does the Ombudsman determine the use of fiscal resources appropriated or otherwise available for the operation of the Office?
- What can the State agency do to support the program's efforts?

Reporting to the Assistant Secretary for Aging: National Ombudsman Reporting System

States fulfill their obligation to report to the Assistant Secretary by reporting their National Ombudsman Reporting System (NORS) data in the ACL-approved software-reporting system. NORS data includes numeric data on cases, complaints and program activities and narratives on systems issues, complaint examples and organizational conflicts of interest identification and remedies.

For State Agency Consideration: Data

- Are there opportunities for the State agency to utilize NORS data in developing state plan goals and objectives?

Conversation Starters with State Ombudsman: Data

- How is NORS data used for advocacy and program management?
- What would improve your ability to use NORS data for advocacy and program management?
- What types of trends (complaints, visits, volunteer numbers, etc.) have you identified?

Annual Report

In addition to the annual submission of the NORS report, the Ombudsman is to independently develop, provide final approval of, and disseminate an annual report.¹³ The report is to be available to the public and submitted to the Assistant Secretary, the Governor, the State Legislature, the State Agency, the State Licensing and Certification Agency, and other appropriate entities. The report must:

- Describe the activities carried out by the Office in the year for which the report is prepared;
- Contain analysis of Ombudsman program data;
- Describe evaluation of the issues experienced by, and the complaints made by or on behalf of residents;

¹³ Section 712(h) of the OAA and 45 CFR § 1324.13(g).

- Contain policy, regulatory, and/or legislative recommendations for improving quality of the care and life of the residents; protecting the health, safety, welfare, and rights of the residents; and resolving resident complaints and identified problems or barriers;
- Contain analysis of the success of the Ombudsman program, including success in providing services to residents of assisted living, board and care facilities, and other similar adult care facilities; and
- Describe barriers that prevent the optimal operation of the Ombudsman program.

Coordination with Other Entities

The Rule specifies that the State Ombudsman shall lead State-level coordination and support local Ombudsman entity coordination with other entities, such as OAA-funded legal assistance providers, Protection and Advocacy Systems, and the State Licensing and Certification Agency, but the nature of that coordination may vary. While memoranda of understanding (MOUs) are a common approach to clarify and formalize a working relationship between entities, they may not be the best mechanism to promote successful coordination in every instance. However, the 2024 OAA regulations specifically require the adoption of MOUs with respect to coordination with two entities: Title IIIB legal assistance providers and the facility and long-term care licensure and certification programs.

Key Resources

Visit NORC's [website](#) for additional resources regarding collaboration with other entities, including two toolkits: *Long-Term Care Ombudsman Programs and Legal Assistance Developers Collaboration Toolkit* and *Long-Term Care Ombudsman Programs and Protection & Advocacy Agencies Collaboration Toolkit*.

Conversation Starters with State Ombudsman: Coordination with Other Agencies

- Does the program have the required Memoranda of Understanding (MOUs) with OAA-funded legal assistance programs and the facility and long-term care licensure and certification programs?
- Does the program have MOUs with other programs or agencies to ensure each program understands what services each can provide and how and when they will work together (e.g., APS, Protection and Advocacy)?
- How does the Ombudsman program work with other state agencies or programs? Can you share examples of coordination with each of these entities?
- What barriers have been identified that prevent the program from working more closely with regulatory agencies and other advocacy programs?
- What can the State agency do to facilitate a coordinated advocacy approach?

State Agency Responsibilities Related to the Ombudsman Program

The State agency has distinct responsibilities to the program, including assurance of Ombudsman compliance with the OAA and the rule, and that the Ombudsman program has sufficient authority and access to facilities, residents, and information needed to perform the functions, responsibilities, and duties of the Office (45 CFR §1324.15).

The State Agency is to Provide:

- Training opportunities—a State agency may utilize Title IIIB and Title VII funding for this purpose;
- Personnel supervision and management for the Ombudsman and representatives of the Office who are employees of the State agency, including assessment of Office fulfillment of functions;
- Contract monitoring, including fiscal monitoring, where the Office and/or local Ombudsman entity is located within another agency or organization, and may request reports of aggregated program data for this purpose; and,
- Notice of all sources of funds received by the State agency allocated or appropriated to the Ombudsman program, and the Ombudsman has full authority to determine the use of funds for the Office, including local Ombudsman entities.

Additionally, the State agency is to ensure—regardless of the organizational placement of the Office—that:

- Reviews of files, records, or other information maintained by the Ombudsman program are consistent with the rules governing disclosure limitations;
- It has mechanisms to prohibit and investigate allegations of interference, retaliation, and reprisals regarding Ombudsman program duties and provide for sanctions;
- The Ombudsman program has authority and access to facilities, residents, and information needed to perform the duties of the Office;
- Legal counsel for the program is adequate, available, and without conflict of interest.
- The agency provides the Ombudsman with verifiable expenditure information, and the Ombudsman determines that the program budgets and expenditures of the Office and local Ombudsman entities are consistent with laws, policies, and procedures governing the Ombudsman program; and,
- The Office is to provide final approval of the annual report.

