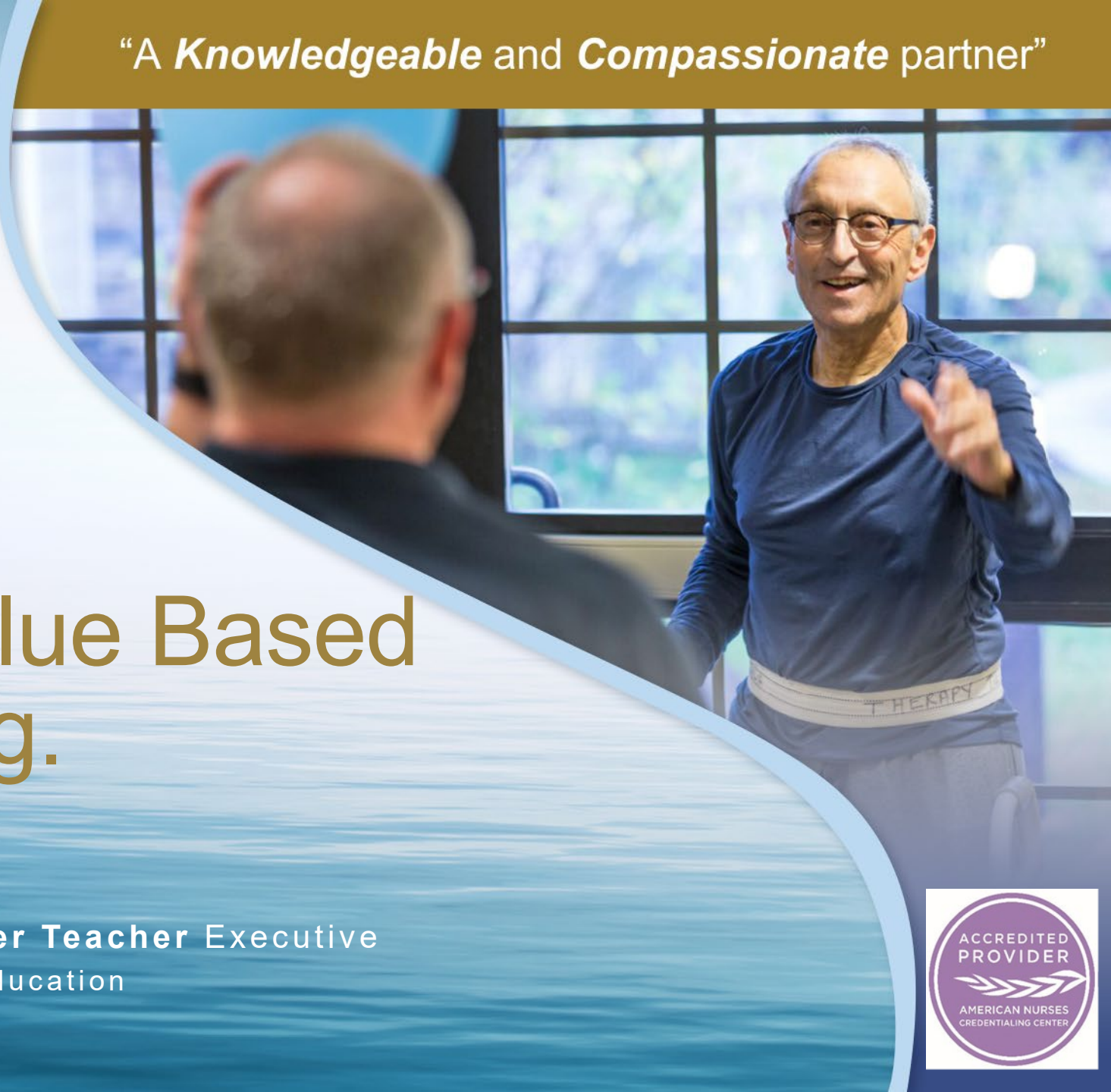


“A Knowledgeable and Compassionate partner”



Expanded SNF Value Based Purchasing Scoring. How will it work?

