



Skilled Nursing Facility Quality Reporting Program Measure Calculations and Reporting User's Manual Change Table Version 7.0

Prepared for

Centers for Medicare & Medicaid Services
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Development, Maintenance, and Support
for Quality Reporting and Value Based
Purchasing Programs and Nursing
Home Care Compare (PAC Quality)

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Current as of October 1, 2025

Overview

This change table provides quality measure updates to the SNF QRP Measure Calculations and Reporting User's Manual, Version 7.0. This document, titled Skilled Nursing Facility Quality Reporting Program Measure Calculations and Reporting User's Manual Change Table Version 7.0, provides measure-related changes between Version 7.0 and Version 6.0 of the manual specified in a change table format. Manual updates are provided in the table below in relation to Version 7.0 manual chapter, section, page number, and step indicator. Updates to the manual are indicated with strikeouts of prior language, and a description of the change. When edits are not found in a specific step, respective table cells display "N/A". When the same edit has been made to more than one chapter, section, page, and/or step of the manual, respective cells display "Multiple". When the same edit has been made to every chapter, section, and page of the manual, respective cells display "All".

Measure-related changes delineated in this change table include (i) updating measure specifications with the transition from MDS V1.19.1 to MDS V1.20.1; (ii) updating the no physical or occupational therapy covariate across the SNF functional outcome measures to be at discharge given the changes to Section O items; (iii) incrementing CMS identifiers among measures experiencing specification updates; (iv) updating and removing existing tables in Chapter 1, (v) updated text to clarify a measure specification detail for the SNF HAI measure's timeframe for excluding pre-existing infections, (vi) providing clarifications in Chapter 4 on identifying SNF stays, and (vii) clarifying the list of ICD-10-CM codes used in the functional outcome measures' primary medical condition category and active diagnosis table.

SNF QRP Measure Calculations and Reporting User's Manual V7.0 Change Table

#	Chapter	Section	Page(s)	Step(s)	SNF QRP Measure Calculations and Reporting User's Manual V7.0	Description of Change
1.	N/A	Title page	i	N/A	Updated the manual effective date of the title: October 1, 2025 2024 .	The title page is updated each iteration to reflect the new effective date.
2.	All	All	All	N/A	Skilled Nursing Facility Quality Reporting Program Measure Calculations and Reporting User's Manual Version 6.0 7.0	Reflects the current version of the manual.
3.	All	All	All	N/A	Footer: SNF QRP Measure Calculations and Reporting User's manual V6.0 V7.0 – Effective October 1, 2024 2025	Updated to reflect the correct manual version number and effective date.
4.	All	All	All	N/A	Manual formatting and syntax updates	Reformatted several of the manual's features including the table of contents, tables and figures, heading styles, table captions, cross-references, footnotes, footers, table properties, document properties, spacing, equation alternative text, syntax, etc.
5.	Multiple	Multiple	Multiple	Multiple	The MDS 3.0 will transition from version 1.19.1 to version 1.20.1 effective October 1, 2025.	Updated to reflect MDS transition from V1.19.1 to V1.20.1 for Version 7.0 of the SNF QM User's Manual throughout the document.
6.	Multiple	Multiple	Multiple	Multiple	Multiple	Replaced broken and/or outdated hyperlinks and updated several footnote citations throughout the manual to improve clarity, accuracy, and consistency with other QM manuals.
7.	Multiple	Multiple	Multiple	Multiple	Updated CMS IDs for the following measures: <ul style="list-style-type: none"> Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients (CMS ID: S024.06 S024.07) Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients (CMS ID: S025.06 S025.07) Discharge Function Score (CMS ID: S042.02 S042.03) 	Incremental update to reflect the most current CMS ID.

