

Medicare in a Skilled Nursing Facility (SNF)

How often is it covered and Who is eligible?

Medicare Part A (Hospital Insurance) covers Skilled nursing care provided in a SNF in certain conditions for a limited time (on a short-term basis) if all of these conditions are met:

- You have Part A and have days left in your Benefit period to use.
- You have a Qualifying hospital stay.
- Your doctor has decided that you need daily skilled care. It must be given by, or under the supervision of, skilled nursing or therapy staff.
- You get these skilled services in a SNF that are certified by Medicare.
- You need these skilled services for a medical condition that is either:
 - A Hospital-related medical condition .
 - A Condition that started while you were getting care in the skilled nursing facility for a hospital-related medical condition .

Hospital Observation vs. Inpatient Stays

Your doctor may order observation services to help decide whether you need to be admitted to the hospital as an inpatient or can be discharged. During the time you are getting observation services in the hospital, you are considered an outpatient—you cannot count this time towards the 3-day inpatient hospital stay needed for Medicare to cover your SNF stay.

COVID-19 Pandemic Waiver Note

- *During the [COVID-19 pandemic](#), some people may be able to get renewed SNF coverage without first having to start a new benefit period or have a 3-day inpatient hospital stay.
- *If you are not able to be in your home during the COVID-19 pandemic or are otherwise affected by the pandemic, you can get SNF care without a qualifying hospital stay.

Remember, any days you spend in a hospital as an outpatient (before you are formally admitted as an inpatient based on the doctor's order) are not counted as inpatient days. An inpatient stay begins on the day you are formally admitted to a hospital with a doctor's order. That is your first inpatient day. The day of discharge does not count as an inpatient day.

Here are some common hospital situations that may affect your SNF coverage:

	Situation	Is my SNF stay covered?
Example #1	You came to the Emergency Department (ED) and were formally admitted to the hospital with a doctor's order as an inpatient for 3 days. You were discharged on the 4th day.	Yes. You met the 3-day inpatient hospital stay requirement for a covered SNF stay.
Example #2	You came to the ED and spent one day getting observation services. Then, you were formally admitted to the hospital as an inpatient for 2 more days.	No. Even though you spent 3 days in the hospital, you were considered an outpatient while getting ED and observation services. These days do not count toward the 3-day inpatient hospital stay requirement.

Breaks in Skilled Care

If you stop getting skilled care in the SNF, or leave the SNF altogether, your SNF coverage may be affected depending on how long your break in SNF care lasts.

- If your break in skilled care lasts **more than 30 days**, you need a new 3-day hospital stay to qualify for additional SNF care. The new hospital stay does not need to be for the same condition that you were treated for during your previous stay.
- If your break in skilled care lasts for **at least 60 days in a row**, this ends your current benefit period and renews your SNF benefits. This means that the maximum coverage available would be up to 100 days of SNF benefits.

While in a SNF, you pay for Original Medicare:

- Days 1–20: \$0 for each benefit period .
- Days 21–100: \$200.00 (in 2023) coinsurance per day of each benefit period.
- Days 101 and beyond: all costs.

Note: Services not covered

- Your doctor or other health care provider may recommend you get services more often than Medicare covers. Or they may recommend services that Medicare does not cover. If this happens, you may have to pay some or all the costs. It is important to ask questions so you understand why your doctor is recommending certain services and whether Medicare will pay for them.
- If you refuse your daily skilled care or therapy, you may lose your Medicare SNF coverage. If your condition will not allow you to get skilled care (like if you get the flu), you may be able to continue to get Medicare coverage temporarily.

Hospital Readmissions

- If you are in a SNF, there may be situations where you need to be readmitted to the hospital. If this happens, there is no guarantee that a bed will be available for you at the same SNF if you need more skilled care after your hospital stay. Ask the SNF if it will hold a bed for you if you must go back to the hospital. Also, ask if there is a cost to hold the bed for you.

Medicare Cards with Medicare Beneficiary ID#



***Effective January 1, 2020, the number on this NEW card is the ONLY number that will pay for services you receive.**

Please provide a copy to the Admissions Coordinator at your Skilled Nursing Facility.

To get your NEW Medicare card:

- **Call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048. There might be a problem that needs to be corrected, like updating your mailing address.**
- **Sign in to your MyMedicare.gov account. If you don't have an account yet, visit MyMedicare.gov to create one. You can sign in to see your Medicare Number or print an official copy of your card. Guard**