Joel VanEaton, BSN, RN, RAC-CTA, Master Teacher Executive
Vice President of PAC Regulatory Affairs and Education



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, in-person**
 - In order to obtain nursing contact hours, you must attend the entire activity, participate in case study analysis, and complete the evaluation.
- **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.
- **Web-Based/On-Demand**
 - In order to obtain nursing contact hours, you must view the entire program, 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 2 weeks



Learning Objectives

How does the Discharge Function Score Function

- Identify the expanded SNF VBP measures
- Recognize the components of the incentive multiplier scoring methodology
- Differentiate between the improvement and achievement score
- Understand the score normalization methodology
- Specify the health equity adjustment methodology

SNF VBP Resources

- [SNF VBP](#)
- [SNF QRP Technical Specifications for MDS and claims-based measures](#)
- [5-Star Users Guide January 2025](#)
- [MDS 3.0 v1.19.11 Data Sets and Manual](#)
- [FY 2024 final Rule](#)
- [FY 2025 Final Rule](#)

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **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 is currently 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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **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 SNF VBP Measures

TABLE 30: SNF VBP Program Measures and Timeline for Inclusion in the Program

| Measure | FY 2025 Program Year | FY 2026 Program Year | FY 2027 Program Year | FY 2028 Program Year |
|---|----------------------|----------------------|----------------------|----------------------|
| Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM) | Included | Included | Included | |
| Skilled Nursing Facility Healthcare Associated Infections Requiring Hospitalization (SNF HAI) measure | | Included | Included | Included |
| Total Nursing Hours per Resident Day (Total Nurse Staffing) measure | | Included | Included | Included |
| Total Nursing Staff Turnover (Nursing Staff Turnover) measure | | Included | Included | Included |
| Discharge to Community – Post-Acute Care Measure for Skilled Nursing Facilities (DTC PAC SNF measure) | | | Included | Included |
| Percent of Residents Experiencing One or More Falls with Major Injury (Long-Stay) (Falls with Major Injury (Long-Stay)) measure | | | Included | Included |
| Discharge Function Score for SNFs (DC Function Measure) | | | Included | Included |
| Number of Hospitalizations per 1,000 Long Stay Resident Days (Long Stay Hospitalization) measure | | | Included | Included |
| Skilled Nursing Facility Within-Stay Potentially Preventable Readmissions (SNF WS PPR) measure | | | | Included |

Program Performance Standards (achievement threshold and benchmarks) have been updated.

TABLE 32: FY 2027 SNF VBP Program Performance Standards

| Measure Short Name | Achievement Threshold | Benchmark |
|---|-----------------------|-----------|
| SNFRM | 0.78709 | 0.82702 |
| SNF HAI Measure | 0.92219 | 0.94693 |
| Total Nurse Staffing Measure | 3.21488 | 5.81159 |
| Nursing Staff Turnover Measure | 0.38000 | 0.72959 |
| Falls with Major Injury (Long Stay) Measure | 0.95349 | 0.99950 |
| Long Stay Hospitalization Measure | 0.99758 | 0.99959 |
| DC Function Measure | 0.40000 | 0.78800 |
| DTC PAC SNF Measure | 0.42946 | 0.66370 |

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 |

Skilled Nursing Facility Readmission Measure (SNFRM NQF 2510)

- **Value Based Purchasing Measure**

- 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 2019 (October 1, 2018 through September 30, 2019)
- 1 year **performance period**: FY 2023 (October 1, 2022 through September 30, 2023)
 - In response to the COVID-19 PHE, CMS excluded qualifying claims in the first two quarters of CY 2020 (January 1, 2020 – June 30, 2020) from use in the SNF VBP Program. Thus, the baseline periods for the FY 2024 and FY 2025 Program years remained FY 2019 and were not advanced by one year to avoid any use of the excluded qualifying claims.
- **Achievement Threshold**: Achievement Threshold: 0.78800, **Benchmark**: 0.82971
- **Program year impact**: Current

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures**
- 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 2022 (October 1, 2021, through September 30, 2022)
 - 1 year **performance period**: FY 2024 (October 1, 2023 through September 30, 2024)
 - **Achievement Threshold**: 0.92315, **Benchmark**: 0.95004
 - **Program year impact**: 2026
 - **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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures**

- 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 2022 (October 1, 2021 through September 30, 2022)
- 1 year **performance period**: FY 2024 (October 1, 2023 through September 30, 2024)
- **Achievement Threshold**: ~~3.18523~~ / **3.21986** , **Benchmark**: ~~5.70680~~ / **5.78096**
- **Program year impact**: 2026
- **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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures**

- 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 2022 (October 1, 2021 through September 30, 2022)
- 1 year performance period: FY 2024 (October 1, 2023 through September 30, 2024)
- **Achievement Threshold**: ~~0.35912~~ / **0.38365**, **Benchmark**: ~~0.72343~~ / **0.75149**
FY 2027: ~~0.38000~~ / **0.40230**, ~~0.72959~~ / **0.75655**
- **Program year impact**: FY 2026
- **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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures**

