Eligible Medicare Patients Can Receive Skilled Nursing Care at Eligible Skilled Nursing Facilities Without a Prior Hospital Stay

participating in , an Accountable Care

Organization (ACO). An ACO is a group of doctors, hospitals, and/or other health care providers that work together to improve the quality and experience of care you receive.

What's a skilled nursing facility?

- A **skilled nursing facility** provides skilled nursing care and/or rehabilitation services on a daily basis. Skilled nursing care can only be given or supervised by certain providers. Care includes services like:
 - Medical social services
 - Occupational therapy
 - Physical therapy
 - Skilled nursing care
 - Speech-language pathology



Medicare patients have to stay in a hospital 3 days in a row before Medicare will pay for their stay at a skilled nursing facility.



When an ACO partners with a skilled nursing facility, you may be able to get skilled nursing care without staying at a hospital first.

Your doctor may decide that you need daily skilled care to help improve or maintain your current condition.

What is the skilled nursing facility 3-day rule waiver?

- Medicare patients have to stay in a hospital for 3 days in a row before Medicare will pay for their stay at a skilled nursing facility. This is called the skilled nursing facility 3-day rule. Some ACOs are approved for a skilled nursing facility 3-day rule waiver and have partnered with skilled nursing facilities. This means you may be able to get skilled nursing and/or rehabilitative care in a skilled nursing facility without staying at a hospital first.
- What does the skilled nursing facility 3-day rule waiver mean for me?
 - Our ACO is approved to send you for skilled nursing facility or rehabilitation care even if you haven't stayed in a hospital for 3 days first, which is usually a requirement in Medicare. This allows your doctor to be more flexible with the care they recommend for you.
 - For you to qualify for this benefit, we'd have to decide that you need skilled nursing facility care and meet certain other eligibility requirements. The skilled nursing facility 3day rule waiver applies only to eligible patients who get care from one of our skilled nursing facility partners. All of our partners have at least a 3-star rating according to the Care Compare website.

Care Compare on Medicare.gov keeps track of:

- The number of beds at the facility, and how many are being used (occupied)
- Nursing staff hours per resident per day
- Facility inspection summary results
- Deficiency and complaint information
- Quality measures for each nursing home

Are my Medicare benefits changing?

No. Your Medicare benefits are not changing. You still have the right to visit any doctor, hospital, or other provider that accepts Medicare at any time, just like you do now.





- If you choose a skilled nursing facility or other facility that your doctor does not partner with, normal Medicare coverage requirements apply. This means Medicare will not pay for your skilled nursing facility stay without a prior 3-day inpatient hospital stay.
- ▶ The skilled nursing facility 3-day rule waiver also does not change how much you would pay for skilled nursing and/or rehabilitation services.

If you're admitted to a skilled nursing facility, ask your doctor if that skilled nursing
facility has partnered with

Important!

nursing an If you'd like at your nex	glad to talk with you about this benefit and how it could work for you if you need d/or rehabilitation care. I can also share information about our skilled nursing facility per to know more, ask You can also call 1-800-MEDICARE and to learn more about ACOs (TTY users should call 1-877-486-2048), or visit	partı
	gov/acos.html.	
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