NORC hosts an annual national training conference for State Ombudsmen and provides orientation training for new State Ombudsmen. The OAA states that the State Agency must “ensure that the Ombudsman or a designee participates in training provided by the National Ombudsman Resource Center” [OAA Section 712 (h)(4)].

Although many of the functions of the Ombudsman program by their very nature are to be autonomous from other State agency operations, there are important prescribed functions for the State agency concerning the program. For example, the OAA requires the State agency to ensure that the Ombudsman sets expectations for both staff training and monitoring of local Ombudsman entities.

Conversation Starters with State Ombudsman: Program Monitoring

- What is your assessment of the quality of the Ombudsman program in our state?
 - What efforts has the program made to involve consumers and other stakeholders in assessing program effectiveness and quality?
- How can the program improve the quality of services?
- Do you routinely review NORS data to ensure data quality?

For State Agency Consideration

- As the State Agency Director, how do you assess whether the Ombudsman program is performing all the functions, responsibilities, and duties required of the Ombudsman and representatives of the Office?
- Do you request aggregate data from the Ombudsman (for example, monthly or quarterly reports for monitoring purposes)?

Legal Counsel

Specific State agency requirements related to legal counsel include:

- Legal representation of “any representative of the Office against whom suit or other legal action is brought or threatened to be brought in connection with the performance of the official duties.” (OAA Section 712(g)(1)(B); 45 CFR 1324.15(j)(1)(i)(A)).
- Legal counsel that is “adequate, available, is without conflict of interest...and has competencies relevant to the legal needs of” the program to provide consultation and/or representation as needed to “assist the Ombudsman and representatives of the Office in the performance of their official functions, responsibilities, and duties, including complaint resolution and systems advocacy” and of residents to “provide consultation and representation as needed for the Ombudsman program to protect the health, safety, welfare, and rights of residents” (OAA Section 712(g)(1)(A); 45 CFR 1324.15(j)(1)(i)(A) and (B)).

Depending on identified programmatic needs, examples could include legal advice related to:

- Developing programmatic policies or legal documents (e.g., program regulations, contracts, and policy and procedure manual reviews);

- Systems advocacy on behalf of resident interests (e.g., review of legislation, drafting of recommended legislative or regulatory language);
- Complaint resolution for complex cases, including those that involve legal issues; and,
- Advice, drafting responses, and/or representation in response to formal requests for disclosure of program information (e.g., depositions, subpoenas, interrogatories, public records requests).

The Ombudsman, in coordination with the State agency, may beneficially assess their programmatic needs for legal assistance and determine unmet needs for access to adequate, available, competent, and conflict-free legal counsel. It is possible that one law firm or attorney can best serve the Ombudsman program's legal needs. Alternatively, the Ombudsman program may need to access legal services from a variety of sources depending on the legal needs. Merely having an Ombudsman or representative of the Office who is a licensed attorney is not sufficient by itself to meet the requirements of the Rule.¹⁴

Responsibilities of Agencies Hosting Local Ombudsman Entities

States with local Ombudsman entities may divide some responsibilities between the host agency and the Ombudsman. For example, the host agency may retain the authority over the personnel functions of the agency, such as hiring and firing. However, the Ombudsman must have responsibility for the programmatic functions of the Ombudsman program, including designation and de-designation of representatives of the Office.¹⁵

Representatives of the Office, including those hired by (or volunteers managed by) a local Ombudsman entity, are to be accountable to the head of the Office (i.e., the Ombudsman) for purposes of Ombudsman program operations. For example, they must follow the policies, procedures, and guidance of the Ombudsman regarding complaint processing and other Ombudsman program activities. In addition, the Ombudsman must provide technical assistance to representatives of the Office. (OAA Section 712(a)(3)(F); 45 CFR 1324.13(a)(6)).

¹⁴ 45 CFR 1324.15(j)(3)).

¹⁵ ACL Frequently Asked Questions (FAQ) <https://acl.gov/programs/long-term-care-ombudsman/long-term-care-ombudsman-faq> and 45 § CFR 1324.17.

Duties of the Representatives of the Office

Through designation, both paid, and volunteer representatives of the Office address complaints and must follow the program's policies and procedures about receiving and resolving complaints. Representatives of the Office are typically the "eyes and ears" of the Ombudsman program, addressing resident complaints; supporting resident and family councils; and educating residents, families, facility staff, and other stakeholders on resident rights, quality care, and similar matters. This unique role allows the Ombudsman to expand the reach of the program throughout the state.