- 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

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures**
- 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, **Benchmark**: 0.0.99959
 - **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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures**
- Discharge Function Score measure (VBP, QRP, 5Star)
 - 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**: 0.0.78800
 - **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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures (FY 2024 Final Rule)**
 - 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, **Benchmark**: 0.99950
 - **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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures (FY 2024 Final Rule)**
 - 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, **Benchmark:** 0.92363
 - **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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Expanded Measure Performance Scoring**
 - CMS is adopting 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.
 - For purposes of determining these points, CMS also finalized the following definitions:
 - **Benchmark:** The mean of the top decile of SNF performance on the measure during the baseline period; and
 - **Achievement threshold:** The 25th percentile of national SNF performance on the measure during the baseline period.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Expanded Measure Performance Scoring**
 - CMS also finalized awarding **achievement points** to SNFs based on their performance period measure rate for each measure according to the following:
 - If a SNF's performance period measure rate is equal to or greater than the benchmark, the SNF would be awarded 10 points for achievement.
 - If a SNF's performance period measure rate is less than the achievement threshold, the SNF would receive 0 points for achievement.
 - If a SNF's performance period measure rate is equal to or greater than the achievement threshold, but less than the benchmark, we will award between 0 and 10 points.
 - CMS also finalized awarding **improvement points** to SNFs based on their performance period measure rate according to the following:
 - If a SNF's performance period measure rate is equal to or lower than its baseline period measure rate, the SNF would be awarded 0 points for improvement.
 - If a SNF's performance period measure rate was equal to or higher than the benchmark, the SNF would be awarded 9 points for improvement.
 - If a SNF's performance period measure rate was greater than its baseline period measure rate but less than the benchmark, we will award between 0 and 9 points

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- Value Based Purchasing Expanded Measure Performance 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 = 0 points | X = 10 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 = 0 points | X = 9 Points |
| | X = between 0 and 9 points |

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Expanded Measure Performance 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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Expanded Measure Performance Scoring**
 - CMS finalized the adoption of 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.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Expanded Measure Performance Scoring**
 - **Example:** A SNF that met the case minimum to receive a score on three quality measures would receive a score between 0 to 30 points, while a SNF that met the case minimum to receive a score on two quality measures would receive a score between 0 to 20 points.
 - Note: The maximum raw point total for the FY 2026 program year would be 40 points and 80 points for FY 2027 and FY 2028

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Expanded Measure Performance Scoring**
 - **Example (cont.):** CMS would then normalize 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:** CMS would normalize a SNF's raw point total of 27 points out of 30 by converting that total to a 100-point scale, with the result that the SNF would receive a SNF performance score of 90. Example: $(27/30) \times 100 = 90$

SNF VBP Program Early Look Performance Score Reports

- The Early Look Performance Score Reports for the fiscal year (FY) 2026 Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program are now available to download via the Internet Quality Improvement and Evaluation System (iQIES).
- The Early Look Performance Score Reports are intended for informational purposes only.
- **They do not reflect facilities' official performance in the SNF VBP Program** and will not impact facilities' payments; CMS will share official performance information for the FY 2026 Program year based on updated measure data at a later date.
- These reports are intended to familiarize SNFs with the information that will be distributed when the expanded SNF VBP Program is implemented for the FY 2026 Program year **Using historical measure data from FY 2021 (as the baseline period) and FY 2022 (as the performance period)** for all four measures adopted by the SNF VBP Program for the FY 2026 Program year to model performance in the expanded SNF VBP Program.
- FY 2026 Program year data will derive from the baseline period (FY 2022) and measure data from the performance period (FY 2024) to calculate SNFs' official scores and incentive payment multipliers.

SNF VBP Program Early Look Performance Score Reports

Overview of Performance

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 Incentive Payment Multiplier (IPM) | 0.9972631994 |
| Interpretation of Your SNF's IPM | Your IPM is <1, meaning your SNF would 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 73% of SNFs nationwide |
| Your SNF's Program Percent Rank, State | Your SNF's overall performance was equal to or better than 73% of SNFs in your state |

Table 2. Measure Performance and Scores

| 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... |
|---|---|--|---|---|--|
| Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM) | 21.27% | 17.97% | better | 7.82578 | equal to or better than 86% of SNFs nationwide |
| Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) | 8.47% | 7.72% | better | 2.74728 | equal to or better than 23% of SNFs nationwide |
| Total Nursing Staff Turnover | 54.24% | 39.29% | better | 6.41916 | equal to or better than 81% of SNFs nationwide |
| Total Nursing Hours per Resident Day | 3.69 nursing hours per resident day | 3.74 nursing hours per resident day | better | 1.89056 | equal to or better than 56% of SNFs nationwide |

