Assisted Living vs. Skilled Nursing: What's the Difference?

When you're helping an aging parent navigate their next stage of care, one of the most important things to understand is the difference between assisted living and skilled nursing.

These two types of care serve different purposes. Knowing which one your parent may need can help you make more informed decisions, ask the right questions, and better understand the costs involved.

1. Assisted Living

What is it?

Assisted living is generally designed for older adults who can no longer manage all aspects of daily life independently but do not need continuous skilled medical care.

Think of it as a residential setting with support and assistance available throughout the day.

What services are typically provided?

- Help with bathing, dressing, grooming and personal hygiene
- Medication reminders or medication administration, depending on the community and state regulations
- Meals and dining services
- Housekeeping and laundry
- Help with mobility and getting around
- Social activities, outings and opportunities for companionship
- Staff available around the clock for assistance and emergencies

Who might benefit from assisted living?

An older adult who:

- Is having difficulty managing household responsibilities.
- Needs help with daily activities such as bathing, dressing or taking medications.
- Is becoming isolated or would benefit from more social interaction.
- Is no longer safe living completely independently.
- Does not require ongoing skilled nursing care.

Important to know: Assisted living communities vary considerably in the services they provide. Some offer additional memory care or higher levels of personal assistance, while others may not be equipped to handle more complex medical needs.

2. Skilled Nursing Facility (SNF) / Nursing Home

What is it?

A skilled nursing facility provides a higher level of medical and nursing care for people who need services that must be provided by, or under the supervision of, licensed healthcare professionals.

Skilled nursing is often used for short-term rehabilitation after a hospital stay, but nursing homes can also provide long-term residential care.

What services are typically provided?

- Around-the-clock nursing care
- Medical monitoring and treatment
- Wound care and complex medication management
- Physical, occupational and speech therapy
- Assistance with bathing, dressing, eating and other daily activities
- Care for people with more complex medical needs
- Rehabilitation following surgery, illness, injury or a hospital stay

Who might need skilled nursing care?

An older adult who:

- Needs ongoing nursing assessments or medical treatments.
- Is recovering from a stroke, surgery, serious illness or injury.
- Needs physical, occupational or speech therapy as part of a rehabilitation plan.
- Has medical needs that cannot safely be managed in an assisted living setting.
- Requires a higher level of supervision and care than assisted living can provide.

Important to know: A skilled nursing facility stay does not necessarily mean your parent will live in a nursing home permanently. Many people go to a skilled nursing facility temporarily after a hospital stay for rehabilitation and then return home or move to assisted living.

3. Assisted Living vs. Skilled Nursing at a Glance

Assisted Living

- Primary purpose: Help with everyday living.
- Medical care: Limited medical support; services vary by community.
- Nursing care: Not generally continuous skilled nursing care.
- Length of stay: Often long-term.
- Environment: More residential, apartment-like setting.
- Typical need: Help with daily activities and personal care.

Skilled Nursing

- Primary purpose: Medical care, nursing services and rehabilitation.
- Medical care: Higher level of medical and nursing support.
- Nursing care: Licensed nursing staff and skilled services.
- Length of stay: May be short-term rehabilitation or long-term care.
- Environment: More clinical and medically focused.
- Typical need: Ongoing nursing care, medical treatment or rehabilitation.

4. What Do They Cost?

Cost is one of the biggest considerations when choosing care for an aging parent. It is also important to understand that the advertised monthly rate may not be the final amount you pay.

Here are some helpful pricing guidelines using the 2025 CareScout Cost of Care Survey, released in 2026.

North Carolina median costs:

- Assisted living: Approximately $6,496 per month but when I researched facilities in January 2025 the costs were closer to $7,500, base rate. (Every assistance is extra)
- Skilled nursing, shared (semi-private) room: Approximately $320 per day, or $9,733 per month.
- Skilled nursing, private room: Approximately $355 per day, or $10,798 per month.

National median costs:

- Assisted living: Approximately $6,200 per month.
- Skilled nursing, shared (semi-private) room: Approximately $315 per day, or $9,581 per month.
- Skilled nursing, private room: Approximately $355 per day, or $10,798 per month.