A key duty of representatives of the Office is to identify, investigate, and resolve complaints made by or on behalf of residents. The Ombudsman program rule clarifies many aspects of complaint handling to support the representatives of the Office in conducting person-centered problem solving and complaint resolution.

The 2015 and 2024 Ombudsman rules clarify the Ombudsman program role related to abuse, neglect, or exploitation complaints where residents are unable to communicate informed consent; it also provides guidance on what to do when the Ombudsman or representative of the Office personally witnesses abuse. These provisions support the Ombudsman program to assist those residents in need of intervention to address suspected abuse, neglect or exploitation.

Person-Centered Complaint Processing Approach

The Ombudsman or representative of the Office shall support and maximize resident participation by:

- Offering privacy;
- Discussing the complaint with the resident (and/or resident's representative) in order to:
 - Determine the perspective of the resident;
 - Request informed consent in order to investigate the complaint;
 - Determine the wishes of the resident with respect to the resolution of the complaint;
 - Disclose information to the facility and/or outside agencies;
 - Advise the resident of his/her rights;
 - Work with the resident to develop a plan of action for resolution of the complaint;
 - Determine whether the complaint can be verified; and

- Determining whether the complaint is resolved to the resident's satisfaction.¹⁶

The Ombudsman program can work *with the appropriate resident representative* if a resident is unable to communicate consent.

The Ombudsman program has the authority to work to resolve complaints (and disclose relevant information) when the resident is unable to communicate informed consent and has no resident representative available to do so.

If a resident is unable to communicate informed consent, the representative of the Office may refer and disclose resident-identifying information to appropriate agencies under certain criteria and with the consent of the Ombudsman.

Conflicts of Interest

The State Agency and the Ombudsman are responsible for identifying conflicts that “may impact the effectiveness and credibility of the work of the Office” [§1324.21]

The Ombudsman program rule requires the establishment and implementation of policies and procedures related to conflicts of interest, including a process to identify and remove or remedy conflicts of interest. The purpose is described in the Ombudsman program rule preamble which states, “We believe that the approach we have taken in the final rule at §1324.21, which provides for annual identification of organizational conflicts and description of steps taken to remedy or remove conflicts, will provide an orderly process that will implement the requirements of the Act, enhance transparency, avoid burdensome reporting requirements on Ombudsman programs, and emphasize the importance of States providing credible, conflict-free Ombudsman programs for residents.”¹⁷

¹⁶ 45 CFR 1324.19(b)(ii)

¹⁷ ACL/AoA Long-Term Care Ombudsman Program rule preamble (80 FR 7703, February 11, 2015)

For State Agency Consideration: Conflicts of Interest

- Does program monitoring include a review of conflicts of interest screening tools, both individual and organizational?
- Does the State agency need to enact any organizational or procedural restructuring to ensure proper firewalls exist between the Ombudsman program and other programs?

The Rule Requires Five Steps Regarding Organizational Conflicts of Interest

1. Avoid conflict of interest prior to designating or renewing designation for both the State Office and the local Ombudsman entities.
2. Establish a process for periodic review and identification of conflicts of interest.
3. Require disclosure of conflict of interest and steps taken to remove or remedy.
4. Establish criteria and process for review and approval of steps to remedy or remove the conflict of interest.
5. Report identified conflicts and remedies through NORS.

Prohibited Conflict of Interest—those that cannot be remedied

Placement of the Office in the organization that:

- Is responsible for licensing, surveying or certifying long-term care facilities;
- Is an association (or an affiliate of such an association) of long-term care facilities; or
- Has ownership, operational, or investment interest in a long-term care facility.

The Rule Requires Four Steps Regarding Individual Conflicts of Interest

1. Establish and implement conflict of interest policies and procedures.
2. Identify conflicts of interest.
3. Avoid appointing or designating individuals with a conflict of interest.
4. Remove or remedy the conflict.

The State agency or Ombudsman must ensure that no individual, or member of the immediate family of an individual, involved in the designating, appointing, or otherwise selecting or terminating the Ombudsman is subject to a conflict of interest.

Prohibited Individual Conflict of Interest

For Ombudsman: Has been employed by or participated in the management of a long-term care facility within the previous twelve months.

For representatives of the Office: Current employment, receipt of, or right to receive remuneration from a facility or its management.

- Has direct involvement in licensing, surveying, or certifying long-term care facilities.
- Has ownership, operational, or investment interest in a long-term care facility.

Conversation Starters with State Ombudsman: Conflicts of Interest

Organizational Conflicts of Interest

- How do the State agency and the Ombudsman consider both the organizational and individual conflicts of interest that may affect the effectiveness and credibility of the work of the Office, including the local Ombudsman entities?
- What are the program's strengths and weaknesses regarding any conflicts of interest with other state agencies such as state licensing agencies, APS?
- What efforts has the program made to address any weaknesses?

