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Medicare Skilled Nursing Facility Appeals: **Preventing Appeals: Key Reminders**

This handout highlights common reasons Medicare appeals occur and provides practical steps staff can take to help prevent avoidable appeals.

Common Reasons Appeals Occur

- Beneficiaries (patients) and families may feel confused or overwhelmed.
- Beneficiaries may feel unprepared for discharge and may have concerns about safety and support after discharge.
- Beneficiaries and families do not understand why services are ending and coverage may feel sudden or unexpected.
- Expectations may differ between staff and beneficiaries/families.
- Discharge discussions start too late (many times not until the Notice of Medicare Non-Coverage [NOMNC] is issued).
- Poor communication by staff.
- Documentation that does not clearly support the discharge plan.

Early Warning Signs an Appeal May Occur

- Repeated questions about Medicare coverage or discharge.
- Surprise, frustration, or confusion.
- Family disagreements about discharge readiness.
- Concerns about safety or support after discharge.

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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- Statements such as
  - “Nobody explained this to us.”
  - “I don’t think they’re ready.”
  - “We can’t manage this at home.”

These situations may indicate that additional communication and discharge planning discussions are needed.

Steps Staff Can Take to Help Prevent Appeals

- Begin discharge planning early and continue discussions throughout the stay.
- Reinforce expectations regularly.
- Explain why services are continuing or ending using simple language (avoid the use of medical jargon and language that’s difficult to understand).
- Encourage questions and ongoing discussion.
- Include caregivers and representatives whenever appropriate, especially if beneficiaries have cognitive issues or have difficulty understanding/remembering.
- Ensure residents and families understand
  - The discharge plan
  - What support may still be needed
  - What care will look like after discharge

Nothing about the discharge process should feel sudden or unexpected when the NOMNC is issued.

Documentation Reminders

Documentation should clearly explain

- Current skilled needs
- Functional status
- Progress, maintenance, or decline
- Barriers affecting discharge
- Why the patient is ready for the next level of care

Avoid vague phrases such as

- “Doing better.”
- “Participating well.”
- “Plateaued.”

Use measurable, specific descriptions whenever possible.

Communication Tips for Talking with Beneficiaries and Families

- Use simple, plain language and avoid Medicare or clinical jargon.
- Reinforce information throughout the stay.
- Allow time for questions and discussion.
- Explain information step-by-step.
- Do not assume understanding by simply asking, “Do you understand?” Ask beneficiaries or caregivers to explain the plan back in their own words.
- Remain calm, patient, and supportive during difficult conversations.

Strong communication and documentation help beneficiaries and families feel informed, prepared, and supported throughout the discharge process.

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).