

Know your rights

You have the right to be included in decisions about your care, the right to a process to appeal decisions about payment of services, and the right to privacy and confidentiality.

If you're getting Medicare-covered services from a skilled nursing facility (SNF), and you think your Medicare-covered SNF services are ending too soon, you can ask for a fast appeal. With a fast appeal, an independent reviewer will decide if your services need to continue. Visit Medicare.gov/claims-appeals/your-right-to-a-fast-appeal for more information.

of services, and the right to privacy

Where can I get more information?

You can view or print Medicare publications and find helpful phone numbers and websites by visiting Medicare.gov or calling 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

- To find and compare skilled nursing facilities (SNFs) in your area, visit Medicare.gov/care-compare. You can compare the health inspection survey reports of the SNFs in your area and look at other information, like staffing levels and quality measure results. You can also compare the star rating results for each SNF.
- To learn more about Medicare SNF eligibility, coverage, and cost information, read the booklet "Medicare Coverage of Skilled Nursing Facility Care."
- For free personalized health insurance counseling, call your State Health Insurance Assistance Program (SHIP). To get the phone number for your state, visit shiphelp.org, or call 1-800-MEDICARE (1-800-633-4227).

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit Medicare.gov/about-us/accessibility-nondiscrimination-notice, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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Medicare & Skilled Nursing Facility Care



GETTING STARTED



Skilled care when you need it

Skilled nursing facility care & Medicare

What's skilled nursing facility (SNF) care?

A skilled nursing facility (SNF) provides high quality medical care from skilled nursing or therapy staff to treat, manage, and observe your condition, and evaluate your care. Skilled care is nursing and therapy care that can only be safely and effectively performed by, or under the supervision of, skilled nursing or therapy professionals.



Medicare will cover skilled nursing facility (SNF) care only if all of these are true:

- You have Medicare Part A (Hospital Insurance) and have days of SNF coverage left in your benefit period. You get up to 100 days of SNF coverage per benefit period.
- You have a medically necessary inpatient hospital stay of 3 consecutive days or more (a "qualifying hospital stay"), counting the day of inpatient admission to the hospital, but not the day of discharge, before being admitted to the SNF.
- The SNF is certified by Medicare.
- You begin getting covered care in the SNF within a short time (generally 30 days) after discharge from the qualifying hospital stay.
- Your doctor has ordered the skilled services you need in a SNF. These services must:
 - Require and be given by professional personnel.
 - Be needed and provided on a daily basis.
 - Be services that can be provided only in a SNF on an inpatient basis.
 - Be needed and provided for an ongoing condition that was treated during the qualifying hospital stay, even if it wasn't the main reason for that stay, or for a new condition that started in the SNF while you were being treated for the ongoing condition.
 - Be reasonable and necessary.

What's covered?

Medicare covers these services in a skilled nursing facility (SNF):

- Semi-private room (a room you share with other patients)
- Meals
- Skilled nursing care
- Medical social services
- Medications
- Medical supplies and equipment used in the facility
- Ambulance transportation (when other transportation would endanger your health) to the nearest supplier of medicallynecessary services that aren't available at the SNF, including the return trip
- Dietary counseling

Medicare covers physical therapy, occupational therapy, and speech language pathology services if they're needed to meet your health goal. A health goal is the expected result of your treatment, like being able to walk a certain distance or to climb stairs.

What do I pay?

You pay nothing for covered services the first 20 days that you're in a skilled nursing facility (SNF). You pay a daily coinsurance for days 21-100, and you pay all costs beyond 100 days. Visit Medicare.gov or call 1-800-MEDICARE (1-800-633-4227) to get current amounts. TTY users can call 1-877-486-2048.

These are ways to get help paying for SNF care and other health care costs:

- **Help from your state**—Call your State Medical Assistance (Medicaid) office. To find this and other helpful phone numbers and websites, visit Medicare.gov/talk-to-someone.
- **Employer or union coverage**—Check with your benefits administrator.
- **Medigap policy**—Check with your policy or call the insurance company to find out if your policy provides coverage for the Medicare SNF coinsurance.
- Long-term care insurance—Check your policy or call the insurance company to find out if skilled or custodial care is covered.

"Medicare & Skilled Nursing Facility Care: Getting Started" isn't a legal document. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings. The information in this booklet describes the Medicare Program at the time this booklet was printed. Changes may occur after printing. Visit Medicare.gov, or call 1-800-MEDICARE to get the most current information.