



Covered Benefit: Skilled Nursing Facility Services

CMP Published: Yes No

CPG Published: Yes No

Definition: Skilled Nursing Facility Services are rendered to a member who is an inpatient of a skilled nursing facility (SNF) and include: skilled nursing and/or rehabilitation care, room and board, therapies (physical, occupational, speech), medical social services, pharmaceuticals, durable medical equipment, additional nursing and personal care and other necessary routine services.

Benefit Packages: Rite Care, Children with Special Health Care Needs, Substitute Care, and Rhody Health Partners

Coverage Limitations: All SNF admissions, as ordered by a network physician, must meet medical necessity criteria and require prior authorization.

RHP members may stay inpatient for up to 30 consecutive days in a skilled nursing facility. Skilled level must meet medical necessity. However, the 30 consecutive days may also include some days at a “custodial only” level of care. RHP members who have SNF stays longer than 30 days are disenrolled from RHP by the Department of Human Services (DHS) and enrolled in Medical Assistance.

Exclusions:

Extended Family Planning (EFP) members have a restricted benefit package which does not include SNF services.

RHP members receiving hospice services (at a hospice level of care) while in a SNF are receiving an out-of-plan benefit; payable by DHS not Neighborhood.

Coverage Includes:

SNF services are covered for members (see benefit packages above) while inpatient at a skilled nursing facility during an approved admission. Skilled level of care (levels 1-4) are covered however, custodial level of care is covered for RHP members only.

Admission to an in-network skilled nursing facility is required unless the network does not have the appropriate SNF setting for an individual member.

Episodes of care occur in the following setting:

Skilled Nursing Facility (POS 31)

Custodial Level of Care –RHP only (POS 33)



Notes:

Non-emergency ambulance transfers from a SNF for outpatient services and the return ambulance trip to the SNF are considered part of the SNF stay and not separately billable to Neighborhood.

For more information regarding covered hospice services please refer to the Hospice Benefit Coverage Summary.

Publication Date:

9/1/2010

Revision Date:

9/1/2011