Individual Conflicts of Interest

- Does the program, including local Ombudsman entities where applicable, have established conflict of interest policies and procedures?
- Do the policies and procedures include mechanisms, such as screening questions on applications, interview questions, disclosure of conflicts form to assist with identification of conflicts?
- Do the policies and procedures outline mechanisms to remove or remedy the conflicts?

Unique Role and Responsibilities of Long-Term Care Ombudsman

The State agency will have situations where the Ombudsman's responsibility and authority to advocate directly for long-term care residents might conflict with the views of the State agency. It is important to note that this aspect of Ombudsman work is common and occurs in many other kinds of Ombudsman programs around the world (e.g., business Ombudsman, college Ombudsman, government Ombudsman, etc.¹⁸).

When necessary, education to other state agencies and/or the governor's office can provide a full understanding of the unique role the Ombudsman has in making recommendations, which may differ from others in state government. This applies equally to Ombudsman programs that are not part of state government. Regardless of the organizational structure, State agencies must enable the Ombudsman to fulfill all of the functions of the State Long-Term Care Ombudsman.

Both born from the Older Americans Act, State Ombudsman offices and State Units on Aging share a common history. We recognize our roles as advocates and administrators, and we work collaboratively as well as independently. I deeply value that relationship. In an increasingly complex and aging world, knowing how State Ombudsman and State Aging Directors can strengthen our abilities to empower residents is necessary to support America's aging network. Together, we can elevate the voices of millions of current and future generations of older Americans."

—Ursel J. McElroy, Ohio State Aging Director and ADvancing States Vice President

Systems Advocacy—An Independent Voice

In addition to individual problem resolution, Ombudsman programs advocate for resident interests in public policy arenas. The OAA requires the Ombudsman to analyze, comment on, and recommend changes in laws, regulations, and government policies and actions to benefit residents. Ombudsmen commonly refer to this responsibility as "systems advocacy."

¹⁸ Julie C. Smith and Charles L. Howard, "Understanding the Types of Ombudsman: A Starter Guide" *Ombudsassociation.org*, accessed February 19, 2025.
https://www.ombudsassociation.org/assets/docs/Chuck-Howard-Publications/2015_Understanding-the-Types-of-Ombudsman-a-Starter-Guide.pdf

A state's policies and procedures must assure that the Office of the State Long-Term Care Ombudsman is required and has sufficient authority to carry out its responsibility to, among other things, recommend changes to laws, regulations, and policies as the Office determines to be appropriate.¹⁹ Such procedures must exclude the Ombudsman and representatives of the Office from any state lobbying prohibitions to the extent that such requirements are inconsistent with section 712 of the Act.

The Ombudsman must fulfill other functions related to systems advocacy, including “leadership to statewide systems advocacy efforts of the Office ... including coordination of systems advocacy efforts carried out by representatives of the Office.”²⁰

Examples of Ombudsman Systems Advocacy Strategies

- Initiating dialogue with policymakers, agency heads, legislators, and their staff regarding identified problems for residents that require a system level resolution
- Responding and actively engaging in legislative and regulatory proposals
- Submitting written comments on state/federal regulations
- Testifying at legislative committee meetings or public hearings
- Providing information to the media and others about the problems and concerns of residents and recommendations

Systems Advocacy in Practice

Advocacy and representing the interests of residents at the state, local, and federal level can include many concerns about the actions or inactions of a wide variety of entities that can positively or negatively affect a resident's health, safety, or welfare. The Ombudsman not only engages in systems advocacy at a local and state level but also must be aware of policies from a national perspective, which may impact individuals receiving long-term care services and the state. The National Association of State Long-Term Care Ombudsman Programs (NASOP) helps inform State Ombudsmen of national long-term services and supports issues and opportunities for advocacy.

Ombudsmen report their systems advocacy agenda, barriers, and resolution strategies in the National Ombudsman Reporting System (NORS) each year. For example, inappropriate eviction

¹⁹ Older Americans Act Section 712(h)(2); 45 CFR 1324.11(e)(5)

²⁰ 45 CFR 1324.13(a)(7)(iv)

and discharge are commonly reported.²¹ Ombudsman programs support individual residents in opposing eviction and work to address the root causes through systems advocacy.

Examples of ways Ombudsmen support residents through system advocacy include:

- Developing task forces, proposing legislation, speaking with the media to educate the public.
- Training both hospital social workers and long-term care facility staff on relevant requirements.
- Training residents and their families about their rights regarding discharge and transitioning out of a long-term care facility.

