

NORTH TEXAS NURSING HOME and ASSISTED LIVING GUIDE*

Learn:

***How to find the Right Nursing Home
or Assisted Living Facility***

How to Get Good Care There

***Includes: A Directory of Hospitals, Hospices, Rehab Facilities and Support Groups**

***C. Dan Campbell, P.C. © 2012
Revised 01/17***

*“Let our advance worrying
become our advanced thinking
and planning.”*

WINSTON CHURCHILL

OUR MISSION STATEMENT

*Helping your loved ones get the nursing
home care they deserve while legally
protecting your family's assets.*

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2017 UPDATE

“North Texas Nursing Home & Assisted Living Guide”

Learn how to find the right Nursing Home or Assisted Living Facility and How to get good care there.

By C. Dan Campbell, PC

Pg. 5: Texas Advocates for Nursing Home Residents is now the

Texas Advocates for Senior Care.

Pg. 14: What about Medicare? Change \$147.00 per day to **\$161.00** per day.

Pg. 16: The Home change \$552,000.00 to **\$560,000.00**

Pg. 20: Throckmorton Nursing & Rehabilitation is **closed**.

Pg. 31: Grayline Research Center phone number is:

1-940-322-1131 or 1-940-322-1132.

Introduction

The decision to move a family member or a loved one into a nursing home is one of the most difficult decisions you can make.

Perhaps the move is being made because the family member can no longer care for him or herself...or perhaps the person has a progressive disease like Alzheimer's...or has had a stroke or heart attack.

No matter the reason, those involved are almost always under great stress.

At times like these, it's important that you pause, take a deep breath and understand there are things you can do. Good information is available and you can make the right choices for you and your loved one.

This booklet is designed to help provide you with information and answers to the questions which we, as Elder Law attorneys, deal with on a daily basis.

We have found it helpful to our clients and we hope you will find it useful as well.

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Selecting a Nursing Facility

When someone is faced with the overwhelming job of finding a nursing home for a loved one, the question often asked is, “Where do I begin?” Although this is a job that no one wants to do, it can be done with forethought and confidence that the best decision was made for everyone involved.

When nursing home placement is necessary, it is crucial that the family and/or potential resident decide what’s most important to them in looking for a facility. It is important that the resident’s needs and wants be included in the evaluation. Things such as location of the facility, if a special care unit is necessary, and type of payer source should be considered when beginning this process.

The next step is to identify the facilities in your area which meet the criteria you established above. If placement is “down the road” and you have time, call the nursing facilities and ask them to send you their information packet including an activity calendar and a menu.

Get ready to tour the facilities you have chosen. Don’t schedule your tours. Just show up during regular business hours. You will be able to meet with the administrative staff who will answer all your questions. Next, you will want to tour a second time in the evening or on the weekend just to see if there is a drastic difference in the atmosphere of the facility or the care being provided. It is important to tour at least two facilities so you can see the difference in the physical plant and the staff.

When you are touring, pay attention to your gut feeling. Ask yourself the following questions... Did I feel welcome? How long did I have to wait to meet with someone? Did the admission director find out my family member’s wants and needs? Was the facility clean? Were there any strong odors? Was the staff friendly? Did they seem to generally care for the resident? Did the staff seem to get along with each other? Listen and observe. You can learn so much just by watching and paying attention.

When touring a facility, ask any questions that come to mind. There are no “dumb” questions. Here are a few examples of questions you will want to ask to make sure that the administration

of the facility is giving proactive care instead of reacting to crisis.

- How do you ensure that call lights are answered promptly regardless of your staffing?
- If someone is not able to move or turn him or herself, how do you ensure that they are turned and do not develop bedsores?
- How do you make sure that someone is assisted with the activities of daily living like dressing, toileting and transferring?
- Can residents bring in their own supplies?
- Can residents use any pharmacy?
- How many direct care staff members do you have on each shift? Does this number exceed the minimal number that state regulations say you have to have or do you just meet the minimum standard?
- What payer sources do you accept?
- How long has the medical director been with your facility?
- How were your last state survey results? (Ask to see a copy)
- How did you correct these deficiencies and what process did you put in place to make sure you do not make these mistakes again?
- Has the state prohibited this facility from accepting new residents at any time during the last 2 years?
- What is your policy on family care planning conferences? Will you adjust your schedule to make sure that I can attend the meeting?
- Do you have references I can talk with?
- Can my loved one come in for a meal to see if he/she fits in and likes the facility?

