How It’s Made

Your FY 2027 SNF VBP Incentive Payment Multiplier

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ACCREDITED PROVIDER
AMERICAN NURSES CREDENTIALING CENTER

APPROVAL STATEMENT DISCLOSURE

- This nursing continuing professional development activity was approved by Broad River Rehab, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.
- This course has been approved for 1.5 contact hours.

CONFLICT OF INTEREST DISCLOSURE

- Broad River Rehab is not charging for this educational offering and has no financial or other conflicts of interest regarding this program.

SUCCESSFUL COMPLETION REQUIREMENTS

- **Live, virtual**
  - In order to obtain nursing contact hours, you must participate in the entire program, participate in audience polling and/or Q&A and complete the evaluation.

DISCLOSURE OF THE EXPIRATION DATE FOR AWARDING CONTACT HOURS FOR ENDURING PROGRAMS

- Contact hours for this program will not be awarded after 1 week

FY 2027 SNF VBP IPM

Learning Objectives

- Recognize the components of the incentive multiplier scoring methodology
- Differentiate between the improvement and achievement score
- Understand the score normalization methodology and current incentive multiplier
- Apply knowledge to an example IPM scorecard

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Resources

- MDS 3.0 v1.20.1 Data Sets and Manual
- SNF VBP
- FY 2027 SNF VBP Program Fact Sheet
- MDS 3.0 Quality Measure Manual v18.0
- SNF QRP MDS- Based Technical Specifications v8.0
- 1. SNF QRP Claims-based Technical Specifications
- 2. SNF QRP Claims-based Technical Specifications
- SNF QRP Staffing Measure Technical Specifications
- Within Stay PPR

Value Based Purchasing in a nutshell

- The Centers for Medicare & Medicaid Services (CMS) awards incentive payments to skilled nursing facilities (SNFs) through the SNF VBP Program **to encourage SNFs to improve the quality of care they provide to Medicare beneficiaries** . Performance in the SNF VBP Program began based on a single measure of all-cause hospital readmissions.
- In Section 215 of the Protecting Access to Medicare Act of 2014 (PAMA), Congress added sections 1888(g) and (h) to the Social Security Act, **which required the Secretary of the Department of Health and Human Services (HHS) to establish a SNF VBP Program**. The Program began affecting SNF payments on **October 1, 2018**
- PAMA specifies that under the SNF VBP Program, SNFs:
  - Are evaluated by their performance on a hospital readmission measure;
  - Are assessed on both improvement and achievement, and scored on the higher of the two;
  - Receive quarterly confidential feedback reports containing information about their performance; and
  - Earn incentive payments based on their performance.
  - All SNFs paid under Medicare's SNF Prospective Payment System (PPS) are included in the SNF VBP Program. Inclusion in the SNF VBP Program does not require any action on the part of SNFs

Value Based Purchasing in a nutshell

- As required by statute, CMS withholds 2% of SNFs' Medicare fee-for-service (FFS) Part A payments to fund the program. This 2% is referred to as the **"withhold".**
- CMS is required to redistribute between 50% and 70% of this withhold to SNFs as incentive payments. CMS currently redistributes 60% of the withhold to SNFs as incentive payments, and the **remaining 40%** of the withhold is retained in the Medicare Trust Fund.
- In Section 111 of the Consolidated Appropriations Act, 2021, Congress amended Section 1888(h) of the Social Security Act to allow the HHS Secretary to apply up to **nine** additional measures to the SNF VBP Program for payments for services furnished on or after October 1, 2023 (FY 2024).
- **Eight additional measures** have been approved so far.

Current VBP Measures

TABLE 15: SNF VBP PROGRAM MEASURES AND STATUS IN THE SNF VBP PROGRAM FOR THE FY 2027 PROGRAM YEAR THROUGH THE FY 2030 PROGRAM YEAR

Measure	FY 2027 Program Year	FY 2028 Program Year	FY 2029 Program Year	FY 2030 Program Year
Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM) ★	Included			
Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) measure	Included	Included	Included	Included
Total Nurse Staffing Hours per Resident Day (Total Nurse Staffing) measure ★	Included	Included	Included	Included
Total Nursing Staff Turnover (Nursing Staff Turnover) measure ★	Included	Included	Included	Included
Discharge to Community – Post-Acute Care Measure for Skilled Nursing Facilities (DTC PAC SNF) ★	Included	Included	Included	Included
Percent of Residents Experiencing One or More Falls with Major Injury (Long-Stay) (Falls with Major Injury (Long-Stay)) measure ★	Included	Included	Included	Included
Discharge Function Score for SNFs (DC Function) measure ★	Included	Included	Included	Included
Number of Hospitalizations per 1,000 Long Stay Resident Days (Long Stay Hospitalization) measure ★	Included	Included	Included	Included
Skilled Nursing Facility Within-Stay Potentially Preventable Readmissions (SNF WS PPR) measure		Included	Included	Included

NQF 2510: Skilled Nursing Facility Readmission Measure (SNFRM) (VBP)