Conversation Starters with State Ombudsman: Systems Advocacy

- Within the past year, what systems advocacy activities have the Ombudsman initiated or accomplished?
- What is the Ombudsman program's advocacy agenda for the current year?
- How is the advocacy agenda developed?
- Are there barriers to Ombudsman program (state and local level) participation in advocacy (e.g., speaking with legislators, the media, and the public)?
- If so, what are they?
- What would it take to remove the barriers?
- Describe your leadership strategies to coordinate and generate participation in systems advocacy with Ombudsman program representatives.
- What can the State agency do to improve the program's ability to engage in systems advocacy?

Many Ombudsmen and State agency Directors find clear communication about public policy and legislative issues to be central to a successful working relationship. In many cases, they will work together to strategize on how to support the program's priorities on behalf of individuals living in long-term care facilities. In some cases, State agency Directors work to educate other state agencies and Governors' offices about the Ombudsman program and its positions on specific legislative issues.

²¹ The National Long-Term Care Ombudsman Resource Center, *National Ombudsman Reporting System (NORS) Data*. Available at https://ltcombudsman.org/omb_support/nors/nors-data.

Home and Community-Based Services

Key Resources: Systems Advocacy

Visit NORC's [website](#) for additional information and examples of systems advocacy, including a resource titled "Role and Responsibilities of Ombudsman Programs Regarding Systems Advocacy." There are separate versions for Ombudsmen and representatives of the Office.

The Ombudsman Program in a Changing Long-Term Services and Supports Landscape

The role of the Ombudsman in the planning of a modernized system of LTSS continues to evolve. As states transform their long-term care services with a focus on person-centered community settings, the role of the Ombudsman program may expand. The role of the Ombudsman has been to hold systems accountable to fulfill their responsibilities to residents. The potential role for the Ombudsman program in this expanding LTSS system could be the same, ensuring that the systems that are in place work towards assuring safety and quality for consumers. Ombudsman programs have a knowledge base and skill set that can be helpful to consumers both in resolving issues for individuals and in shaping long-term care policies in a variety of settings and services. It should be noted that funds from the OAA for the Ombudsman program may not be used to provide services for consumers residing in independent living communities or in their own homes except when feasible on behalf of residents transitioning from a long-term care facility to a home care setting. States which have developed Home and Community Ombudsman Programs have done so with state funding.

Home and Community-Based Settings Rule

Medicaid home and community-based services (HCBS) programs provide LTSS to individuals residing at home or in community-based residential settings, such as assisted living facilities.

The HCBS Settings Rule is a federal regulation that requires states to ensure individuals receiving services and supports through Medicaid HCBS programs do so in an integrated community setting. The rule includes additional requirements for provider-owned or controlled home and community-based residential settings. These requirements encompass such protections as assuring resident privacy in their unit, including lockable doors, choice of roommates, and freedom to furnish or decorate the unit; controls over schedules; access to food at any time; and access to visitors, to name a few. These requirements give Ombudsman programs a framework that may add additional advocacy and complaint handling to ensure that residents in these residential settings benefit from this regulation. There are also opportunities for Ombudsman programs to provide comments on state waiver proposals and compliance plans.

Conversation Starter: Role of the Ombudsman Program in HCBS

- What can the Ombudsman program do within its current federal responsibilities relevant to HCBS, nursing home diversions, and nursing home transitions?

Managed Long-Term Services and Supports Ombudsman

In 2013, the Centers for Medicare & Medicaid Services (CMS) began requiring states, as a condition of approving any new 1915(b) or 1115 waiver implementing a managed long-term services and supports (MLTSS) program, to establish a member Ombudsman program. It is one part of a comprehensive “independent consumer support” system that must provide pre-enrollment assistance as well as post-enrollment assistance.

Less than ten states have embedded this function in their Long-Term Care Ombudsman program, recognizing the functional similarities between the two services. This placement allows states to utilize existing infrastructure, such as toll-free phone lines, websites, and tracking databases, while adding additional staff with expertise in community-based services and managed care.

Generally, the Ombudsman program coordinates with other advocacy entities to provide this Ombudsman service in accordance with their jurisdiction and area of expertise. The Ombudsman program addresses the concerns of MLTSS enrollees living in facility settings, while other entities provide services to address the concerns of MLTSS enrollees who are not living in long-term care facilities.

For State Agency Consideration: Extending the Role of the Ombudsman Program to HCBS

- Prior to extending the role of the Ombudsman program, does the Ombudsman program have adequate resources to ensure timely access to services for residents in nursing facilities and residential care communities?
- Is your state considering MLTSS? If so, is the Ombudsman program under consideration to provide MLTSS Ombudsman services?
- Has the state considered extending Ombudsman program services into non-facility HCBS settings such as home care and adult day services?
- What are some reasons for or against extending services beyond facility-based settings?
- What policy and procedural changes would be necessary, e.g., statutory authority, staffing, funding, protections against conflict of interest, if the Ombudsman Program services were to include HCBS?