Attached is a form you can use when touring facilities. This will help you keep track of which facility you liked best and those you did not care for.

Once a facility has been chosen, there are some definite steps you can take to make the process less traumatic on the resident. First, plan the admission carefully. If you know the resident becomes very difficult to deal with in the late afternoon, plan the admission for midmorning. Next, complete the admission paperwork before your loved one actually moves into the facility. This will allow you to spend the first few hours that they are there with them getting them settled and making them feel secure in their new living environment.

Some practical things you want to be sure to do ... mark every

piece of clothing with a permanent laundry marker. When a facility is washing the clothes for 120 people, it is common for things to occasionally end up in the wrong room, however you can help ensure getting the item back if it is properly marked. If you are going to do your loved one's laundry, post a sign on the closet door to notify staff and provide a laundry bag where dirty clothes can be placed. Also, bring in familiar things for the resident so that there is a feeling of home. However, realize that space is limited especially in a semi-private room.

A very important thing for you to remember is that the staff of the facility is just meeting your loved one for the first time. They do not know his or her likes or dislikes, or those little nuances that make providing care go smoother. The best way you can help your loved one is to tell the staff, in writing, as much information as possible about your loved one ... his/her likes and dislikes, typical daily schedule, pet peeves, and so on.

It is important that you get to know the people who are caring for your loved one. Most importantly, stay involved. Let everyone know how much you care and how committed you are to your loved one's care. Also understand you will not help your loved one by becoming anxious or emotional. Assure them that although this is not an ideal situation, you will be there to assist them in making it as pleasurable as possible.

Nursing Home Evaluation

As you visit nursing homes, use the following form for each place you visit. Don't expect every nursing home to score well on every question. The presence or absence of any of these items does not automatically mean a facility is good or bad. Each has its own strengths and weaknesses. Simply consider what is most important to the resident and you.

Record your observations for each question by circling a number from one to five. (If a question is unimportant to you or doesn't apply to your loved one, leave the evaluation area for that question blank.) Then total all blanks you checked.

Your ratings will help you compare nursing homes and choose the best one for your situation. But, don't rely simply on the numbers.

Ask to speak to family members of other residents. Also, contact the local or state ombudsman for information about the nursing home and get a copy of the facility's state inspection report from the nursing home, the agency that licenses (or certifies) nursing homes or the ombudsman.

Beyond this guide, information concerning facilities in the North Texas Area can be obtained from:

- Texas Advocates for Nursing Home Residents (TANHR) (Austin) 1-888-826-4748
- For recent copies of survey/inspection reports:
Department of Aging & Disability Services, Long Term Care Regulatory Agency (Austin) 1-800-458-9858
For access to their Quality Reporting System (QRS), go to **<http://www.dads.state.tx.us>** (QRS compares quality ratings of nursing homes, assisted living facilities and other health care agencies for each county in Texas.)
- Area Agency on Aging of North Texas;
Nursing Facility Ombudsman
4309 Jacksboro Hwy., Suite 200 1-800-460-2226
Wichita Falls, Texas 76302 or 1-940-322-5281
- To register complaints concerning nursing homes:
Department of Aging & Disability Services
701 West 51st Street, Austin, TX 78751 1-800-458-9858
- To report elder abuse:
Department of Protective Services of Adults
925 Lamar, Suite 4100 1-800-252-5400
Wichita Falls, TX 76301 1-940-235-1995

Nursing Home Evaluation Form

Name of Nursing Home: _____

Date Visited: _____

Poor = = = Excellent
1 = = = = = 5

The Building and Surroundings

What is your first impression of the facility? 1 2 3 4 5

What is the condition of the facility's exterior paint, gutters and trim? 1 2 3 4 5