These are median figures, not guaranteed prices or quotes. Actual costs can be higher or lower depending on the location, facility, room type and level of care needed.

**Watch for additional fees*

When comparing assisted living communities, ask whether the monthly rate includes:

- Medication management
- Assistance with bathing and dressing
- Additional personal care
- Incontinence supplies or services
- Transportation to appointments
- Special diets or additional meal services
- Memory care services
- Additional care as your parent's needs change

For skilled nursing, ask about room rates, what is included, insurance coverage, therapy costs and what you may owe if Medicare coverage ends.

Always request a written breakdown of the costs before making a decision.

5. What About Medicare and Medicaid?

This is an area where families can become confused, and it is important to understand the difference.

Medicare

Medicare generally does not pay for long-term assisted living or long-term custodial nursing home care.

However, Medicare Part A may cover a qualifying short-term stay in a Medicare-certified skilled nursing facility after a hospital stay, when specific medical and coverage requirements are met.

For Original Medicare, this generally includes:

- A qualifying inpatient hospital stay of at least three consecutive days, although certain waivers and Medicare Advantage exceptions exist.
- A medical need for daily skilled nursing or therapy services.
- Other Medicare eligibility and coverage requirements.

For 2026, Original Medicare's skilled nursing facility coverage generally works as follows:

- Days 1–20: $0 daily coinsurance after the applicable Part A deductible.
- Days 21–100: $217 per day.
- After day 100: You pay all costs.

Coverage is limited to 100 days per benefit period, and not everyone qualifies for the full 100 days.

Medicaid

Medicaid may help pay for nursing home care for people who meet the program's financial and medical eligibility requirements.

Some states also offer Medicaid programs that help eligible individuals receive services in assisted living or other community settings. What is covered varies by state and program, and room and board may not be included.

**It is important to look into these options early rather than waiting until a crisis.*

6. Why You Need to Know the Difference

When a parent begins having health problems or can no longer live safely on their own, families are often faced with making decisions quickly.

A hospital discharge planner may recommend rehabilitation in a skilled nursing facility. A doctor may suggest that assisted living is no longer enough. Or you may be researching facilities because you know your parent needs more help than you can provide at home.

Understanding the difference helps you:

- Recognize what level of care your parent actually needs.
- Ask more informed questions when speaking with doctors and discharge planners.
- Avoid choosing a facility that cannot provide the services your parent requires.
- Understand what Medicare may cover and what will likely be paid out of pocket.
- Compare costs and plan for future expenses.
- Recognize that your parent's needs may change over time.

**One thing I would encourage every family to do is ask not only what a facility can provide today, but also what happens if your parent's needs increase.*

Can they remain there if their mobility declines?

What if they need more help with medications?

What happens if they develop dementia or require more medical attention?

These are important questions to ask before making a decision.

A Few Questions to Ask When Touring a Facility (for my full free list visit parentcareworkshop.com)

- What level of care are you licensed and equipped to provide?
- Is nursing staff available around the clock?
- What services are included in the monthly rate?
- What additional fees should we expect?
- How do you handle changes in a resident's health or care needs?
- What happens if a resident needs more care than you can provide?
- Do you accept Medicaid, Medicare or long-term care insurance for any services?
- Can you provide a written breakdown of all costs?

A Final Thought

Choosing care for an aging parent is rarely a simple decision. There are medical needs, financial considerations, family discussions and, of course, emotions involved.

You don't have to figure everything out at once. Start by understanding the level of care your parent needs, ask questions, and take the time to understand your options.

The more you know, the better prepared you will be to make decisions with less stress and more clarity.

A Friendly Disclaimer

This information is intended for general educational and informational purposes only. It is not medical, legal, financial or professional care advice. Every older adult has different needs, and services, licensing requirements, costs and coverage vary by state and facility. Always consult with your parent's healthcare providers and appropriate professionals when determining the right level of care. Confirm current pricing, services and insurance coverage directly with each facility and your insurance provider.