Checklist: Skilled nursing facility (SNF) documentation

This checklist is being provided as a tool to assist skilled nursing facilities (SNF) when responding to medical record documentation requests. It is the responsibility of the provider of services to ensure the correct submission of all required documentation.

Review the following prior to submitting documentation for medical review.

- ☐ Please be sure documentation submitted is legible.
- ☐ Please submit records for all dates of service on the claim.

Please ensure the medical records submitted provide proof the service(s) was ordered and rendered. Also, ensure the medical records provide justification supporting medical necessity for the service by submission of the following documentation:

- ☐ Medical records for 30 days prior to each assessment reference date (ARD)
- ☐ Hospital Documentation
  - ☐ Acute hospital discharge summary and transfer form
  - ☐ Medication administration records (MAR)
- ☐ Minimum Data Set (MDS)
  - ☐ Initial Care Plan signatures and dates by the team
  - ☐ Assessment and re-assessments, care plan revisions in MDS
- ☐ Physician/Provider Documentation
  - ☐ Physician's orders specifying need for SNF care with signature and date
  - ☐ History and physical
  - ☐ Admission assessment
  - ☐ Physician's certification and recertification for skilled care with signature and date
  - ☐ Physician's orders physician/non-physician practitioner (NPP) order/intent signed and dated
  - ☐ Physician's progress notes
- ☐ Nursing Documentation
  - ☐ Nurse's admission assessment signed and dated
  - ☐ Nurse's notes
  - ☐ MARS signed and dated
  - ☐ Treatment records

- ☐ Rehabilitation Documentation
  - ☐ Initial therapy evaluation/treatment plan with G codes, signatures and dates
  - ☐ Therapy evaluation/re-evaluation
  - ☐ Therapy progress notes and medical necessity for continued rehabilitation services
  - ☐ Treatment logs to identify therapy minutes
  - ☐ Signatures/credentials of professionals providing services
- ☐ Any other documentation a provider deems necessary to support medical necessity of services billed, as well as documentation specifically requested in the ADR letter.

Facilities should refer to the Centers for Medicare & Medicaid Services (CMS) official guidelines for SNFs at https://www.cms.gov/center/snf.asp for additional information.

Print Form