Are the grounds pleasant and well-kept? 1 2 3 4 5

Do you like the view from residents' rooms and other windows? 1 2 3 4 5

Do residents with Alzheimer's disease live in a separate Alzheimer's unit? 1 2 3 4 5

Does the nursing home provide a secure outdoor area? 1 2 3 4 5

Is there a secure area where a resident with Alzheimer's disease can safely wander on walking paths? 1 2 3 4 5

Are there appropriate areas for physical therapy and occupational therapy? 1 2 3 4 5

Are facilities for barber or beauty salon services available? 1 2 3 4 5

Is there a well-ventilated room for smokers? 1 2 3 4 5

What is your impression of general cleanliness throughout the facility? 6 1 2 3 4 5

Does the facility smell clean?	1 2 3 4 5
Is there enough space in resident rooms and common areas for the number of residents?	1 2 3 4 5
How noisy are hallways and common areas?	1 2 3 4 5
Is the dining area clean and pleasant?	1 2 3 4 5
Is there room at and between tables for both residents and aides for those who need assistance with meals?	1 2 3 4 5
Are common areas like lounges and activity rooms in use?	1 2 3 4 5
Are residents allowed to bring pieces of furniture and other personal items to decorate their rooms?	1 2 3 4 5

The Staff, Policies and Practices

Does the administrator know residents by name and speak to them in a pleasant, friendly way?	1 2 3 4 5
Do staff and residents communicate with cheerful, respectful attitudes?	1 2 3 4 5
Do staff and administration seem to work well with each other in a spirit of cooperation?	1 2 3 4 5
Do residents get permanent assignment of staff?	1 2 3 4 5
Do nursing assistants participate in the resident's care planning process?	1 2 3 4 5
How good is the nursing home's record for employee retention?	1 2 3 4 5
Does a state ombudsman visit the nursing home on a regular basis?	1 2 3 4 5

How likely is an increase in private pay rates? 1 2 3 4 5

Are there any additional charges not included in the daily or monthly rate? 1 2 3 4 5

Residents' Concerns

What method is used in selecting roommates? 1 2 3 4 5

What is a typical day like? 1 2 3 4 5

Can residents choose what time to go to bed and wake up? 1 2 3 4 5

Are meaningful activities available that are appropriate for residents? 1 2 3 4 5

If activities are in progress, what is the level of resident participation? 1 2 3 4 5

Can residents continue to participate in interests like gardening or contact with pets? 1 2 3 4 5

Does the nursing home provide transportation for community outings and activities? 1 2 3 4 5

Is a van or bus with wheel chair access available? 1 2 3 4 5

Do residents on Medicaid get mental health services or occupational, speech or physical therapies if needed? 1 2 3 4 5

What is your impression of the general cleanliness and grooming of residents? 1 2 3 4 5

How are decisions about method and frequency of bathing made? 1 2 3 4 5

How do residents get their clothes laundered? 1 2 3 4 5

What happens when clothing or other items are missing?	1 2 3 4 5
Are meals appetizing and served promptly at mealtime?	1 2 3 4 5
Are snacks available between meals?	1 2 3 4 5
If residents call out for help or use a call light, do they get prompt, appropriate responses?	1 2 3 4 5
Does each resident have the same nursing assistant(s) most of the time?	1 2 3 4 5
How does a resident with problems voice a complaint?	1 2 3 4 5
Do residents who are able to participate in care plan meetings?	1 2 3 4 5
Does the nursing home have an effective resident council?	1 2 3 4 5

Family Considerations

How convenient is the nursing home’s location to family members who may want to visit the resident?	1 2 3 4 5
Are there areas other than the resident’s room where family members can visit?	1 2 3 4 5
Does the facility have safe, well-lighted, convenient parking?	1 2 3 4 5
Are hotels/motels nearby for out-of-town family members?	1 2 3 4 5

Are area restaurants suitable for taking residents
out for a meal with family members? 1 2 3 4 5

How convenient will care planning conferences be for
interested family members? 1 2 3 4 5

Is an effective family council in place? 1 2 3 4 5

Can family/staff meetings be scheduled to discuss and work
out any problems that may arise? 1 2 3 4 5

Total Score: _____

How to Get Good Care in a Nursing Home

Once you find a nursing home placement for your loved one, you can begin the process of easing the transition from one level of care to another.