- The **SNFRM** measures the rate of all-cause, unplanned hospital readmissions for SNF residents within 30 days of discharge from a prior hospital stay.
- The **SNFRM** is risk adjusted for patient demographics, comorbidities, and other health status variables that affect the probability of a hospital readmission, including diagnoses of COVID-19.
  - 1 year **baseline period:** FY 2023 (October 1, 2022 through September 30, 2023)
  - 1 year **performance period:** FY 2025 (October 1, 2024 through September 30, 2025)
  - **Achievement Threshold:** 0.78709 (**0.21291**),
  - **Benchmark:** 0.82702 (**0.17298**)
  - **Case Minimums:** SNFs must have a minimum of 25 eligible stays during the applicable 1-year performance period in order to be eligible to receive a score on the measure.
  - **Program year impact:** FY 2027

Skilled Nursing Facility (SNF) Healthcare Associated Infections (HAI) Requiring Hospitalization

(VBP, QRP)

- The **Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization** measure estimates the risk-standardized rate of HAIs that are acquired during SNF care and result in hospitalization.
  - 1 year **baseline period:** FY 2023 (October 1, 2022 through September 30, 2023)
  - 1 year **performance period:** FY 2025 (October 1, 2024 through September 30, 2025)
  - **Achievement Threshold:** 0.92219 (**0.07781**)
  - **Benchmark:** 0.94693 (**0.05307**)
  - **Program year impact:** 2027
  - **Case Minimums:** SNFs must have a minimum of 25 eligible stays during the applicable 1-year performance period in order to be eligible to receive a score on the measure.

Total Nursing Hours per Resident Day Staffing (Total Nurse Staffing) measure (VBP, 5-Star)

- The Total Nurse Staffing measure is a structural measure that uses auditable electronic data reported to CMS's Payroll Based Journal (PBJ) system to calculate total nursing hours per resident day. The denominator for the measure is a count of daily resident census derived from Minimum Data Set, Version 3.0 (MDS 3.0) resident assessments. The measure is case-mix adjusted based on the distribution of MDS assessments by PDPM Nursing Category CMI.
  - 1 year **baseline period:** FY 2023 (October 1, 2022 through September 30, 2023)
  - 1 year **performance period:** FY 2025 (October 1, 2024 through September 30, 2025)
  - **Achievement Threshold: 3.21488**
  - **Benchmark: 5.81159**
  - **Program year impact:** 2027
  - **Case Minimums:** SNFs must have a minimum of 25 residents, on average, across all available quarters during the applicable 1-year performance period in order to be eligible to receive a score on the measure.

Nursing Staff Turnover Measure (VBP, 5-Star)

- This is a structural measure that has been collected and publicly reported on Care Compare and assesses the stability of the staffing within an SNF using nursing staff turnover.
  - 1 year **baseline period:** FY 2023 (October 1, 2022 through September 30, 2023)
  - 1 year **performance period:** FY 2025 (October 1, 2024 through September 30, 2025)
  - **Achievement Threshold:** 0.40230 (**0.5977**)
  - **Benchmark:** 0.75655 (**0.24345**)
  - **Program year impact:** FY 2027
  - **Case Minimum:** minimum of 1 eligible stay during the 1-year performance period and at least 5 eligible nursing staff (RNs, LPNs, and nurse aides) during the 3 quarters of PBJ data included in the measure denominator in order to be eligible to receive a score on the measure for the applicable fiscal program year.

Discharge to Community (DTC) (VBP, QRP, 5-Star)

- This measure reports a SNF's risk-standardized rate of Medicare FFS residents who are discharged to the community following a SNF stay, do not have an unplanned readmission to an acute care hospital or LTCH in the 31 days following discharge to community, and remain alive during the 31 days following discharge to community. Community, for this measure, is defined as home or selfcare, with or without home health services.
  - 2-year **baseline period:** FY 2021 through FY 2022 (October 1, 2020, through September 30, 2022)
  - 2-year **performance period:** FY 2024 through FY 2025 (October 1, 2023, through September 30, 2025)
  - **Achievement Threshold: 0.42946**
  - **Benchmark: 0.66370**
  - **Program year impact:** 2027
  - **Case Minimums:** SNFs must have a minimum of 25 eligible stays during the applicable 2-year performance period in order to be eligible to receive a score on the measure

Long Stay Hospitalization Measure per 1000 long-stay resident days (VBP, 5-Star)

- This measure assesses the hospitalization rate of long-stay residents (Part A and Part B only)
  - 1 year **baseline period:** FY 2023 (October 1, 2022 through September 30, 2023)
  - 1 year **performance period**: FY 2025 (October 1, 2024 through September 30, 2025)
  - **Achievement Threshold:** 0.99758 (**2.42**)
  - **Benchmark:** 0.99959 (**0.41**)
  - **Program Year Impact:** FY 2027
  - **Case Minimum:** minimum of 20 eligible stays during the 1-year performance period in order to be eligible to receive a score on the measure for the applicable fiscal program year.

Discharge Function Score measure (VBP, QRP, 5-Star)

- This measure assesses functional status by assessing the percentage of SNF residents who meet or exceed an expected discharge function score and use mobility and self-care items already collected on the MDS.
  - 1 year **baseline period:** FY 2023 (October 1, 2022 through September 30, 2023)
  - 1 year performance period: FY 2025 (October 1, 2024 through September 30, 2025)
  - **Achievement Threshold: 0.40000**
  - **Benchmark: 0.78800**
  - **Program Year Impact:** FY 2027
  - **Case Minimum:** minimum of 20 eligible stays during the 1-year performance period in order to be eligible to receive a score on the measure for the applicable fiscal program year.

Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)

(VBP, QRP ss version, 5-Star)

- This measure assesses the falls with major injury rates of long-stay residents (All payers)
  - 1 year **baseline period:** FY 2023 (October 1, 2022 through September 30, 2023)
  - 1 year performance period: FY 2025 (October 1, 2024 through September 30, 2025)
  - **Achievement Threshold:** 0.95349 (**0.04651**)
  - **Benchmark:** 0.99950 (**0.0005**)
  - **Program Year Impact:** FY 2027
  - **Case Minimum:** minimum of 20 residents in the measure denominator during the 1-year performance period in order to be eligible to receive a score on the measure for the applicable fiscal program year.

Update: SNF QRP Measures Manual v8.0 Beginning with the December 2027 refresh of the Care Compare tool on Medicare.gov, the FMI measure will be respecified to include MDS assessment data, claims data, and encounter data to identify falls with a major injury that occurred during the SNF stay. Full details about the hybrid measure calculation will be provided in V9.0 of this manual, and additional details can be found in the FMI Measure Specification document, available for download on the SNF Quality Reporting Measures Information website.

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Skilled Nursing Facility Within Stay Potentially Preventable Readmissions (SNF WS PPR) (replacement of the SNFRM) (VBP)

- This potentially preventable readmission (PPR) measure estimates the risk-standardized rate of unplanned, potentially preventable readmissions that occur during skilled nursing facility (SNF) stays among Medicare fee-for-service (FFS) beneficiaries.
  - 2-year **baseline period:** FY 2022 and FY 2023 (October 1, 2021, through September 30, 2023)
  - 2-year **performance period:** FY 2025 and 2026 (Oct. 1, 2024 – Sept. 30, 2026)
  - **Achievement Threshold:** 0.86372 (**0.13628**)
  - **Benchmark:** 0.92363 (**0.07637**)
  - **Program Year Impact:** FY 2028
  - **Case Minimum:** minimum of 25 eligible stays during the 2-year performance period in order to be eligible to receive a score on the measure for the applicable fiscal program year.

FY(2028) Performance Standards

TABLE 15: FY 2028 SNF VBP Program Performance Standards

Measure Short Name	Achievement Threshold	Benchmark
SNF HAI Measure	0.92183	0.94491
Total Nurse Staffing Measure	3.29119	5.87448
Nursing Staff Turnover Measure	0.42696	0.76652
Falls with Major Injury (Long-Stay) Measure	0.95455	0.99951
Long Stay Hospitalization Measure	0.99768	0.99963
DC Function Measure	0.41935	0.80879

TABLE 33: FY 2028 SNF VBP Program Performance Standards

Measure Short Name	Achievement Threshold	Benchmark
DTC PAC SNF Measure	0.42612	0.67309
SNF WS PPR Measure	0.86372	0.92363

Baseline period: FY 2024, **Performance Period**: FY 2026 (SNF RM, SNF HAI, Staffing, Turnover, Falls, Long Stay Hospitalization, D/C Function)

Baseline period: FY 2022 – FY 2023, **Performance Period:** FY 2025 – FY 2026 (D/C to Community)

FY(2029) Performance Standards

TABLE 16: FY 2029 SNF VBP PROGRAM PERFORMANCE STANDARDS

Measure Short Name	Achievement Threshold	Benchmark
SNF HAI Measure	0.92102	0.94355
Long Stay Hospitalization Measure	0.99762	0.99960
Nursing Staff Turnover Measure	0.44444	0.77731
Total Nurse Staffing Measure	3.33606	5.98992
DC Function Measure	0.42857	0.84522
Falls with Major Injury (Long-Stay) Measure	0.95522	0.99945

TABLE 16: FY 2029 SNF VBP Program Performance Standards

Measure Short Name	Achievement Threshold	Benchmark
DTC PAC SNF Measure	0.43478	0.68049
SNF WS PPR Measure	0.86219	0.92400

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Scoring

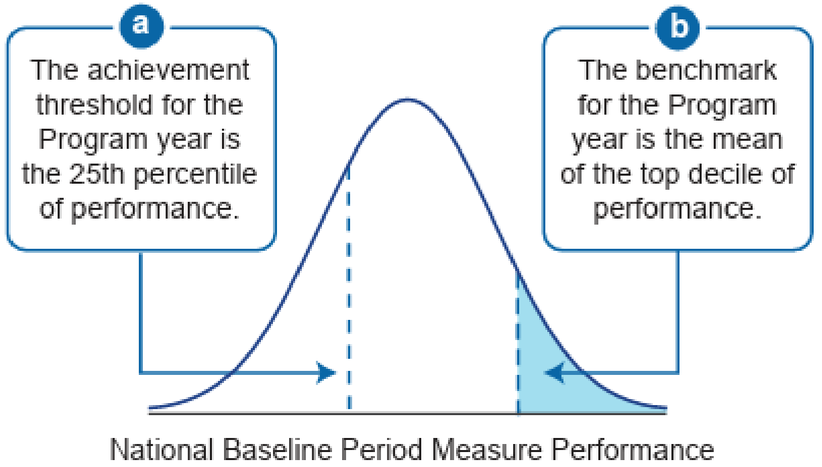
- CMS has adopted the scoring and normalizing methodologies finalized in the FY 2023 Final Rule.
- In order to be eligible to receive a score on the measure for the applicable fiscal program year, Case minimums must be met.
- In the FY 2023 Final Rule, CMS finalized updating the achievement and improvement scoring methodology, applicable to all expanded VBP measures, to allow a SNF to earn:
  - **a maximum of 10 points** on each measure for **achievement**, and
  - **maximum of 9 points** on each measure for **improvement**.

