



Skilled Nursing Facility (SNF) Services

Last Revision/Review Date: 09/19/2018

P&P # C.3.04

A. Documentation Required:

In order to facilitate the prior authorization process, referral requests must include the following:

1. Physician History and Physical/Progress Notes;
2. Hospital Discharge Summaries;
3. Medication Administration Records;
4. Nursing Assessment/Progress Notes;
5. Skilled Treatment Record (e.g. skin care/wound care; respiratory treatments oxygen; etc.);
6. Rehabilitation Therapy Evaluation/Progress Notes.

B. Criteria for Medical Necessity:

Skilled Nursing Facility services are medically necessary if **ALL** of the following criteria are met:

1. The services are ordered by a Physician or designated practitioner;
2. The services must be provided daily and reasonably necessary for the treatment of the patient's illness or injury within accepted standards of medical practice;
3. Care must be delivered or supervised by licensed technical or professional medical personnel in order to obtain the specified treatment outcomes and assure patient safety;
4. Care services must be skilled (See Definitions).

C. Indications Considered Investigational or not of Medical Necessity:

1. Domiciliary, non-health-related services and personal care/assistance in activities of daily living (examples include: feeding, dressing, bathing, transferring and ambulating).
2. Health-related services which do not seek to cure or services which are provided during periods when the medical condition of the patient is not anticipated to change.
3. Services that can be safely and effectively performed by a trained non-medical person.
4. Continued skilled services when the patient has reached their optimal level of recovery/function and no longer able to demonstrate significant progress. (maintenance level) or participate in the skilled nursing or therapy treatment plan.
5. Skilled care which exceeds accepted standards of medical practice/ treatment in quantity and duration.