The most important way you can help is to ensure that your loved one gets good care in the new environment.

If you have been providing some or all of your loved one's care, you'll notice a change in your role. Rather than functioning as a caregiver, you'll instead become a care advocate.

You will still be caring for your loved one, but in a new way.

Your key roles are to participate in planning for your loved one's care and in frequent communication with the nursing home staff.

Care Planning

The care planning process begins with a baseline assessment. This assessment occurs soon after a resident moves into a nursing home, certainly within the first two weeks.

A team from the nursing home which may include a doctor, nurse, social worker, dietitian and physical, occupational or recreational therapist, uses information from both the resident and the family about the resident’s medical and emotional needs.

This baseline assessment then becomes the yardstick against which the caregivers can measure the resident’s progress.

The team asks family members about the resident’s medical, psychological, spiritual and social needs. You can also contribute information about your loved one’s preferences and usual routine. For example, you might tell the staff, “Dad likes to listen to the radio as he falls asleep. He’s been doing this since I was a child.”

During the assessment process, you can help by making your own list of your loved one’s needs and giving the list to a member of the assessment team. For example, you may have noticed signs of depression along with symptoms of Alzheimer’s. The assessment team may not notice these signs, so your input will be invaluable.

In the space below list your loved one’s medical needs:

In the space below list your loved one’s psychological needs:

In the space below list your loved one's spiritual needs:

In the space below list your loved one's social needs:

In the space below list your loved one's preferences and usual routines:

The assessment team uses all the information they gather to develop an individualized formal care plan. The care plan defines specific care the resident needs and outlines strategies the staff will use to meet them. The assessment team meets during the first month of a new resident's placement at a care planning meeting. Family members, as well as the resident, may attend.

When you go to the care plan meeting, bring along a copy of the list of needs you gave the assessment team earlier. Together, you can discuss your loved one's needs and the care plan the team has developed. And, if some need has been overlooked, you can ensure that the assessment team addresses it during this meeting.

Federal law requires that nursing home care result in improvement, if improvement is possible. In cases where improvement is not possible, the care must maintain abilities or slow the loss of function.

For example, if your mother has little problem with language when she moves into the nursing home, the care plan should include activities that encourage her use of language unless or until the disease's progression changes this ability.

The care plan becomes part of the nursing home contract. It should detail the resident's medical, emotional and social needs and spell out what will be done to improve (when possible) or maintain the resident's health.

According to federal law, nursing homes must review the resident's care plan every three months and whenever the resident's condition changes. It must also reassess the resident annually. At these times additional care planning meetings are held to update the resident's care plan.

For example, if your father had bladder control when he entered the nursing home, but has become incontinent, this significant change in his status means the nursing home staff must develop a new care plan that addresses his new need.

As a care advocate, you'll want to monitor your loved one's care to be sure the nursing home is providing the care outlined in the care plan. You may also attend all care planning meetings, whether regularly scheduled or when held because of a change in your loved one's health. This is the best way to ensure that your loved one gets personal and appropriate care in the nursing home.

How to Pay for the Nursing Home Without Going Broke

One of the things that concerns people most about nursing home care is how to pay for that care.

There are basically three ways that you can pay the cost of a

nursing home:

- 1. Long Term Care Insurance** - If you are fortunate enough to have this type of coverage, it may go a long way toward paying the cost of the nursing home. Unfortunately, long term care insurance has only started to become popular in the last couple of years and most people facing a nursing home stay do not have this coverage.
- 2. Pay with Your Own Funds** - This is the method many people choose at first. Quite simply, it means paying for the cost of a nursing home out of your own pocket. Unfortunately, with nursing home bills averaging around \$4,000.00 to \$4,500.00 per month in our area, few people can afford a long term stay in a nursing home.
- 3. Medicaid** - This is a primarily federally-funded and state-administered program which pays for the cost of the nursing home if certain asset and income tests are met.

Since the first two methods, (long term care insurance and paying with your own funds) are self-explanatory, we'll concentrate on Medicaid and Medicare and on the process known as division of assets.

What About Medicare?