Scoring

- For purposes of determining these points, CMS uses the following definitions:
  - **Achievement threshold:** The 25th percentile of national SNF performance on the measure during the baseline period.
  - **Benchmark:** The mean of the top decile of SNF performance on the measure during the baseline period.

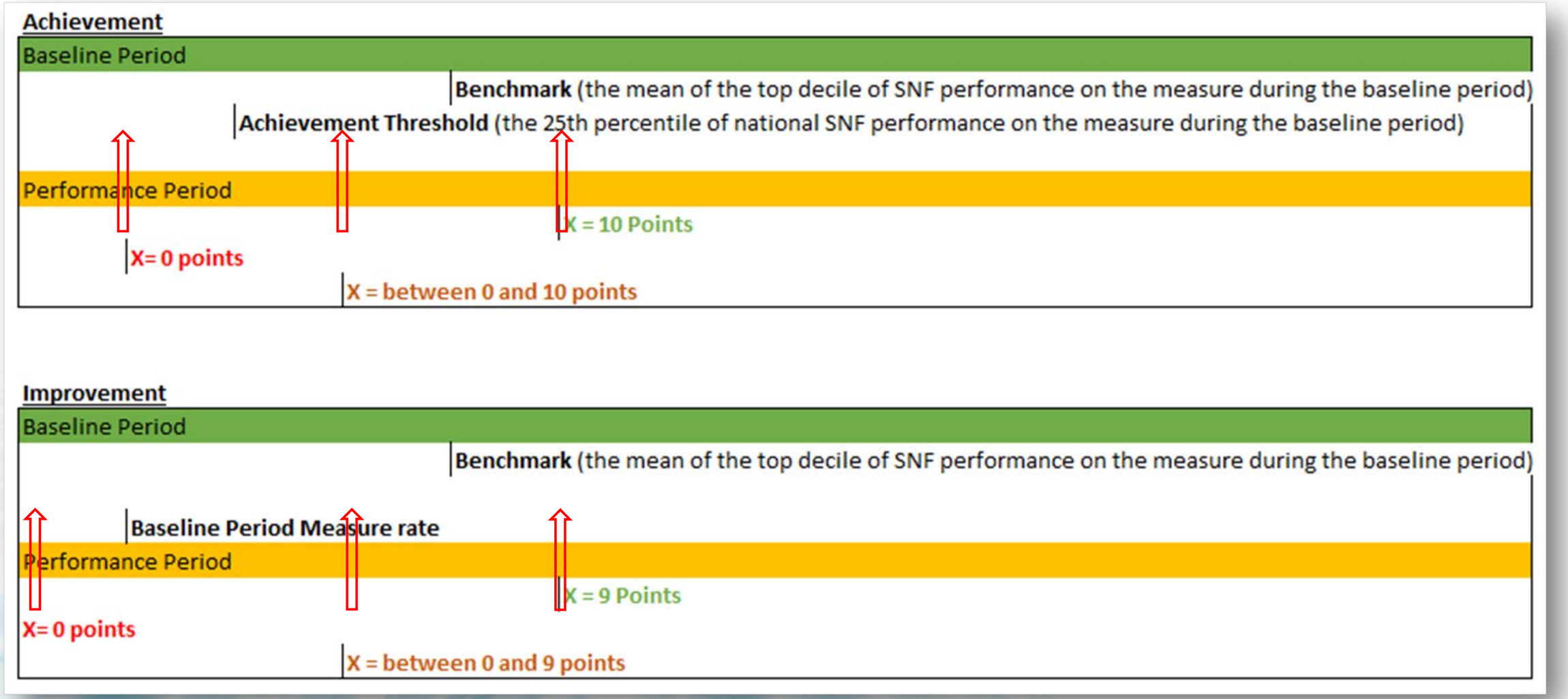
Official Calculations

Performance Standards for the FY 2027 Program Year



Measure	Achievement threshold	Benchmark
SNFRM	0.78709	0.82702
SNF HAI	0.92219	0.94693
DTC PAC SNF	0.42946	0.66370
Long Stay Hospitalization	0.99758	0.99959
Nursing Staff Turnover	0.40230	0.75655
Total Nurse Staffing	3.21488	5.81159
Discharge Function Score	0.40000	0.78800
Falls with Major Injury (Long-Stay)	0.95349	0.99950

Scoring


Achievement
Baseline Period
Benchmark (the mean of the top decile of SNF performance on the measure during the baseline period)
Achievement Threshold (the 25th percentile of national SNF performance on the measure during the baseline period)
Performance Period
X = 10 Points
X= 0 points
X = between 0 and 10 points
Improvement
Baseline Period
Benchmark (the mean of the top decile of SNF performance on the measure during the baseline period)
Baseline Period Measure rate
Performance Period
X = 9 Points
X= 0 points
X = between 0 and 9 points

Scoring

- CMS will score SNFs' performance on achievement and improvement for each measure and award them the higher of the two scores for each measure to be included in the SNF performance score, except in the instance that the SNF does not meet the case minimum threshold for the measure during the applicable baseline period, in which case the SNF would only be scored on achievement.
- CMS will then sum each SNFs' measure points and normalize them to arrive at a SNF performance score that ranges between 0 and 100 points.
- This policy is intended to appropriately recognizes the best performers on each measure and reserves the maximum points for their performance levels while also recognizing that improvement over time is important and should also be rewarded.