Key Resources

Visit NORC's website for additional information on HCBS, LTSS/MLTSS and the Ombudsman program. <https://ltombudsman.org/>

This Primer is a starting point to improve your understanding of the distinct provisions of the Long-Term Care Ombudsman program and to provide technical assistance in support of effective and credible Ombudsman programs. The resources in the appendix provide further details on all aspects of the Ombudsman program, allowing for deeper exploration. The complexities of the Ombudsman program are vast; do not hesitate to call upon the National Ombudsman Resource Center, ADvancing States, or ACL/AoA when questions arise.

Appendices



The National Long-Term Care
Ombudsman Resource Center

Appendix A: History of the Long-Term Care Ombudsman Program

- 1970s** The Nursing Home Ombudsman Program is created as part of President Nixon’s initiative to improve conditions and respond to widespread reports of resident abuse in the nation’s nursing facilities. The initiative started as a demonstration program to test its effectiveness, and by the late 1970s, all states were required to have Ombudsman programs as a requirement of the Older Americans Act (OAA).
- 1980s** The Ombudsman program expanded in the 1980s to include board and care as well as other similar adult care facilities. Clarifying language was included into the OAA in the late 1980s to ensure that the Ombudsman program’s access to long-term care facilities, residents and access to resident and facility records. The amendments also provided immunity from liability to the Ombudsman and representatives of the Office who were acting in “good faith” in the performance of their duties. The program was also renamed the Long-Term Care Ombudsman Program to reflect its expanded scope.
- 1990s** The 1992 amendments to the OAA created the Vulnerable Elder Rights title, Title VII of the OAA. Title VII focused renewed attention on the individual and collective advocacy functions of the aging network and recognized the unique role played by each of the four advocacy programs: Ombudsman, elder abuse prevention, legal assistance, and benefits counseling. Title VII emphasized the benefit of a coordinated advocacy approach to address older persons’ understanding and exercise of their rights and access to assistance with problems they encounter. The 1992 amendments included the creation of an Office of the State Long-Term Care Ombudsman (the State Ombudsman Office) and some clarification of conflicts of interest.
- 2000s** The 2000 OAA amendments included specific language that prohibited Ombudsmen entities and representatives of the Office from financial gain through an action or potential action brought on behalf of individuals they served. It also required coordination of the program with state and local law enforcement agencies. The OAA amendments retained and updated

ombudsman provisions in Titles II, III and VII, including specific conflict of interest provisions; the Ombudsman Title III minimum funding requirement was narrowed from the broad requirement in the 1992 OAA Amendments.

- 2006** Reauthorization added “Assisted Living Facilities” to the definition of “Long-term Care Facility” thereby requiring the Ombudsman program to provide services to residents of Assisted Living Facilities.
- 2015** Long-Term Care Ombudsman Programs Final Rule was published in February with an effective date of July 1, 2016, to allow states appropriate time to make any changes necessary to comply with the final rule. The rule clarifies many of the program responsibilities and provisions in the OAA.
- 2016** The 2016 OAA amendments added clarity and additional authority to the Ombudsman program in several areas. Pertinent amendments to the Ombudsman program include:
- Authorized the program to serve all long-term care facility residents regardless of their age;
 - To serve residents transitioning from a long-term care facility to a home-care setting, when feasible;
 - Clarifies that the program may work to resolve complaints on behalf of residents unable to communicate their wishes, including those lacking an authorized representative;
 - Requires programs to actively encourage and assist in the development of resident and family councils;
 - Clarifies that the program is considered a “health oversight agency” for purposes of the Health Insurance Portability and Accountability Act (HIPAA).
- 2020** Reauthorization clarified that the Long-Term Care Ombudsman Program can provide and financially support recognition for individuals designated as volunteer representatives, may reimburse or otherwise provide financial support for any costs, such as transportation costs, incurred by representatives of the program.
- 2024** OAA Final Rule was published in February with an effective date of October 2025. The rule included minor modifications and added language in 45 CFR §1321 related to State Unit on Aging responsibilities. It clarifies the State Long-Term Care Ombudsman Program responsibilities and requirements, including requiring Ombudsman programs enter into memoranda of understanding with

legal assistance programs and long-term care facility licensure and certification entities, and clarification of Ombudsman program authority and independence.

22

²² A detailed history of the program is on the NORC website. <http://ltcombudsman.org/about/about-ombudsman/program-history>.

Appendix B: Glossary Of Useful Terms

Local Ombudsman Entity—An entity designated by the Ombudsman to carry out the Ombudsman program duties within a geographic area. Examples of agencies hosting local Ombudsman entities include AAAs and other public or nonprofit organizations.

National Ombudsman Reporting System (NORS)—NORS is a set of data collection requirements that Ombudsman programs collect. NORS is comprised of data on resident complaints and outcomes on complaints, Ombudsman program activities and narratives. In accordance with the OAA, Ombudsmen report their NORS data annually in the ACL-approved software-reporting tool. NORS data is available at <https://agid.acl.gov/>.

