

## Readmissions: What Code Should I Submit?

### Initial Comprehensive Nursing Facility Evaluation vs. Initial Nursing Facility Services CPT Code\*

| Scenario:                                                                                                                              | Initial Comprehensive Nursing Facility Evaluation <sup>1</sup> Necessary? | Initial Code vs Subsequent (Subs.): | Place of Service Code: | Notes:                                                                                                                                                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Part A SNF patient returns in less than 3 days (i.e., “Interrupted Stay <sup>2</sup> ”)                                                | No                                                                        | Subs. 99307-99310                   | 31                     | Some payers/intermediaries may accept Initial 99304-99306 code if supported by documentation                                                                                                                           |
| Part A SNF patient returns to Part A SNF after >3 days                                                                                 | Yes                                                                       | Initial 99304-99306                 | 31                     | New admission/stay; append modifier-AI if attending physician of record <sup>1</sup>                                                                                                                                   |
| Part A SNF patient returns from hospital to long-term custodial                                                                        | Yes                                                                       | Initial 99304-99306                 | 32                     | New admission to custodial care; facility performs Initial Comprehensive Assessment and Care Plan                                                                                                                      |
| LTC/custodial resident returns from hospital under Part A SNF benefit                                                                  | Yes                                                                       | Initial 99304-99306                 | 31                     | Facility switches from long term (POS 32) to skilled (POS 31); new Comprehensive Assessment required; -AI if attending physician                                                                                       |
| LTC/custodial resident returns from a hospitalization to a custodial/LTC bed <b>without formal discharge</b> from the nursing facility | No                                                                        | Subs. 99307-99310                   | 32                     | Some payers/intermediaries may accept an Initial 99304-99306 code, if supported by documentation.                                                                                                                      |
| LTC/custodial resident returns from a hospitalization to a custodial/LTC bed <b>after formal discharge</b> from the nursing facility   | Yes                                                                       | Initial 99304-99306                 | 32                     | A Nursing Facility Discharge Management service 99315 or 99316 would be appropriate if it met the coding requirements (which includes a face-to-face encounter); a discharge summary would be required in either case. |

\*Medicare Advantage and commercial plans may follow different policies. Always confirm payer-specific policies and any state-specific regulations

<sup>1</sup>See [Medicare Claims Processing Manual, Chapter 12, 30.6.13 - Nursing Facility Services](#)

<sup>2</sup>See [Medicare Claims Processing Manual, Chapter 6, 120.2 - Interrupted Stay Policy](#)

#### REFERENCES

1. State Operations Manual, Appendix PP-Guidance to Surveyors for Long Term Care Facilities ([https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap\\_pp\\_guidelines\\_ltc.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltc.pdf))
2. Medicare Benefit Policy Manual, Chapter 8-Coverage of Extended Care (SNF) Services Under Hospital Insurance (<https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/bp102c08pdf.pdf>)
3. Medicare Claims Processing Manual, Chapter 6—SNF Inpatient Part A Billing and SNF Consolidated Billing (<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c06.pdf>)
4. Medicare Claims Processing Manual, Chapter 12—Physicians/Nonphysicians Practitioners (<https://go.cms.gov/manual-physicians-nonphysician-practitioners>)
5. American Medical Association. CPT 2026: Professional Edition. Chicago: AMA Press; 2025.