SNF VBP Program Early Look Performance Score Reports

Measure Results

Table 3. Your SNF's Measure Results

| Measure [a] | Your SNF's Baseline Period Case Count [b,c] | Met Case Minimum Requirement During Baseline Period? [d] | Your SNF's Performance Period Case Count [b,c] | Met Case Minimum Requirement During Performance Period? [d] | Measure Result Interpretation | Your SNF's Baseline Period Measure Result [b] | Your SNF's Performance Period Measure Result [b] |
|---|---|--|--|---|--|---|--|
| Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM) | 43 eligible stays | Yes | 31 eligible stays | Yes | A lower (↓) result indicates better performance | 21.27% | 17.97% |
| Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) | 47 eligible stays | Yes | 34 eligible stays | Yes | A lower (↓) result indicates better performance | 8.47% | 7.72% |
| Total Nursing Staff Turnover | 59 eligible nursing staff | Yes | 56 eligible nursing staff | Yes | A lower (↓) result indicates better performance | 54.24% | 39.29% |
| Total Nursing Hours per Resident Day | 49 average residents per day | Yes | 49 average residents per day | Yes | A higher (↑) result indicates better performance | 3.69 nursing hours per resident day | 3.74 nursing hours per resident day |

SNF VBP Program Early Look Performance Score Reports

Measure Scores

Table 4. Your SNF's Measure Score Calculations

| 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) | Your SNF's Improvement Score (0 - 9; higher is better) | Your SNF's Measure Score (0 - 10; higher is better) |
|---|---|--|---|--|---|
| Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM) | 21.27% | 17.97% | 7.82578 | 7.54094 | 7.82578 |
| Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) | 8.47% | 7.72% | 2.74728 | 1.82077 | 2.74728 |
| Total Nursing Staff Turnover | 54.24% | 39.29% | 6.41916 | 5.04377 | 6.41916 |
| Total Nursing Hours per Resident Day | 3.69 nursing hours per resident day | 3.74 nursing hours per resident day | 1.89056 | 0.00000 | 1.89056 |

SNF VBP Program Early Look Performance Score Reports

Table 5. Measure Minimum Requirement

| | |
|---|--------|
| Number of Measures Required for SNF VBP Program Eligibility [a] | 2 of 4 |
| Your SNF's Number of Measures Receiving a Measure Score | 4 of 4 |
| Measure Minimum Met? | Yes |

Table 6. Your SNF's Performance Score Calculation

| Measure | Your SNF's Measure Score (0 - 10; higher is better) | Maximum Possible Score | Contribution to Performance Score [b,c] |
|---|---|------------------------|---|
| Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM) | 7.82578 | 10.00000 | 19.56444 |
| Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) | 2.74728 | 10.00000 | 6.86821 |
| Total Nursing Staff Turnover | 6.41916 | 10.00000 | 16.04791 |
| Total Nursing Hours per Resident Day | 1.89056 | 10.00000 | 4.72641 |
| Sum of All Eligible Measures | 18.88278 | 40.00000 | 47.20696 |

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

| | |
|--|----------|
| Your SNF's Performance Score (0 - 100; higher is better) [d] | 47.20696 |
| Your SNF's Program National Rank (out of 13,720 SNFs) [d] | 3,706 |

Performance Score

Normalizing calculation from slide 23:
 $18.88278 \div 40.00000 \times 100 = 47.20696$

SNF VBP Program Early Look Performance Score Reports

Incentive
Payment
Multiplier

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

| Program Year | FY 2026 |
|--|--------------|
| Your SNF's Performance Score (0 - 100; higher is better) [a] | 47.20696 |
| Your SNF's Incentive Payment Multiplier (IPM) [a,b] | 0.9972631994 |

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

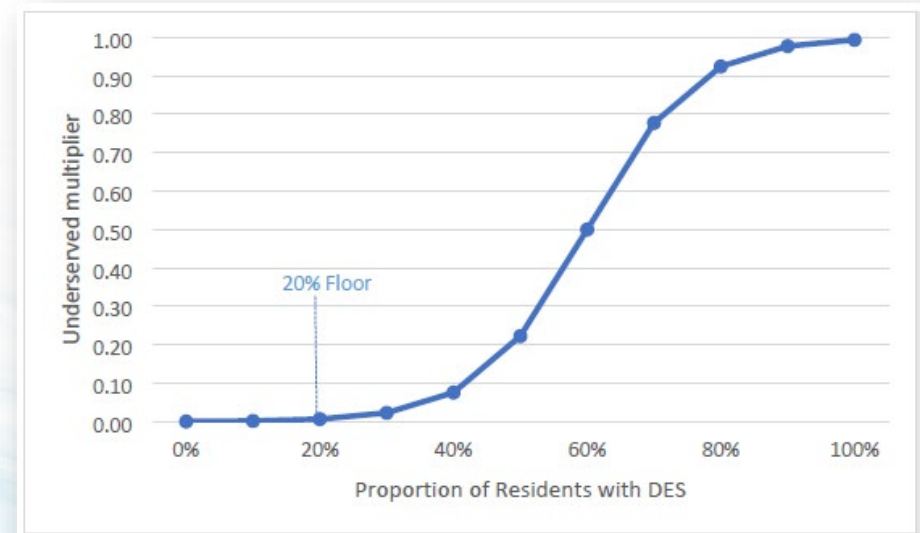
- **Value Based Purchasing FY 2024 Final Rule health Equity Adjustment**