There is a great deal of confusion about Medicare and Medicaid. Medicare is the federally-funded health insurance program primarily designed for older individuals (i.e., those over age 65). There is a limited long term care component to Medicare. In general, if you've had a hospital stay of at least three days, and then you need to go into a skilled nursing facility (often for rehabilitation), then Medicare may pay for a while.

Typically, in that circumstance, Medicare will pay the full cost of the nursing home stay for the first 20 days and will continue to pay the cost of the nursing home stay for the next 80 days, but with a deductible that's nearly \$147.00 per day. Often times your Medicare supplement will pay the cost of that deductible. So in the best case scenario, Medicare may pay up to 100 days. In order to qualify

for this 100 days of coverage, however, the nursing home resident generally must continue to “improve.”

While it’s never possible to predict at the outset how long Medicare will cover the rehabilitation, from our experience it often falls far short of the 100 day standard. But even if Medicare does cover the 100 day period, what then? What happens after the 100 days of coverage have been used?

At that point, you’re back to one of the other alternatives...long term care insurance, or paying the bills with your own assets, or Medicaid.

What Is Medicaid?

Medicaid is a benefits program which is primarily funded by the federal government and administered by each state. So the Medicaid rules may vary from state to state.

One of the primary benefits of Medicaid is that, unlike Medicare which only pays for skilled nursing, the Medicaid program will pay for long term custodial care in a nursing home.

Custodial care refers to assistance with the activities of daily living (i.e., activities like dressing, bathing, toileting, preparing meals and so on). The inability of some older persons to manage these activities on their own often results in the need to move to a nursing home.

Why Plan for Medicaid?

As life expectancies and long term care costs continue to rise, the challenge quickly becomes how to pay for these services. Many people cannot afford to pay \$4,000.00-\$4,500.00 per month or more for the cost of a nursing home, and those who can pay for a while may find their life savings wiped out in a matter of months, rather than years.

Fortunately, the Medicaid Program is there to help. In fact, in our lifetime, Medicaid has become the long term care insurance of the middle class. But the eligibility to receive Medicaid benefits requires

that you pass certain tests on the amount of income and assets that you have. The reason for Medicaid planning is simple...you plan so that if you need it, you will be eligible to receive Medicaid benefits.

Exempt Assets and Countable Assets: What Can You Keep and What is at Risk?

To qualify for Medicaid, you must pass some fairly strict tests on the amount of assets you can keep.

To understand how Medicaid works, we first need to review what are known as exempt and non-exempt (or countable) assets.

Exempt assets are those which Medicaid will not take into account (at least for the time being). In Texas, the following are the primary exempt assets:

- **The Home**, (so as long as the equity is no greater than \$552,000.00). The home must be the principal place of residence. The nursing home resident may be required to show some “intent to return home” even if this never actually takes place. Furthermore, steps must be taken to protect the homestead from the Medicaid Estate Recovery Program.
- **Household and Personal Belongings** such as furniture, appliances, jewelry and clothing.
- **One Car**
- **Burial Plot** for you and your spouse.
- **Cash Value of Life Insurance policies** as long as the face value of all of policies added together does not exceed \$1,500.00. If it does exceed \$1,500.00 in total face amount, then the cash value in these policies is countable.
- **Cash** (e.g., a small checking or savings account) not to exceed \$2,000.00.

All other assets which are not exempt (i.e., not listed above) are countable. This includes checking accounts, savings accounts, CDs, money markets, stocks, mutual funds, bonds, IRAs, pensions,

401Ks, second cars and so on. Basically all money and property, and any item that can be valued and turned into cash, is a countable asset unless it is one of those assets listed above as exempt.

While the Medicaid rules themselves are complicated and tricky, for a single person it's safe to say that you will qualify for Medicaid so long as you have only exempt assets and your non-exempt assets are less than \$2,000.00.

Does this mean that if you're single and need Medicaid assistance, you'll have to spend nearly all of your assets to qualify?