Scoring

- CMS has adopted a “normalization” policy for SNF performance scores under the expanded SNF VBP Program, effective with the FY 2026 program year.
- This policy allows for the expansion of the VBP with additional measures while maintaining a score range from 0 – 100 without further changes to the scoring methodology .
- Under this policy, CMS will calculate a raw point total for each SNF by adding up the SNF’s score on each of the measures.

Scoring

- CMS has also adopted a policy that is required to address the changes needed to accommodate the addition of quality measures into the SNF VBP Program's scoring methodology, i.e.,**measure minimums.**
  - **FY 2027 and future program year**: SNFs must report the **minimum number of cases** for **FOUR of the eight** measures during the performance period to receive a SNF Performance Score and value-based incentive payment.

Scoring

- **Example:** A SNF that met the **case minimum** to receive a score on **6** quality measures would receive a score between 0 to 60 points, while a SNF that met the case minimum to receive a score on **four** quality measures would receive a score between 0 to 40 points.
- **Note:** The maximum raw point total for the FY 2027 program year and beyond is 80 points, unless more measures are added.

Scoring

- **Example (cont.):** CMS normalizes the raw point totals by converting them to a 100-point scale, with the normalized values being awarded as the SNF performance score.
- **Normalizing Example:** For FY 2027, for a facility that met the case minimums for all eight measures, CMS would normalize a SNF's raw point total of 65 points out of 80 by converting that total to a 100-point scale, with the result that the SNF would receive a SNF performance score of 81.25.
- **Example:** (65/80) x 100 = 81.25 points

SNF VBP Updates – FY '27 Performance Reports

Table 1 shows whether or not your SNF met the measure minimum requirement to participate in the SNF VBP Program. A SNF meets the requirement if they receive a measure score for at least 4 of the 8 measures. It also includes your SNF's incentive payment multiplier, how to interpret it, and your SNF VBP Program percent rank (national- and state-level).

Table 1. Your SNF's Program Eligibility and Performance

Is your SNF included in the SNF VBP Program? (i.e., met measure minimum?)	Yes
Your SNF's Performance Score (0 - 100; higher is better)	50.23171
Your SNF's Incentive Payment Multiplier (IPM)	0.9977058681
Interpretation of Your SNF's IPM	Your IPM is <1, meaning your SNF will earn back less than it would have in the absence of the SNF VBP Program
Your SNF's Program Percent Rank, National	Your SNF's overall performance was equal to or better than 80.9% of SNFs nationwide
Your SNF's Program Percent Rank, State	Your SNF's overall performance was equal to or better than 83.9% of SNFs in your state

SNF VBP Updates – FY '27 Performance Reports

Table 2 summarizes your SNF's measure performance. This includes your SNF's baseline period measure results, performance period measure results, an indicator of whether your SNF improved or worsened between the baseline and performance periods, measure scores, and percent ranks for each measure score. Additional information on your measure performance is provided in the Measure Results and Measure Scores tabs.

Table 2. Measure Performance and Scores

Quality Measure	Your SNF's Baseline Period Measure Result	Your SNF's Performance Period Measure Result	Compared to the Baseline Period, Your SNF's Performance Period Measure Result is... [a]	Your SNF's Measure Score (0 - 10; higher is better)	Your SNF's Measure Score is...
SNFRM	21.215%	18.614%	better	6.53381	equal to or better than 87.3% of SNFs nationwide
SNF HAI	8.229%	6.995%	better	3.72313	equal to or better than 56.2% of SNFs nationwide
DTC PAC SNF	56.444%	65.239%	better	9.06545	equal to or better than 90.5% of SNFs nationwide
Long Stay Hospitalization	1.789 hospitalizations	1.285 hospitalizations	better	5.55970	equal to or better than 75.1% of SNFs nationwide
Nursing Staff Turnover	60.274%	41.270%	better	5.20007	equal to or better than 60.8% of SNFs nationwide
Total Nurse Staffing	2.720 hours	2.446 hours	worse	0.00000	equal to or better than 13.6% of SNFs nationwide
Discharge Function Score	50.000%	57.353%	better	4.52518	equal to or better than 50.0% of SNFs nationwide
Falls with Major Injury (Long-Stay)	2.326%	2.055%	better	5.57803	equal to or better than 63.3% of SNFs nationwide

SNF VBP Updates – FY '27 Performance Reports

Table 3 provides your SNF's baseline period and performance period results for each measure along with additional information intended to help you interpret your SNF's meas