Manual Version 7.0 is current as of October 1, 2025

#	Chapter	Section	Page(s)	Step(s)	SNF QRP Measure Calculations and Reporting User's Manual V7.0	Description of Change
8.	1	1.1	1	N/A	This manual is organized by eight chapters and two appendices. The remainder of this section provides information on the contents of each chapter and an overview of the appendices. Chapter 1 presents the purpose of the manual, explaining how the manual is organized and defining key terms that are used throughout subsequent chapters. The chapter also includes a summary of existing quality measures in the SNF QRP, as well as an overview of the quality measures added to the SNF QRP, and/or finalized for public reporting display updates.	Removed outdated language referring to SNF QRP measures finalized for FY 2026 public reporting display updates, as V7.0 of the SNF QRP QM User's Manual, effective October 1, 2025, aligns with the FY 2027 SNF QRP.
9.	1	1.4 Table 1-1	5-6	N/A	Table 1-1 SNF Quality Measures: CMIT Measure ID, CMS ID, Measure Type, and Measure Reference Name Crosswalk (See Appendix for a full table excerpt)	Updated Table 1-1: SNF Quality Measures: CMIT Measure ID, CMS ID, Measure Type, and Measure Reference Name Crosswalk, to reflect the CBE endorsement statuses for the <i>Discharge Function Score</i> (S042.03) measure and incremental number update to the CMS IDs for this measure as well as <i>Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients</i> (S024.07), and <i>Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients</i> (S025.07) in the table.
10.	1	1.4	6	N/A	Table 1-2 shows when new quality measures added to the SNF QRP will be included in reports and released on Care Compare and the Provider Data Catalog.	Removed references for Table 1-2: Quality Measures Added to the SNF QRP, as the table itself was removed. There were no measures added to the FY 2027 SNF QRP.
11.	1	1.4 Table 1-2	6	N/A	Table 1-2 Quality Measures Added to the SNF QRP (See Appendix for full table excerpt)	Removed Table 1-2: Quality Measures Added to the SNF QRP, including the associated table footnote, as there were no measures added to the FY 2027 SNF QRP.

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12.	3	N/A	8	N/A	<ul style="list-style-type: none"> SNF Healthcare-Associated Infections (HAI) Requiring Hospitalization (CMS ID: S039.01) <ul style="list-style-type: none"> This measure estimates the risk-standardized rate of HAIs that are acquired during SNF care and result in hospitalizations, as identified using the principal diagnosis on the Medicare inpatient (IP) claims of SNF residents. The hospitalization must occur during the period beginning on day four after SNF admission and within three days after SNF discharge. The measure excludes infections that are pre-existing by applying a 14-day repeat infection timeframe. Since HAIs are not considered never-events, the measure's objective is to identify SNFs that have higher HAI rates than their peers. 	Updated text to clarify a measure specification detail.
13.	4	4.1.1	9	1	<p>Section 4.1.1 Define the Quality Measure Target Period</p> <p>Define the Quality Measure Target Period that will be used for the quality measure calculations for the SNF QRP.</p> <ol style="list-style-type: none"> Define the Quality Measure Target Period. <p>Note: The Quality Measure Target Period for all MDS-based quality measures in the SNF QRP is a 12-month calendar or fiscal year (i.e., four quarters), with the exception of the Patient/Resident COVID-19 Vaccine measure which is based on three months (one quarter) of data.</p> <p>Example: The 12-month Quality Measure Target Period for CY2024 CY2025 is January 1, 2024 2025 – December 31, 2024 2025.</p>	Updated the data years in the target period example to be more current.