No. Actually there are a number of strategies which can be used to protect your estate. It has been our experience that in most cases a significant portion of non-exempt assets can be protected and this is true even when a person is already in a nursing home! **For more detailed information about Medicaid Transfer Planning, please see our booklet, "Consumer Guide to Medicaid Planning and Protection of Assets".**

In Conclusion

In the previous pages, we've talked about how to find the right nursing home, how to get good care there, and how to pay for it without going broke. But where do you actually start looking? Where should you begin your search?

To assist you, we've compiled a list of the nursing homes and assisted living facilities in North Texas, arranged according to counties. To further help you, we've included hospitals, hospices, rehabilitation centers and support groups in the area.

The listings contain the name and address of the facility along with the telephone number. We have also included information on whether the nursing home accepts Medicare (typically for rehabilitation purposes) and Medicaid. Finally, we have noted whether the facility has a special Alzheimer's unit.

Once you've determined which facilities you want to tour, then you can use the evaluation tool to help you compare them. Please feel free to make copies of these pages for visiting multiple facilities.

North Texas Nursing Homes

	Medicare	Medicaid	Alzheimer's Unit
Archer County			
Vista Living of Archer City 201 E. Chestnut Archer City, TX 76351 940-574-4551	x	x	
Baylor County			
Seymour Rehabilitation and Healthcare 1110 Westview Seymour, TX 76380 940-889-3176	x	x	
Childress County			
Childress Healthcare Center 1200 7 th Street Northwest Childress, TX 79201 940-937-8668	x	x	
Clay County			
Grace Care Center of Henrietta 807 W. Bois D'arc Henrietta, TX 76365 940-538-4303	x	x	
Cooke County			
Gainesville Health & Rehabilitation 1900 O'Neal St. Gainesville, TX 76240 940-665-2826	x	x	
Pecan Tree Rehab & Health Care 1900 E. California St. Gainesville, TX 76240 940-668-6263	x	x	

	Medicare	Medicaid	Alzheimer's Unit
Renaissance Care Center 1400 Blackshill Road Gainesville, TX 76240 940-665-5221	x	x	
River Valley Health & Rehab 1907 Refinery Rd. Gainesville, TX 76240 940-665-0386	x	x	
Hardeman County			
Crowell Nursing Center 200 S. Ave. B Crowell, TX 79227 940-684-1511	x	x	
Jack County			
Jacksboro Healthcare Center 211 E. Jasper St. Jacksboro, TX 76458 940-567-2686	x	x	
Knox County			
Munday Nursing Center 421 W F Street, Box 199 Munday, TX 76371 940-422-4541	x	x	

	Medicare	Medicaid	Alzheimer's Unit
Montague County			
Advanced Rehabilitation & Healthcare of Bowie 700 U.S. Hwy 287 South Bowie, TX 76230 940-366-6037	x	x	x
Grace Care Center of Nocona 306 Carolyn Rd. Nocona, TX 76255 940-825-3288	x	x	
Throckmorton County			
Throckmorton Nursing & Rehabilitation 1000 Minter Ave. Throckmorton, TX 76483 940-849-2861	x	x	
Wichita County			
Advanced Rehabilitation & Healthcare of Wichita Falls 4816 Kemp Blvd. Wichita Falls, TX 76308 940-766-0281	x	x	
Courtyard Gardens 1501 Seventh St. Wichita Falls, TX 76301 940-322-0741	x	x	
Electra Healthcare Center 511 S. Bailey St. Electra, TX 76360 940-495-2184	x	x	

	Medicare	Medicaid	Alzheimer's Unit
Evergreen Healthcare Center 406 E. Seventh St. Burkburnett, TX 76354 940-569-2236	x	x	
House of Hope 5100 Stone Lake Drive Wichita Falls, TX 76310 940-689-7200			x
Iowa Park Healthcare Center 1109 North Third St. Iowa Park, TX 76367 940-592-4139	x	x	
Midwestern Healthcare Center 601 Midwestern Parkway E. Wichita Falls, TX 76302 940-723-0885	x	x	
Presbyterian Manor 4600 Taft Blvd. Wichita Falls, TX 76308 940-691-1710			
Promise Skilled Nursing Facility of Wichita Falls 1101 Grace St. Wichita Falls, TX 76301 940-322-3393	x	x	
Rolling Meadows Health Care Center 3006 McNeil Wichita Falls, TX 76309 940-691-7511			