Table 3. Your SNF's Measure Results

Quality Measure [a,b]	Your SNF's Baseline Period Case Count [c,d]	Met Case Minimum Requirement During Baseline Period? [e]	Your SNF's Performance Period Case Count [c,d]	Met Case Minimum Requirement During Performance Period? [e]	Measure Result Interpretation	Your SNF's Baseline Period Measure Result [f]	Your SNF's Performance Period Measure Result [f]
SNFRM	44 eligible stays	Yes	54 eligible stays	Yes	A lower (↓) result indicates better performance	21.215%	18.614%
SNF HAI	45 eligible stays	Yes	59 eligible stays	Yes	A lower (↓) result indicates better performance	8.229%	6.995%
DTC PAC SNF	83 eligible stays	Yes	78 eligible stays	Yes	A higher (↑) result indicates better performance	56.444%	65.239%
Long Stay Hospitalization	42 eligible long-stay residents	Yes	34 eligible long-stay residents	Yes	A lower (↓) result indicates better performance	1.789 hospitalizations	1.285 hospitalizations
Nursing Staff Turnover	73 eligible nursing staff	Yes	63 eligible nursing staff	Yes	A lower (↓) result indicates better performance	60.274%	41.270%
Total Nurse Staffing	87 average residents	Yes	87 average residents	Yes	A higher (↑) result indicates better performance	2.720 hours	2.446 hours
Discharge Function Score	54 eligible stays	Yes	68 eligible stays	Yes	A higher (↑) result indicates better performance	50.000%	57.353%
Falls with Major Injury (Long-Stay)	301 eligible long-stay residents	Yes	292 eligible long-stay residents	Yes	A lower (↓) result indicates better performance	2.326%	2.055%

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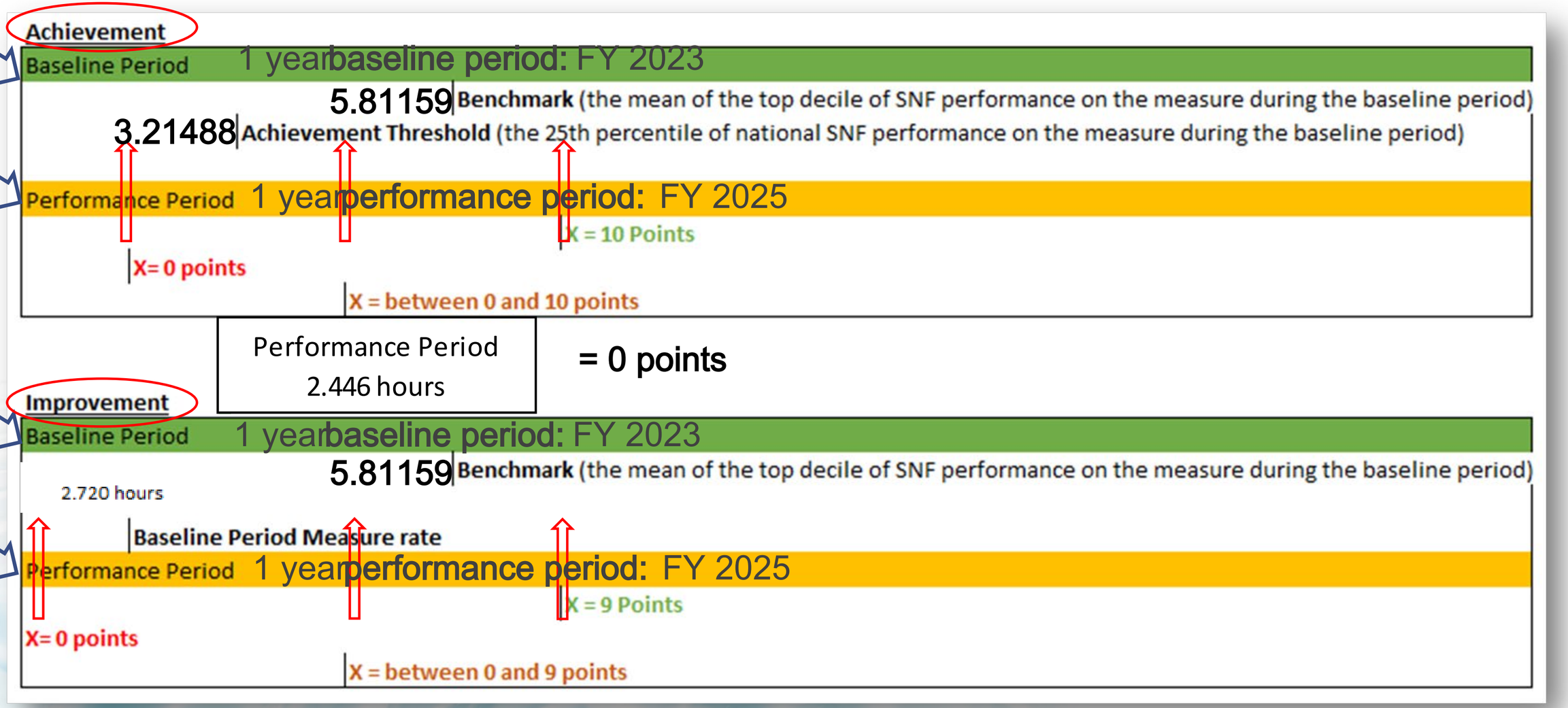
SNF VBP Updates – FY '27 Performance Reports

Table 4 shows your SNF's achievement score, improvement score, and measure score for each measure. Achievement and improvement scores are calculated using your baseline and performance period measure results and applicable performance standards. Your SNF's measure score is the higher of your SNF's achievement and improvement scores.

