STAY INFORMED.
SKILLED NURSING FACILITY (SNF) QUALITY REPORTING PROGRAM.
VALUE-BASED CARE DETERMINES THE WAY YOU ARE PAID

If you are a skilled nursing facility (SNF), you are paid using the SNF Prospective Payment System (SNF PPS) which is updated annually. Updated payment rates become effective October 1st of every year.

WHY IT MATTERS
FACILITY IMPACT

ANNUAL PAYMENT REDUCTION
for not participating in the Quality Reporting Program.

ANOTHER PAYMENT REDUCTION
30-DAY POTENTIALLY PREVENTABLE READMISSIONS
starting October 2018.
The Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) measure will be removed and replaced with the Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (Short Stay) measure, effective October 1, 2018.

1. Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)
2. Percent of Patients or Residents with Pressure Ulcers That Are New or Worsened†
3. Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function

†The Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) measure will be removed and replaced with the Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (Short Stay) measure, effective October 1, 2018.
Medicare is shifting to a Value-Based Purchasing (VBP) program. VBP shifts reimbursement determinations away from volume and towards quality of care by adding a 30-day Potentially Preventable Readmission (SNFPPR) measure.

As of October 1, 2018, the VBP program will apply incentive payments (either a positive or negative 2 percent reduction) based on how a SNF performs on the measure.

**WHAT'S NEW**

FY2019 CHANGES

**QUALITY AND VALUE**

50% of all Medicare payments will be paid through alternative payment models based on QUALITY AND VALUE.

90% of all Fee-for-Service payments made by Medicare will be linked to QUALITY AND VALUE.

1 Quality Measure Update:

REMOVED
The Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678)

REPLACED WITH
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (Short Stay)
**COMING UP**

**FY2020 CHANGES**

4 new measures addressing Functional Status beginning with FY2020 SNF QRP:
1. Change in Self-Care Score for Medical Rehabilitation Patients (NQF #2633)
2. Change in Mobility Score for Medical Rehabilitation Patients (NQF #2634)
3. Discharge Self-Care Score for Medical Rehabilitation Patients (NQF #2635)
4. Discharge Mobility Score for Medical Rehabilitation Patients (NQF #2636) on the measure.

Proposed revised case-mix methodology called the Patient-Driven Payment Model (PDPM):
1. Focused on patient care and characteristics rather than volume of care
2. Reimbursement adjusts per diem payments to reflect changes in patient needs throughout the stay
3. This methodology would replace RUG-IV case-mix methodology

CMS Proposes an Extraordinary Circumstances Exception policy for SNFs that experience natural disasters during reporting period.

1 The term “FY [year] SNF QRP” refers to CMS’ fiscal year for which the SNF QRP requirements applicable to that fiscal year must be met for a SNF to receive the full annual update when calculating the payment rates applicable to it for that fiscal year.