#	Chapter	Section	Page(s)	Step(s)	SNF QRP Measure Calculations and Reporting User's Manual V7.0	Description of Change
14.	4	4.1.1	10	2	<p>2. Include MDS assessments in the Quality Measure Target Period if their Target Dates fall on or after the beginning of the Target Period and on or before the end of the Target Period.</p> <p>Note: If there is a PPS Discharge Assessment (A0310H = [1]) that is combined with an OBRA Discharge Assessment and the End date of most recent Medicare stay (A2400C) on this PPS Discharge Assessment (A0310H = [1]) is the last day of the Target Period, the Target Date of this assessment will be on or one day after the end of the Target Period. This PPS Discharge Assessment (A0310H = [1]) should be included in the set of assessments for this iteration.</p> <p>Example: If the Quality Measure Target Period is January 1, 2024-2025 – December 31, 2024-2025, all MDS assessments should be included with a Target Date on or after January 1, 2024-2025 and on or before December 31, 2024-2025, or January 1, 2025-2026 for PPS Discharge Assessments combined with OBRA Discharge Assessments. In the rare scenario where a PPS Discharge Assessment (A0310H = [1]), an OBRA Discharge Assessment (A0310F = [10, 11]), and a PPS 5-Day Assessment (A0310B = [01]) are all combined, and the End of the most recent Medicare Stay (A2400C) falls on December 31, 2024-2025, but the Target Date of this assessment is January 1, 2025-2026, the assessment would be included in the CY2024 CY2025 Target Period rather than the CY2025 CY2026 Target Period.</p>	Updated the data years in the target period example to be more current.

#	Chapter	Section	Page(s)	Step(s)	SNF QRP Measure Calculations and Reporting User's Manual V7.0	Description of Change
15.	4	4.1.3	11-12	1	<p>Identify SNF Stays. Use date items from the MDS assessment data to determine the SNF Stay Start Date and SNF Stay End Date for each SNF stay. This is an iterative process that will be performed until the SNF Stay Start Dates and End Dates for all SNF stays during the Quality Measure Target Period have been identified. Note that at the end of this process there will be valid SNF Stays identified for inclusion, based on a SNF Stay End date that falls within the Quality Measure Target Period, with SNF Stay Start Dates that fall before the start of the Quality Measure Target Period.</p> <p>1. Use the Quality Measure Target Period defined above to determine the search window start date and search window end date in the first iteration. The search window in the first iteration will be the same for all resident IDs in the data and is equal to the Quality Measure Target Period. For the first iteration, use the first day in the Quality Measure Target Period as the search window start date, and use the last day of the Quality Measure Target Period as the search window end date. Instructions for defining the search window in subsequent iterations are provided below in Section 4.1.3 Step 3.</p> <p>Example: If the Quality Measure Target Period is January 1, 2024 2025 – December 31, 2024 2025, the search window for the first iteration is January 1, 2024 2025 through December 31, 2024 2025, or January 1, 2025 2026 for PPS Discharge Assessments combined with OBRA Discharge Assessments.</p>	<p>Language added to improve clarity regarding the timing of SNF Stay Start and End dates. This revision does not change the SNF Stay identification methodology.</p> <p>Updated the data years in the target period example to be more current.</p>
16.	4	4.1.3	12	2.1	<p>2.1. If the most recent of the two record types, with the higher sorting order, is a PPS Discharge Assessment (A0310H = [1]):</p> <ul style="list-style-type: none"> Use the Start date of most recent Medicare stay (A2400B) on this assessment as the SNF Stay Start Date for this SNF stay. This date can occur before the start of the Quality Measure Target Period. 	<p>Language added to improve clarity regarding the timing of SNF Stay Start Dates relative to the Quality Measure Target Period. This revision does not change the SNF Stay identification methodology.</p>

#	Chapter	Section	Page(s)	Step(s)	SNF QRP Measure Calculations and Reporting User's Manual V7.0	Description of Change
17.	4	4.1.3	14-15	3	<p>3. Determine the search window start date and search window end date for the next iteration. The search window start date is always the same as the Quality Measure Target Period start date. Use the SNF Stay Start Date in the current iteration minus one day (i.e., A2400B minus 1) as the search window end date in the next iteration.</p> <p>Note: The search window in the first iteration is always equal to the Quality Measure Target Period and is the same for all resident IDs in the data. The search window end date in the next iteration is determined from the SNF Stay Start Date in the current iteration; therefore, in each subsequent iteration, there will be a different search window end date for each resident ID.</p> <p>Example: If the Target Period is January 1, 2024 2025 – December 31, 2024 2025 and, for the first identified SNF Stay, the SNF Stay Start Date is July 1, 2024 2025, then the search window for the search iteration is January 1, 2024 2025 through June 30, 2024 2025 (i.e., July 1, 2024 2025 minus 1 day).</p>	Updated the data years in the target period and search window example to be more current.

