

Medicare & Skilled Nursing Facility Care

Skilled care when you need it

Getting Started



Medicare

Let's get started

What's a skilled nursing facility (SNF)?

A SNF is a type of nursing facility with the necessary staff and equipment to treat, manage, and observe your condition, and evaluate your care. SNFs can be part of nursing homes or hospitals. They provide a wide range of care, including physical therapy and intravenous injections given by a registered nurse or doctor.

Medicare will cover 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 for each benefit period.
- You have a medically necessary inpatient hospital stay of 3 consecutive days or more (called a "qualifying hospital stay"). When determining if your stay was 3 days:
 - You count the day you're admitted to the hospital as an inpatient.
 - You don't count the day you're discharged.
- The SNF is certified by Medicare.
- You begin getting covered care in the SNF within a short time (generally 30 days) after you're discharged from your qualifying hospital stay.
- Your doctor has ordered the skilled services you need in a SNF. These services must be:
 - Reasonable and necessary.
 - Required and given by professional personnel.
 - Needed and given daily.
- Services that can only be given in a SNF on an inpatient basis.
- Needed and given for an ongoing condition that was treated during your qualifying hospital stay, even if it wasn't the main reason for your stay, or for a new condition that started in the SNF while you were being treated for the ongoing condition. For example, you're in a SNF because you broke your hip and you then have a stroke.

Note: Original Medicare measures your use of hospital or SNF services with benefit periods. Visit [Medicare.gov/coverage/skilled-nursing-facility-snf-care](https://www.medicare.gov/coverage/skilled-nursing-facility-snf-care) to learn more about benefit periods.

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 medically necessary 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 you need them to meet your health goal. A health goal is the expected result of your treatment, like being able to walk a certain distance or climb a flight of 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](https://www.medicare.gov), or call 1-800-MEDICARE (1-800-633-4227) to get current amounts. TTY users can call 1-877-486-2048.

There 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 [Medicaid.gov/about-us/where-can-people-get-help-medicaid-chip/index.html#statemenu](https://www.Medicaid.gov/about-us/where-can-people-get-help-medicaid-chip/index.html#statemenu).
- **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.



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
- 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](https://www.Medicare.gov/claims-appeals/your-right-to-a-fast-appeal) for more information.



Where can I get more information?

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- **To find and compare skilled nursing facilities (SNFs) in your area**, visit [Medicare.gov/care-compare](https://www.Medicare.gov/care-compare) and select “Nursing homes including rehab services.” You can compare the health inspection survey reports of nursing facilities that could offer skilled nursing care in your area and look at other information, like staffing levels, quality measure results, and star ratings.
- **To learn more about Medicare SNF eligibility, coverage, and cost information**, read the booklet “Medicare Coverage of Skilled Nursing Facility Care” at [Medicare.gov/publications](https://www.Medicare.gov/publications).
- **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](https://www.shiphelp.org), or call 1-800-MEDICARE.



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“Getting Started: Medicare & Skilled Nursing Facility Care” isn’t a legal document. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings.

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](https://www.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.

This product was produced at U.S. taxpayer expense.