Table 4. Your SNF's Measure Score Calculations

Quality Measure	Your SNF's Baseline Period Measure Result [a]	Your SNF's Performance Period Measure Result [a]	Your SNF's Achievement Score (0 - 10; higher is better) [b]	Your SNF's Improvement Score (0 - 9; higher is better) [b]	Your SNF's Measure Score (0 - 10; higher is better) [b]
SNFRM	21.215%	18.614%	6.53381	6.14029	6.53381
SNF HAI	8.229%	6.995%	3.35934	3.72313	3.72313
DTC PAC SNF	56.444%	65.239%	9.06545	8.36057	9.06545
Long Stay Hospitalization	1.789 hospitalizations	1.285 hospitalizations	5.55970	3.12319	5.55970
Nursing Staff Turnover	60.274%	41.270%	5.20007	4.78932	5.20007
Total Nurse Staffing	2.720 hours	2.446 hours	0.00000	0.00000	0.00000
Discharge Function Score	50.000%	57.353%	4.52518	2.05313	4.52518
Falls with Major Injury (Long-Stay)	2.326%	2.055%	5.57803	0.69069	5.57803

Scoring / Staffing Ex.



SNF VBP Updates – FY '27 Performance Reports

Table 6. Your SNF's Performance Score Calculation

Quality Measure	Your SNF's Measure Score (0 - 10; higher is better)	Maximum Possible Score	Contribution to Performance Score [b,c]
SNFRM	6.53381	10.00000	8.16726
SNF HAI	3.72313	10.00000	4.65392
DTC PAC SNF	9.06545	10.00000	11.33181
Long Stay Hospitalization	5.55970	10.00000	6.94963
Nursing Staff Turnover	5.20007	10.00000	6.50009
Total Nurse Staffing	0.00000	10.00000	0.00000
Discharge Function Score	4.52518	10.00000	5.65648
Falls with Major Injury (Long-Stay)	5.57803	10.00000	6.97253
Sum of All Eligible Measures	**40.18537**	**80.00000**	**50.23171**

Normalizing calculation from slide 27:
40.18537 ÷ 80.00000 X 100 = 50.23171

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SNF VBP Updates – FY '27 Performance Reports

Table 7. Your SNF's Performance Score and National Rank

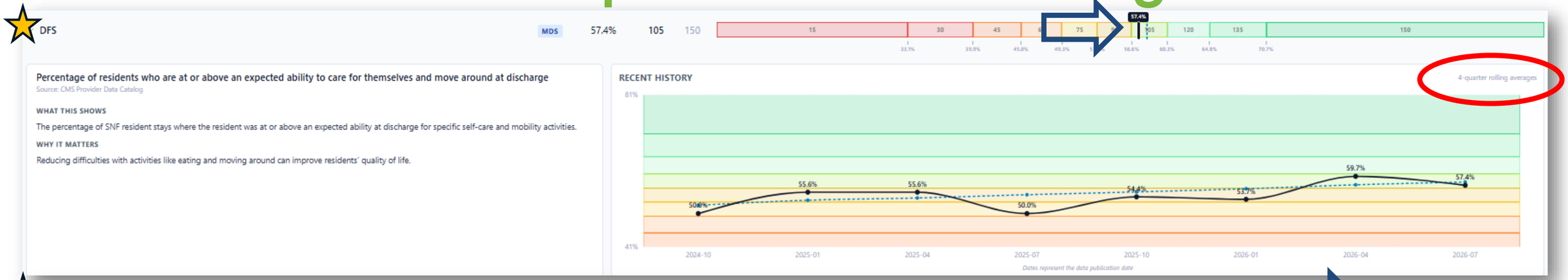
Your SNF's Performance Score (0 - 100; higher is better) [d]	50.23171
Your SNF's Program National Rank (out of 13,163 SNFs; lower is better) [d]	2,510

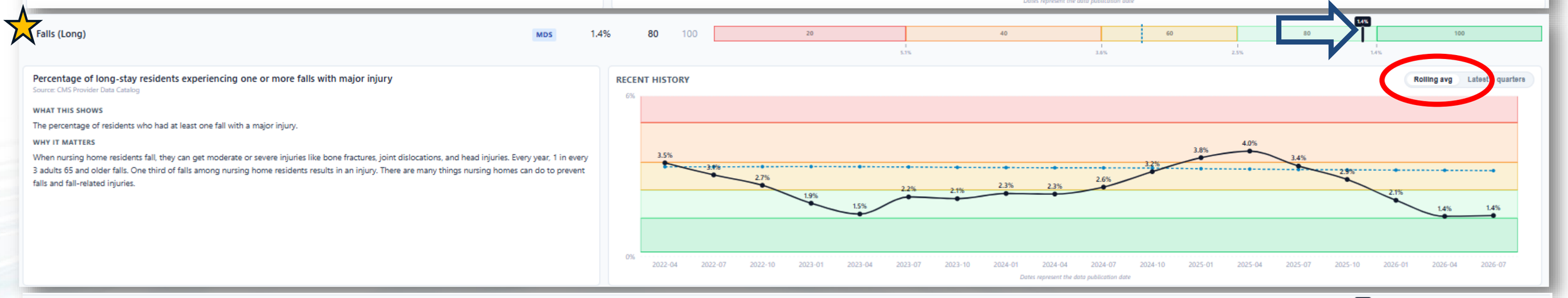
Table 8 shows your SNF's performance score and incentive payment multiplier; CMS will apply this multiplier to your SNF's adjusted federal per diem rate when payments are made for Medicare fee-for-service (FFS) Part A claims in FY 2027.

