Long Term Care Fact Sheet

The Issue

For over twenty five years, nurse practitioners have been authorized to provide Medicare services to residents of long term care facilities. They are reimbursed at 85% of the Medicare physician rate for performing the same service. During that time, nurse practitioners have proved to be competent providers. Studies have demonstrated that their participation in the health care of residents/patients in long term care facilities has increased the quality of care provided to those patients.

Unfortunately, the conditions of participation in the rules and regulations governing reimbursable Medicare services in skilled nursing facilities (SNF), have set limits on their ability to provide care in these facilities. At the time the initial regulations were written, there was limited understanding of the skills and abilities of nurse practitioners. As nurse practitioners have demonstrated their skill in working with the chronically and acutely ill in these settings, the requirements for physician contact with the patient have become obstructive rather than helpful. In particular, is the requirement for a physician to perform the admitting examination and the first and alternating monthly assessments on a patient in a skilled nursing facility (SNF). While these restrictions do not apply to other nursing facilities, they inappropriately remain in place for skilled nursing facilities (SNF).

Needed

To solve this problem, a change is needed in the Medicare Conditions of Participation for nurse practitioners to be able to perform the admitting examination and the required monthly visit of a patient in a skilled nursing facility (SNF).

Nurse practitioners are high quality primary care providers who have worked successfully with elderly patients in all settings, including skilled nursing facilities. They are specially trained to manage the problems of chronic illness in the aging population. The inability to conduct these examinations has serious ramifications for patient care in these facilities. It is not logical that nurse practitioners, who can conduct admitting physical examinations and follow up in a variety of other settings, are not allowed to conduct the same in skilled nursing facilities (SNF).