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Medicare Skilled Nursing Facility Appeals: **Documentation That Supports Discharge Decisions**

This handout provides guidance for documenting clearly and consistently to support Medicare discharge decisions, discharge planning, and appeals review.

It highlights what reviewers look for, common documentation problems, and best practices for creating strong documentation that supports the beneficiary's condition, skilled needs, and discharge readiness.

Why Documentation Matters

Reviewers do not see the beneficiary (patient) in person and rely entirely on the medical record during the appeals process. Documentation must clearly explain whether skilled care is still needed, why discharge is appropriate, and whether the beneficiary is ready for the next level of care. Unclear documentation may affect appeal outcomes.

What Reviewers Look for in the Records

Reviewers look for clear documentation of:

- Skilled nursing or therapy needs
- Current functional status
- Progress, maintenance, or decline, such as whether goals have been met in physical therapy
- Barriers affecting discharge readiness
- Clear discharge rationale

Documentation should support one clear picture of the beneficiary's condition, skilled needs, progress, and discharge plan.

This handout is part of Acentra Health's **Skilled Nursing Facility Appeals Education Toolkit**. Find related training videos and printable handouts at www.acentraqio.com/providers/snf-appeals-toolkit.

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Skilled Need, Progress, and Maintenance

Skilled care does not always require improvement.

Documentation should focus on:

- Current skilled needs
- Functional status
- Safety concern
- Transition planning

Avoid relying on terms like “plateaued” or “no further progress.”

Instead, focus on:

- Ongoing skilled needs
- Maintenance
- Prevention of decline
- Readiness for the next level of care

Clear Discharge Rationale

Documentation should clearly explain:

- Why the discharge is appropriate.
- The beneficiary’s current status, goals, and barriers.
- The supports and services that will be in place after discharge.

The record should support why the beneficiary is considered ready for the next level of care.

Common Documentation Problems

Vague or Incomplete Notes

The record doesn’t include enough detail about the beneficiary’s condition, care, or functional status.

Missing Clinical Rationale for Decisions

The documentation doesn't clearly explain why Medicare-covered skilled care is continuing or ending.

Progress not Clearly Defined

Beneficiary improvement, maintenance, or decline is not clearly documented.

Conflicting Documentation

Nursing, therapy, physician/provider documentation, case management, and discharge planning should all support the same overall picture of the beneficiary's condition and discharge readiness.

Consistent documentation helps support care decisions. However, conflicting documentation creates confusion during review:

Example 1: Therapy documents ongoing fall risk and extensive assistance needs with transfers, while another note describes the beneficiary as stable and ready for discharge home.

Example 2: Nursing documentation describes confusion and poor safety awareness, while another note states the beneficiary can safely manage independently at home.

Notes across disciplines describe different beneficiary conditions, goals, or discharge plans.

Tips for Stronger Documentation

- Use measurable, specific descriptions whenever possible.
- Clearly explain why skilled care is or is not needed.
- Document functional status, safety concerns, and barriers affecting discharge.
- Update goals and care plans regularly based on the beneficiary's progress.
- Document teaching and discharge preparation provided to beneficiaries and caregivers.
- Ensure nursing, therapy, provider, and discharge planning documentation remain aligned.

Clear, complete, measurable, and consistent documentation makes it easier for reviewers to understand and support care and discharge decisions.

Provider Resources

- **Check appeal status online** on Acentra Health's website, 24/7: www.acentraqio.com/casestatus
- **News and updates regarding appeals** on Acentra Health's website: www.acentraqio.com/providers/appeals
- Contact information for Acentra Health: www.acentraqio.com/contact
- **Keep your facility's contact information updated with Acentra Health** to receive *timely* communications without unnecessary delays: https://acentraqio.com/providers/updatecontactinfo/
- **Access training and educational materials:** www.acentraqio.com/providers
- **Sign up for our newsletter:** www.acentraqio.com/newsletters
  You will receive newsletters and special bulletins with the latest information and updates from Acentra Health and organizations such as the Centers for Medicare & Medicaid Services (CMS).