	Medicare	Medicaid	Alzheimer's Unit
Senior Care Health and Rehabilitation Center 910 Midwestern Parkway Wichita Falls, TX 76302 940-767-5500	x	x	
Texhoma Christian Care Center 300 Loop 11 Wichita Falls, TX 76305 940-723-8420	x	x	x
University Park Nursing & Rehabilitation Center 4511 Coronado Wichita Falls, TX 76310 940-692-8001	x	x	
<i>Wilbarger County</i>			
Advanced Rehabilitation & Healthcare of Vernon 4401 College Drive Vernon, TX 76384 940-552-9316	x	x	
Vista Living of Vernon 4301 Hospital Dr. Vernon, TX 76384 940-552-2568	x	x	
<i>Wise County</i>			
Heritage Place of Decatur 605 W. Mulberry Decatur, TX 76234 940-627-5444	x	x	

	Medicare	Medicaid	Alzheimer's Unit
The Hills Nursing & Rehabilitation 201 E. Thompson Decatur, TX 76234 940-627-2165	x	x	
Senior Care Health & Rehabilitation 2108 Fifteenth St. Bridgeport, TX 76426 940-683-5023	x	x	
Senior Care Health & Rehabilitation Center 701 Bennett Rd. Decatur, TX 76234 940-626-2800	x	x	
Young County			
Garden Terrace Healthcare Center 1224 Corvadura Graham, TX 76450 940-549-4646	x		x
Graham Oaks Care Center 1325 First St. Graham, TX 76450 940-549-8787	x		x
Grace Care Center of Olney 1402 West Elm Olney, TX 76374 940-564-5631	x		x

North Texas Assisted Living Facilities

Alzheimer's
Medicare Medicaid Unit

Cooke County

Wheeler Place
2310 E. Broadway St.
Gainesville, TX 76240
940-668-8977

Jack County

Greystone Park
1116 Highway 148
Jacksboro, TX 76458
940-567-3057

x-CBA

Montague County

Cherry Street Village
200 E. Cherry St.
Nocona, TX 76255
940-825-5085

Independence Hall
1210 Jackson
Bowie, TX 76230
940-872-9718

Wichita County

Arbor House
1525 Highway 79 South
Wichita Falls, TX 76302
940-723-5035

x

Brookdale Midwestern
918 Midwestern Parkway
Wichita Falls, TX 76302
940-322-0918

x

	Medicare	Medicaid	Alzheimer's Unit
Brookdale Sikes Lake 2649 Plaza Parkway Wichita Falls, TX 76308 940-696-1351			x
Horizon Bay 5100 Kell Blvd. Wichita Falls, TX 76310 940-691-8181			
Presbyterian Manor 4600 Taft Blvd. Wichita Falls, TX 76308 940-691-1710			x
Rolling Meadows Retirement Complex 3006 McNiel Wichita Falls, TX 76308 940-691-7511			
Royal Estates 3908 Kell Blvd. West Wichita Falls, TX 76309 940-696-2296			
Wilbarger County			
Eagle Flats Village 4501 College Dr. Vernon, TX 76384 940-552-8181		x-CBA	

Wise County

Governor's Ridge Retirement
& Assisted Living
300 E. Devereaux
Decatur, TX 76234
940-627-1104

Young County

Brookdale Graham
1015 Cliff Dr.
Graham, TX 76450
940-549-8181

x

North Texas Hospices

Bowie, TX

Hospice of Rural Texas
705 E. Greenwood Ave.
Bowie, TX 76230
940-872-6130

Solaris Health Care & Hospice
800 Hwy. 59 North, Suite B
Bowie, TX 76230
940-872-8080