- To prioritize the achievement of **health equity** and the reduction of disparities in health outcomes in SNFs, CMS adopting a Health Equity Adjustment in the SNF VBP Program that rewards SNFs that perform well and whose resident population during the applicable performance period includes at least 20% of residents with dual eligibility status.
- This adjustment will begin with the FY 2027 program year based on FY 2025 performance year.
- CMS will adjust the scoring methodology to provide bonus points to high-performing facilities (CMS defines a top tier performing SNF, as a SNF whose score on the measure for the program year falls in the top third of performance, or greater than or equal to the 66.67th percentile) that provide care to a higher proportion of dual eligible residents.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing FY 2024 Final Rule health Equity Adjustment (cont.)**

- In addition, CMS will increase the payback percentage policy under the SNF VBP program from current 60% to a level such that the bonuses provided to the high performing, high duals SNFs do not come at the expense of the other SNFs. The estimates for FY 2027 program year is 66%.
- **Bonus Scoring Methodology (if 20% DES):**
 - **Measure Performance Scaler:** 2 bonus points for each VBP measure scoring in the top 66.67th percentile.
 - **Underserved Multiplier:** the number representing the SNF's proportion of residents with DES out of its total resident population in the applicable program year, translated using a logistic exchange function
 - **HEA bonus points** = measure performance scaler × underserved multiplier



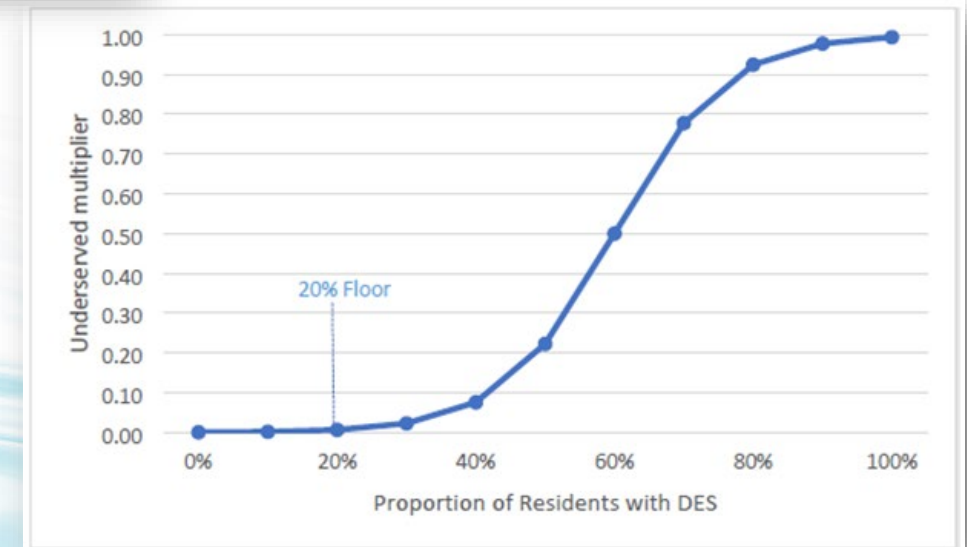
Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

TABLE 20: Example of the HEA Bonus Points Calculation

| Example SNF | Measure Performance Scaler [A] | Proportion of Residents with DES (%) [B] | Underserved Multiplier [C] | HEA bonus points [D] ([A]*[C]) |
|-------------|--------------------------------|--|----------------------------|--------------------------------|
| SNF 1 | 16 | 50 | 0.22 | 3.52 |
| SNF 2 | 14 | 70 | 0.78 | 10.92 |
| SNF 3 | 10 | 10 | 0 | 0 |
| SNF 4 | 2 | 80 | 0.92 | 1.84 |

TABLE 21: Example of the HEA Bonus Points Calculation

| Example SNF | Normalized Sum of all Points Awarded for each Measure [A] | HEA Bonus Points (Step 3, Column [D]) [B] | SNF Performance Score ([A] + [B]) |
|-------------|---|---|-----------------------------------|
| SNF 1 | 80 | 3.52 | 83.52 |
| SNF 2 | 65 | 10.92 | 75.92 |
| SNF 3 | 42 | 0 | 42.00 |
| SNF 4 | 10 | 1.84 | 11.84 |



Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing FY 2024 SNF PPS final Rule**
 - CMS has finalized an update to the administrative methodology policies that are 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 2026 program year:** SNFs must report the minimum number of cases for two of the four measures during the performance period to be included in the FY 2026 program year.
 - **FY 2027 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

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program Confidential Feedback Reports

To: Skilled Nursing Facilities, CMS Staff

The December 2024 Quarterly Confidential Feedback Reports for the fiscal year (FY) 2026 Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program are now available to download via the [Internet Quality Improvement and Evaluation System \(iQIES\)](#).