Office of the State Long-Term Care Ombudsman (Office)—The organizational unit in a state or territory which is headed by a State Long-Term Care Ombudsman.

Ombudsman—A Swedish word meaning agent, representative, or someone who speaks on behalf of another.

Representatives of the Office of the State Long-Term Care Ombudsman—Staff or volunteers designated by the Ombudsman to fulfill the duties of the State's Long-Term Care Ombudsman Program.

State Long-Term Care Ombudsman or Ombudsman—The individual who heads the State Long-Term Care Ombudsman Office and is responsible to personally, or through representatives of the Office, fulfill the functions, responsibilities and duties set forth in the OAA and Ombudsman program rule.

State Long-Term Care Ombudsman Program—The program through which the functions and duties of the State Ombudsman Office are carried out, consisting of the Ombudsman, the Office headed by the Ombudsman, and the representatives of the Office.

State Agency—A designated state division or department that holds the primary responsibility for the planning, policy development, administration, coordination, priority setting, and evaluation of all state activities related to the objectives of the OAA. The specific title and organization of the governmental unit will vary from state to state. Most states administer the

OAA programs through their State Agency on Aging and Disabilities, referred to as “State Unit on Aging”. The Older Americans Act and the Ombudsman program rule use the term “State agency.”

Willful interference—The actions or inaction taken by an individual in an attempt to intentionally prevent, interfere with, or attempt to impede the Ombudsman program from performing any of the functions or responsibilities or duties.

23

²³ Further clarification on the definitions of the Ombudsman program can be found in 45 CFR §1324.1, <https://www.ecfr.gov/current/title-45/subtitle-B/chapter-XIII/subchapter-C/part-1324/subpart-A/section-1324.1>.