Gainesville, TX

Home Hospice of Cooke County
316 S. Chestnut
Gainesville, TX 76240
940-665-9891

Graham, TX

Graham Regional Hospice
& Home Health

523 Elm St.
Graham, TX 76450
940-549-9704

Kindred at Home

457 Oak St.
Graham, TX 76450
940-549-6999

Solaris Heath Care & Hospice

509 Elm St.
Graham, TX 76450
940-521-0922

Wichita Falls, TX

Integracare Hospice

4309 Old Jacksboro Hwy., Suite B
Wichita Falls, TX 76302
940-716-9035

Hospice of Wichita Falls

4909 Johnson Rd.
Wichita Falls, TX 76308
940-691-0982 or 800-378-2822

North Texas Hospitals**Baylor County**

Seymour Hospital

200 Stadium Dr.
Seymour, TX 76380
940-889-5572

Childress County

Childress Regional Medical Center
901 U.S. Hwy. 83 N.
Childress, TX 79201
940-937-6371

Clay County

Clay County Memorial Hospital
310 W. South St.
Henrietta, TX 76365
940-538-5621

Cooke County

North Texas Medical Center
1900 Hospital Blvd.
Gainesville, TX 76240
940-665-1751

Hardeman County

Hardeman County Memorial Hospital
402 Mercer
Quanah, TX 79252
940-663-2795

Jack County

Faith Community Hospital
215 Chisholm Trail
Jacksboro, TX 76458
940-567-6633

Montague County

Nocona General Hospital
100 Park Rd.
Nocona, TX 76255
940-825-3235

Throckmorton County

Throckmorton County Memorial Hospital

802 N. Minter

Throckmorton, TX 76483

940-849-2151

Wichita County

Electra Memorial Hospital

1207 S. Bailey St.

Electra, TX 76360

940-495-3981

Kell West Regional Hospital

5420 Kell Blvd.

Wichita Falls, TX 76310

940-692-5888

United Regional Health Care System (URHCS)

1600 Eleventh St.

Wichita Falls, TX 76301

940-764-7000

Wilbarger County

Wilbarger General Hospital

920 Hillcrest Dr.

Vernon, TX 76384

940-552-9351

Wise County

Wise County Regional Hospital

609 Medical Center Dr.

Decatur, TX 76234

940-627-5921

Young County

Graham Regional Medical Center
1301 Montgomery Rd.
Graham, TX 76450
940-549-3400

Hamilton Hospital
901 W. Hamilton St.
Olney, TX 76374
940-564-5521

North Texas Rehabilitation Facilities

Wichita County

HealthSouth Rehabilitation Hospital
3901 Armory Rd.
Wichita Falls, TX 76302
940-720-5700

North Texas Rehabilitation Center
1005 Midwestern Parkway
Wichita Falls, TX 76302
940-322-0771

Senior Care Health &
Rehabilitation Center
910 Midwestern Parkway
Wichita Falls, TX 76302
940-767-5500

Windmill Rehab at
Texhoma Christian Care Center
300 Loop 11
Wichita Falls, TX 76306
940-723-8420

Wilbarger County

Advanced Rehabilitation &
Healthcare of Vernon
4401 College Drive
Vernon, TX 76384
940-552-9316

Vista Living of Vernon
4301 Hospital Dr.
Vernon, TX 76384
940-552-2568

Wise County

Senior Care Health & Rehabilitation Center
701 Bennett Rd.
Decatur, TX 76234
940-626-2800

North Texas Area Support Groups

Alzheimer's Association
901 Indiana Ave. Suite 350
Wichita Falls, TX 76301
1-940-767-8800
1-800-272-3900

American Cancer Society Regional Office
1-800-227-2345

Grayline Research Center
3300 Seymour Hwy.
Wichita Falls, TX 76309
1-940-322-1131

Muscular Dystrophy Association
Red River Chapter
2629 Plaza Pkwy., Suite B 16
Wichita Falls, TX 76308
1-940-696-5581

Texoma Stroke Support Group
c/o Healthsouth Rehab Hospital
3901 Armory Rd.
Wichita Falls, TX 76302
1-940-720-5700
1-800-227-2345

Seeking Legal Help

Aging persons and their family members often face unique legal issues, including Medicaid planning, property disposition, durable powers of attorney, establishing guardianships and conservatorship and so on.

We are members of the National Academy of Elder Law Attorneys, a professional association of attorneys concerned with improving the availability and delivery of legal services to older persons.

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**C. DAN CAMPBELL, P.C.
ATTORNEY AT LAW**

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