These reports contain facility-level results for the SNF 30-Day All-Cause Readmission Measure (SNFRM), the Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) measure, the Total Nurse Staffing Hours per Resident Day measure, and Total Nursing Staff Turnover measure for FY 2022, the FY 2026 SNF VBP Program baseline period.

These results will be used for the FY 2026 SNF VBP Program year scoring and incentive payment calculations that will take effect October 1, 2025. The data and results for the performance period for the FY 2026 SNF VBP Program year will be disseminated in the June 2025 Quarterly Confidential Feedback Reports.

SNFs may submit correction requests for their FY 2022 measure results up to 30 days following this report being made available, until January 9, 2025. Corrections are limited to errors made by CMS or its contractors when calculating a SNF's measure results. SNFs must submit correction requests to SNFVBPquestions@cms.hhs.gov with the subject line "SNF VBP Review and Correction Inquiry" along with your SNF's CMS Certification Number (CCN), SNF's name, correction request, and reason for requesting the correction.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program Confidential Feedback Reports

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Name

- SNFVB [redacted] FY2026_BASELINE_DATA_DEC2024QR.xlsx
- SNFVB [redacted] FY2026_BASELINE_DATA_DEC2024QR.xlsx
- SNFVB [redacted] FY2026_BASELINE_DATA_DEC2024QR.xlsx
- SNFVB [redacted] FY2026_BASELINE_DATA_DEC2024QR.xlsx
- SNFVB [redacted] FY2026_BASELINE_DATA_DEC2024QR.xlsx
- SNFVB [redacted] FY2026_BASELINE_DATA_DEC2024QR.xlsx

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) FY 2026 Program Year December 2024 Quarterly Confidential Feedback Report: Baseline Period (FY 2022) Measure Results and SNFRM Stay-Level Data

Provider Name:
Provider CCN:

The SNF VBP Program

The Centers for Medicare & Medicaid Services (CMS) awards incentive payments to SNFs through the SNF VBP Program to encourage SNFs to improve the quality of care they provide to patients. For the FY 2026 Program year, the SNF VBP Program is expanding to include three additional quality measures; incentive payments will be awarded based on SNF performance on the SNF 30-Day All-Cause Readmission Measure (SNFRM), Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) measure, Total Nursing Staff Turnover (Nursing Staff Turnover) measure and Total Nursing Hours per Resident Day (Total Nurse Staffing) measure.

Contents

This workbook contains your SNF's baseline period (FY 2022) measure performance for all four measures adopted by the SNF VBP Program for the FY 2026 Program year. It also contains stay-level data used to calculate the SNFRM results. We have historically provided SNFRM stay-level data and will continue to do so in this report. Stay-level data for the newly added measures will not be included for the FY 2026 Program year. These measure results will be used for the FY 2026 SNF VBP Program year scoring and incentive payment calculations that will take effect October 1, 2025. The data and measure results for the performance period for the FY 2026 SNF VBP Program year will be disseminated in the June 2025 Quarterly Reports. SNFs have an opportunity to review and submit corrections to their measure results only up to 30 days following this report being made available; this constitutes Phase One of the SNF VBP Review and Correction process. As finalized in the FY 2025 SNF PPS final rule, the Phase One review and correction process is limited to errors made by the Centers for Medicare & Medicaid Services (CMS) or its contractors when calculating a SNF's measure results. Correction requests should be emailed to SNFVBPquestions@cms.hhs.gov with the subject line "SNF VBP Review and Correction Inquiry" along with your SNF's CMS Certification Number (CCN), your SNF's name, the correction request, and the reason for requesting the correction. When referring to specific eligible stays from this report, use the line number. Any corrections to underlying data must be made and processed before the designated "snapshot date" for measures, as applicable, for corrections to be reflected in the SNF VBP Program's quarterly confidential feedback reports. CMS cannot recalculate any results in the quarterly confidential feedback reports to reflect corrected underlying data.