Appendix C: Acronyms

AAA—Area Agency on Aging

APS—Adult Protective Services

AoA—Administration on Aging

ACL—Administration for Community Living

CMS—Centers for Medicare & Medicaid Services

HCBS—Home and Community-Based Services

HIPAA—Health Insurance Portability and Accountability Act

LTCO—Long-Term Care Ombudsman

LTSS—Long-Term Services and Supports

MLTSS—Managed Long-Term Services and Supports

NORC—National Long-Term Care Ombudsman Resource Center

NORS—National Ombudsman Reporting System

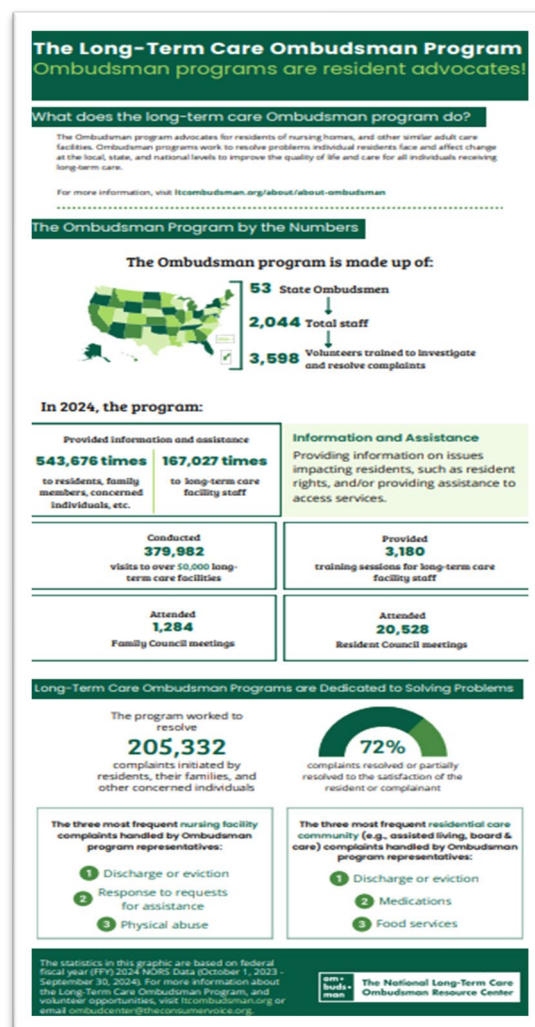
OAA—Older Americans Act

Appendix D: Resources

- Older Americans Act Final Rule as Published in the Federal Register, February 14, 2024:
<https://www.federalregister.gov/documents/2024/02/14/2024-01913/older-americans-act-grants-to-state-and-community-programs-on-aging-grants-to-indian-tribes-and> {NOTE: the rule modified Titles III, VI, and VII only.}
- 2020 Reauthorization of the Older Americans Act, [Public Law 89–73] [As Amended through P.L. 116–131, Enacted March 25, 2020]:
<https://www.congress.gov/116/plaws/publ131/PLAW-116publ131.pdf>
- State Long-Term Care Ombudsman Programs: Final Rule (2015) Overview, 45 CFR 1321 and 1324; Administration for Community Living; PowerPoint Presentation:
<http://ltcombudsman.org/uploads/files/support/ltco-rule-overview-training.pdf>
- Older Americans Act: ACL Resources: <https://www.acl.gov/node/650/> and <https://acl.gov/OAARule>.
- Administration for Community Living, Long-Term Care Ombudsman FAQ:
<https://www.acl.gov/node/762>
- National Ombudsman Reporting System (NORS) Data:
https://ltcombudsman.org/omb_support/nors/nors-data
- AGing Integrated Database (AGID): <https://agid.acl.gov/>

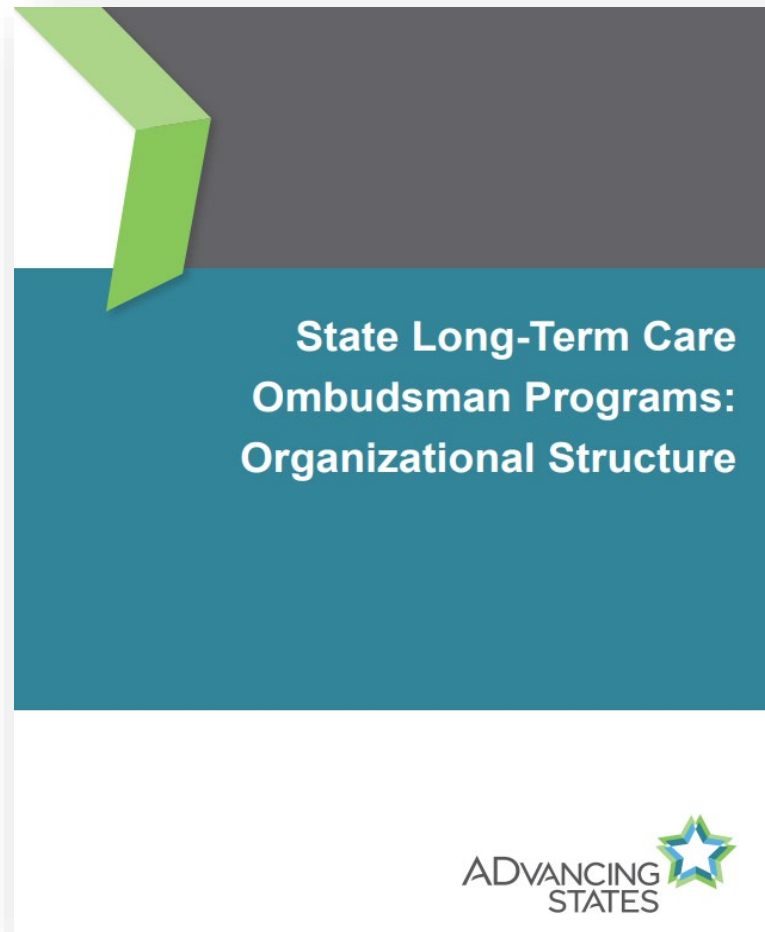
- ADvancing States: <https://www.advancingstates.org/> and ADvancing States iQ Online Learning Center: <https://www.advancingstatesiq.org/>
- The National Consumer Voice for Quality Long-Term Care (Consumer Voice): <http://theconsumervoice.org/>
- The National Long-Term Care Ombudsman Resource Center (NORC): <http://ltcombudsman.org>
- National Association of State Long-Term Care Ombudsman Programs (NASOP): <http://www.nasop.org/>
- National Association of Local Long-Term Care Ombudsman (NALLTCO): <https://www.nalltco.com/>

Appendix F: Infographic: Long-Term Care Ombudsman Program



This Ombudsman program infographic gives a brief overview of the work Ombudsman programs do and the impact they have around the nation. It features statistics based on federal fiscal year (FFY) 2024, NORS Data (October 1, 2023 – September 30, 2024). Source: The National Long-Term Care Ombudsman Resource Center, *About the Ombudsman Program*, <https://ltcombudsman.org/about/about-ombudsman>.

Appendix G: Report: State Long-Term Care Ombudsman Programs: Organizational Structure



The *State Long-Term Care Ombudsman Programs: Organizational Structure* report features updated information on the organizational structure of State Long-Term Care Ombudsman Programs and is intended to support state agencies in understanding the unique structure of the programs. Data on State Long-Term Care Ombudsman Programs, shared by State Long-Term Care Ombudsmen, provides an updated picture of the Long-Term Care Ombudsmen programs across the nation and can serve as a tool for state-by-state comparisons. Source: ADvancing States, http://advancingstates.org/sites/default/files/ADS%20Ombudsman%20Report%201.30.25_1.pdf.



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