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Skilled nursing facility (SNF) care

Medicare Part A (Hospital Insurance) covers skilled nursing care

for a limited time (on a short-term basis) if all of these conditions apply:

- You have Part A and have days left in your benefit period to use.
- You have a qualifying inpatient hospital stay .

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.
- If you're 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.
- Your doctor has decided that you need daily skilled care. You must get the care from, or under the supervision of, skilled nursing or therapy staff.

- You get these skilled services in a Medicare-certified SNF.
- You need these skilled services for a medical condition that's either:
 - A hospital-related medical condition treated during your qualifying 3-day inpatient hospital stay (not including the day you leave the hospital), even if it wasn't the reason you were admitted to the hospital.
 - A condition that started while you were getting care in the SNF for a hospital-related medical condition (for example, if you develop an infection that requires IV antibiotics while you're getting SNF care)

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Your costs in Original Medicare

You pay this for each benefit period:

- Days 1–20: \$0 coinsurance per day
- Days 21–100: Up to \$200 coinsurance per day
- Days 101 and beyond: All costs

Note

Your doctor or other health care provider may recommend you get services more often than Medicare covers. Or, they may recommend services that Medicare doesn't cover. If this happens, you may have to pay some or all of the costs. Ask questions so you understand why your doctor is recommending certain services and if, or how much, Medicare will pay for them.

What it is

Skilled care is nursing and therapy care that can only be safely and effectively performed by, or under the supervision of, professionals or technical personnel. It's health care given when you need skilled nursing or skilled therapy to treat, manage, and observe your condition, and evaluate your care.

Medicare-covered services in a skilled nursing facility include, but aren't limited to:

- A semi-private room (a room you share with other patients)
- Meals
- Skilled nursing care
- <u>Physical therapy</u> (if needed to meet your health goal)
- Occupational therapy (if needed to meet your health goal)
- <u>Speech-language pathology services</u> (if they're needed to meet your health goal)
- Medical social services

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- Medications
- Medical supplies and equipment used in the facility
- Ambulance transportation (when other transportation endangers your health) to the nearest supplier of needed services that aren't available at the SNF
- Dietary counseling

Things to know

Learn more about the situations that may impact your coverage and costs.

Related resources

Find nursing homes

More information about skilled nursing facilities

Get help paying for your SNF care

Your rights in a skilled nursing facility

Skilled Nursing Facility Checklist [PDF, 174 KB]

Medicare & You: Planning for Discharge from a Health Care

Setting (video)