Table of Contents (TOC)

Worksheet Tab

[Overview of Measure Results](#)

[SNFRM](#)

[SNF HAI](#)

[Cover Sheet](#)

Description

An overview of your SNF's measure results and comparisons to national SNF measure performance during the baseline period (FY 2022).
Details about your SNF's baseline period (FY 2022) measure results for the SNF 30-Day All-Cause Readmission Measure (SNFRM) in the FY 2026 Program year.
Details about your SNF's baseline period (FY 2022) measure results for the Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) measure, Total Nursing Staff Turnover (Nursing Staff Turnover) measure, and Total Nurse Staffing (Total Nurse Staffing) measure.

| SNFRM | SNF HAI | Nursing Staff Turnover | Total Nurse Staffing | SNFRM Eligible Stays | SNFRM Elig Stay Data Dictio |
|-----------------------------|-------------|------------------------|----------------------|----------------------|-----------------------------|
| Overview of Measure Results | Cover Sheet | | | | |

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program Confidential Feedback Reports

Table 2. Your SNF's Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM) Details for the Baseline Period (FY 2022)

| SNFRM Details | FY 2022 | Detail Descriptions |
|---|---------|---|
| Measure Result: Risk-Standardized Readmission Rate (RSRR) [a] | 19.350% | Your SNF's risk-adjusted unplanned hospital readmission rate. It is calculated by multiplying your SNF's SRR by the overall national average unadjusted readmission rate for all SNF stays. |
| Number of Eligible Stays | 72 | The total number of eligible SNF stays used to calculate your SNF's performance during this reporting period. |

Table 3. Your SNF's Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) Measure Details for the Baseline Period (FY 2022)

| SNF HAI Measure Details | FY 2022 | Detail Descriptions |
|--|---------|--|
| Measure Result: Risk-Standardized Healthcare-Associated Infection Rate [a] | 7.692% | Your SNF's risk-adjusted healthcare-associated infection rate, calculated by multiplying your SNF's SRR by the overall national average unadjusted healthcare-associated infection rate for all SNF stays. |
| Number of Eligible Stays | 80 | The total number of eligible SNF stays used to calculate your SNF's performance during this reporting period. |
| Observed Number of Healthcare-Associated Infections | 7 | |
| Observed Healthcare-Associated Infection Rate | 8.750% | |
| Standardized Risk Ratio (SRR) | 1.120 | |
| National Observed Healthcare-Associated Infection Rate | 6.865% | |

Table 4. Your SNF's Total Nursing Staff Turnover (Nursing Staff Turnover) Measure Details for the Baseline Period (FY 2022)

| Nursing Staff Turnover Measure Details | FY 2022 | Detail Descriptions |
|--|--------------------|---|
| Measure Result: Total Nursing Staff Turnover Rate [a] | no reportable data | The total number of employment spells at your SNF ending in turnover divided by the total number of eligible employment spells at your SNF. |
| Number of Eligible Employment Spells (Measure Denominator) | no reportable data | Your SNF's total number of eligible employment spells. An employment spell is defined by an individual working at least 120 hours in a 90-day |

Table 5. Your SNF's Total Nursing Hours per Resident Day (Total Nurse Staffing) Measure Details for the Baseline Period (FY 2022)

| Total Nurse Staffing Measure Details | FY 2022 | Detail Descriptions |
|--|---------|---|
| Measure Result: Adjusted Total Nurse Staffing Hours per Resident per Day [a] | 5.313 | Your SNF's case-mix adjusted total nurse staffing hours per resident day. |
| Average Resident Census | 27.346 | Your SNF's average number of residents per day based on your SNF's Minimum Data Set (MDS) daily census. |
| Reported Total Nurse Staffing Hours per Resident per Day | 5.862 | Your SNF's reported total nurse staffing hours per resident per day (registered nurses [RNs] plus licensed practical nurses [LPNs] plus nurse aides), as reported in the Payroll-based Journal. |
| Facility Case-Mix Index | 1.532 | This number reflects the acuity of the residents in your SNF. |
| National Case-Mix Index | 1.362 | This number reflects acuity of nursing home residents nationally. |
| Facility Nursing Case-Mix Index Ratio | 1.125 | Your SNF's relative nursing case-mix index ratio is calculated as the ratio of your facility's nursing case-mix index to the national case-mix index. |
| National Average Total Nurse Staffing Hours per Resident per Day | 3.755 | The national mean of case-mix adjusted total nurse staffing hours (RNs plus LPNs plus nurse aides) per resident per day for all facilities. |

Notes:

[a] Because of rounding, it is not possible to exactly reproduce your Total Nurse Staffing measure result using the data in this table. If your SNF had fewer than 25 average residents per day in the baseline period (FY 2022), your baseline period Total Nurse Staffing will not be used in scoring calculations for the FY 2026 SNF VBP Program and will not be publicly reported.

