

Question: My spouse went into a nursing home for rehabilitation, does Medicare cover any of this?

Answer: Medicare Part A covers 100 days in a skilled nursing facility with some coinsurance costs. After day 100 of an inpatient SNF (Skilled Nursing Facility) stay, you are responsible for all costs. Medicare Part A will also cover 90 days of inpatient hospital rehab with some coinsurance costs after you meet your Part A deductible. Beginning on day 91, you will begin to tap into your "lifetime reserve days." Medicare Part A (Hospital Insurance) covers skilled nursing care in certain conditions for a limited time (short-term basis) if all these conditions are met:

You have Part A and have days left in your benefit period to use.

You have a qualifying hospital stay.

Your doctor has decided that you need daily skilled care. It must be given by, or under the supervision of, skilled nursing or therapy staff.

You get these skilled services in a SNF that is certified by Medicare.

You need these skilled services for a medical condition that is either:

A hospital-related medical condition treated during your qualifying 3-day inpatient hospital stay, even if it was not the reason you were admitted.

A condition that started while you were getting care in the SNF for a hospital-related medical condition (for example, if you develop an infection that requires IV antibiotics while you are getting SNF care).

Here is a summary of your costs in Original Medicare. You pay:

Days 1–20: \$0 for each benefit period.

Days 21–100: \$185.50 coinsurance per day of each benefit period.

Days 101 and beyond: All costs are paid by you.

Keep in mind, Medicare doesn't cover long-term care (also called custodial care).

For details on your coverage refer to the [medicare.gov](https://www.medicare.gov) website or call the Stow COA to set up an appointment with a SHINE counselor.