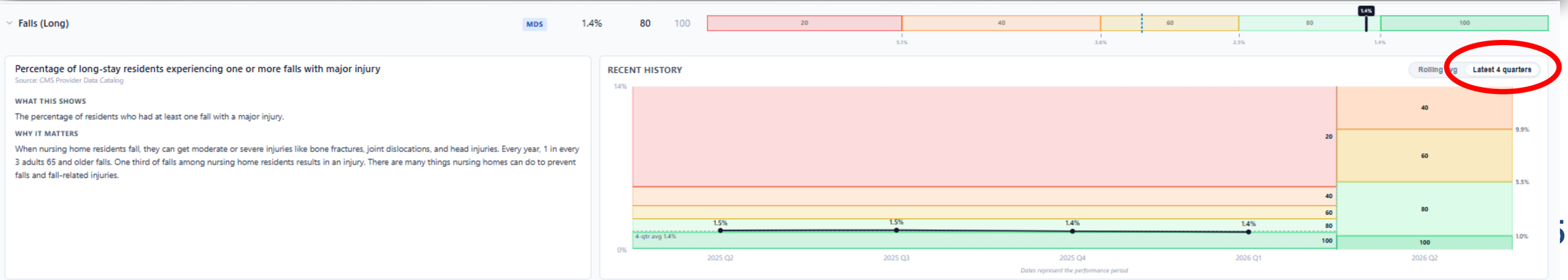
Table 8. Your SNF's Performance Score and Incentive Payment Multiplier

Program Year	FY 2027
Your SNF's Performance Score (0 - 100; higher is better) [a]	50.23171
Your SNF's Incentive Payment Multiplier (IPM) [a,b]	0.9977058681

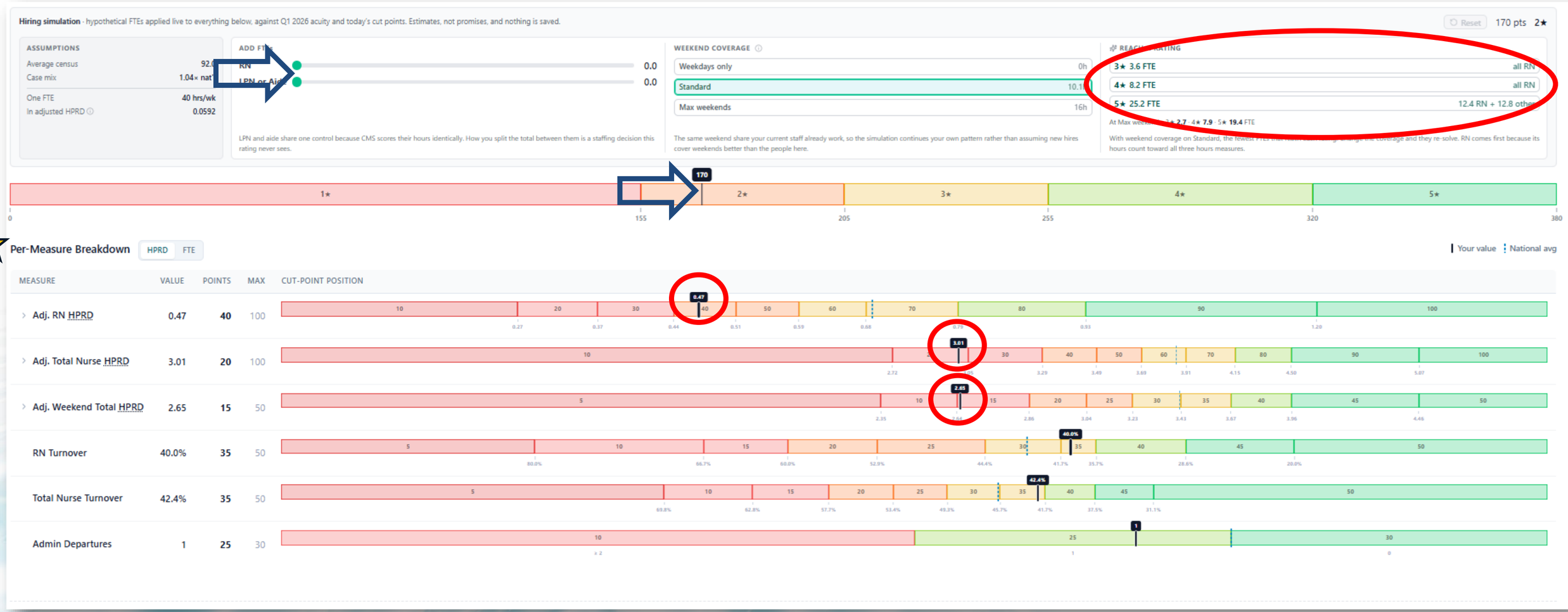
SNF VBP Updates – QM Management







SNF VBP Updates – QM Management



Next Steps

- The SNF VBP program is here to stay, Don’t ignore it!
- Pay attention to the expanding measures and the multiple programs affected.
- Spend some time with your confidential feedback reports.
- Spend time getting a working knowledge of how the scoring works so you’ll be better prepared when you receive your results for FY 2028.
- Download and review your FY 2027 VBP IPM reports posted in IQIES in Aug. 2026.
- Pay attention to quality. These measures have been selected for a reason.
- Reach out for guidance in interpreting and using your data.

QUESTIONS?

Find out More!

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