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program Confidential Feedback Reports

Table 1. Your SNF's Performance Across All Measures During the Baseline Period (FY 2022) of the FY 2026 Program Year

| Quality Measure [a] | Measure Result Interpretation | Your SNF's Baseline Period Measure Result [b] | Your SNF's baseline period measure result is...[c] |
|---|--|---|--|
| Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM) | A lower (↓) result indicates better performance | 19.350% | equal to or better than 65% of SNFs nationwide |
| Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) | A lower (↓) result indicates better performance | 7.692% | equal to or better than 25% of SNFs nationwide |
| Total Nursing Staff Turnover (Nursing Staff Turnover) | A lower (↓) result indicates better performance | no reportable data | not available |
| Total Nursing Hours per Resident Day (Total Nurse Staffing) | A higher (↑) result indicates better performance | 5,313 nursing hours per resident day | equal to or better than 94% of SNFs nationwide |

Notes:

- a) All measures use a FY 2022 (10/01/2021 - 9/30/2022) baseline period. SNFRM and SNF HAI use data from Medicare fee-for-service (FFS) Part A Claims and Nursing Staff Turnover and Total Nurse Staffing use data from the Payroll-Based Journal (PBJ) and the Minimum Data Set (MDS) to calculate measure results.
- b) If your SNF did not have any reportable measure data during the baseline period, you will not receive a measure result; you will instead receive "no reportable data." This can reflect not submitting required measure data to CMS, not having any eligible measure data, or failing validation for the measure.
- c) This column reflects your SNF's baseline period measure performance relative to all eligible SNFs nationally for each quality measure. It is calculated by sorting and ranking all eligible SNFs' measure results nationally. Higher percent ranks reflect better measure performance. Any SNFs with equal measure results each receive the best (that is, highest) percent rank within the tie. If your SNF did not receive a measure result for the respective measure, your SNF will not receive a percent rank, and this cell will display "not available."

Table 6. Eligible Stays for the SNFRM during the Baseline Period (FY 2022)

| Line Number | Medicare Beneficiary Identifier | Last Name | First Name | Sex | Age | Admission Date of SNF Stay | Discharge Date of SNF Stay | |
|-------------|---------------------------------|-----------|------------|--------|-----|----------------------------|----------------------------|-------------------|
| 1 | | Doe | Jane | FEMALE | 90 | 13Apr2022 | 02May2022 | 02 = SNF HOSPITAL |
| 2 | | Smith | John | Male | 72 | 13Apr2022 | 04May2022 | 01 = HOSPITAL |

Table 7. Description of Variables Contained in Table 6 of this Report, SNFRM Eligible Stays

| Column | Variable Name | Description |
|----------|--|---|
| Column A | Line Number | The line number is only used to identify SNF stays in the report. Please use this number when contacting the Help Desk. |
| Column B | Medicare Beneficiary Identifier | The Medicare Beneficiary Identifier (MBI) is issued on Medicare cards for Medicare transactions. Each MBI is a unique, randomly generated identifier, and the characters do not have any hidden or special meaning. |
| Column C | Last Name | The resident's last name. Note: residents may have multiple last names listed. |
| Column D | First Name | The resident's first name. |
| Column E | Sex | The resident's sex. |
| Column F | Age | The resident's age at the time of SNF admission. |
| Column G | Admission Date of SNF Stay | Admission date for the index SNF stay (DDMonYYYY). |
| Column H | Discharge Date of SNF Stay | Discharge date for the index SNF stay (DDMonYYYY). If the SNF discharge date is missing when data are extracted, the SNF discharge date is imputed using the resident's length of stay at that time. Please note this information is not used in the measure calculation. |
| Column I | SNF Discharge Destination | Destination to which the SNF resident was discharged. |
| Column J | Prior Hospital Name (CCN) | The name and CMS Certification Number (CCN) of the prior hospital from which the SNF resident was discharged. |
| Column K | Admission Date of Prior Hospital Stay | Admission date for the prior hospital stay (DDMonYYYY). |
| Column L | Discharge Date of Prior Hospital Stay | Discharge date for the prior hospital stay (DDMonYYYY). |
| Column M | Principal Diagnosis of Prior Hospital Stay | Principal diagnosis code of the prior hospital stay. |
| Column N | Planned Readmission | Indicates whether a SNF resident had a planned readmission within 30 days of discharge from the prior hospital. If the SNF resident did not have a readmission within 30 days, the cell will include a period. 1: SNF resident had a planned readmission. 0: SNF resident had an unplanned readmission. |

What's Next?

- 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 (VBP and QRP)
- Spend time getting a working knowledge of how the scoring works so you'll be better prepared when you receive your results for FY 2026.
- Pay attention to quality. These measures have been selected for a reason.
- Reach out for guidance in interpreting and using your data

QUESTIONS?

