

# Skilled Nursing ADF Checklist

Copy of Claim Form

Documentation to Support the Dates  
of Service Billed

## Hospital Documentation

Hospital Discharge Summaries

Transfer Forms

Medication Administration Records

## Documentation to Support Each of the HIPPS Code(s) Billed, Including:

Notes Related to Each of the Assessment  
Reference Date(s) (ARD)

A Hardcopy Version of Each MDS Related to the  
Billing Period Being Reviewed

Documentation to Support Each of the Assessment  
Look Back Or Observation Periods Through ARD

## Physician Documentation

Physician Certifications & Recertification for Skilled  
Care, Including Signature/Date Of Physician

Recertifications Must Include the Need for  
Continued Skilled Care

Physician Orders, Including Admission Orders

Physician Progress Notes

Physician History & Physical

## Nursing Documentation

Nursing Notes & Admission Assessment

Patient Care Plans

Vital Sign Records

Medication & IV Administration Records

Skin Care/Wound Care Treatment Sheets

Respiratory Treatments & O2 Therapy Records

## Therapy Documentation

Initial Therapy Evaluations & Reevaluations

Objective & Measurable Prior Level of Function  
& Current

Level of Function to Support Functional Decline

Rehabilitation Therapy Notes, Including  
Progress Notes

Treatment Records, Grids, Or Logs

Actual Therapy Minutes Provided

## Other

All Other Documentation Supporting the  
Beneficiaries' Need for & Delivery of Skilled Services

SNF Advanced Beneficiary Notice (If Applicable)

Notice of Medicare Non Coverage (If Applicable)