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18.	5	5.1	18	1.c	<p>c. Data submission deadline: data must be submitted by 11:59 p.m. ET on the 15th of August, November, February, or May, 4.5 months after the end of each respective quarter. However, if the 15th of the month falls on a Friday, weekend, or federal holiday, the data submission deadline is delayed until 11:59 p.m. ET on the next business day.</p> <ul style="list-style-type: none"> For example, the data submission deadline for Quarter 3 (July 1 through September 30) data collection would normally be 11:59 p.m. ET, February 15, which is the 15th day of the month, 4.5 months after the end of the data collection period. However, in 20252026, February 15th falls on a Saturday Sunday and February 17th16th is a federal holiday; therefore, the deadline for this data submission is extended until the next business day which is February 1817, 20252026, at 11:59 p.m. ET. 	Updated the data years in the data submission deadline example to be more current.
19.	5	5.1	18	3	<p>3. Resident-level data will be displayed for each reporting quarter in the report.¹⁷</p> <p>¹⁷Resident-level data became available for the Review and Correct reports in April 2019.</p>	Removal of the outdated footnote.

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20.	5	5.1	19-20	N/A	<p><u>Table 5-2</u> below shows examples of quarterly rates included in the iQIES Review and Correct Reports for existing and for new measures. For new measures, data is accumulated until four quarters have been collected and then rolling quarters occur for subsequent years. For existing measures, data is displayed based on rolling quarters.</p> <ul style="list-style-type: none"> • Example of quarterly rates included in the iQIES Review and Correct Reports for an <i>existing</i> measure: If the requested calendar year quarter end date is Quarter 1 (Q1), 20252026 (end date of March 31st), the four quarters of data that will be provided in this request will include the following: Q2 20242025 (April – June), Q3 20242025 (July – September), Q4 20242025 (October – December), and Q1 20252026 (January – March). • Example of quarterly rates included in the iQIES Review and Correct Reports for a <i>new</i> measure: If the requested calendar year quarter end date is Q1 20252026 (end date of March 31st), the data provided in this request will include the following: Q4 20242025 (October – December) and Q1 20252026 (January – March).⁺⁸ <p>⁺⁸ Because the Discharge Function Score measure calculations utilize data that were already collected, quarterly rates will capture four quarters of data, beginning with data collected from Q1 2023.</p>	<p>Updated the data years in examples of quarterly rates included in the iQIES Review and Correct Reports for an existing measure and a new measure to be more current.</p> <p>Removal of the outdated footnote.</p>

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21.	5	5.2	21	1	<p>Section 5.2 iQIES Quality Measure (QM) Reports</p> <p>Below are the specifications for the iQIES QM Reports for measures presented in Chapter 4, Section 4.2.</p> <ol style="list-style-type: none"> 1. Measures are calculated consistent with the methods in the previous section, Chapter 5, Section 5.1, “iQIES Review and Correct Reports”. For the applicable measures, only the cumulative rates will be displayed using all data in the target period. a. For the applicable measures, only the cumulative rates will be displayed using all data in the target period. 	Moving step 1.a to be part of the main step 1, as there are no additional sub-steps.

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22.	5	5.3	23	N/A	<p>Section 5.3 Measure Calculations During the Transition from SNF MDS 3.0 V1.18.11-1.19.1 to MDS 3.0 V1.19.1 1.20.1</p> <p>The MDS 3.0 will transition from version 1.18.11 1.19.1 to version 1.19.1 1.20.1 effective October 1, 2024-2025. The primary-item set change that impacts SNF QRP quality measure specifications is: the addition of item O0350: Resident's COVID-19 vaccination is up to date. This item is used by the SNF QRP quality measure COVID-19 Vaccine: Percent of Patients/Residents Who are Up to Date (CMS ID: S045.01). Specifications of this measure are reflected in Table 8-9.</p> <p>1) Items O0400B Occupational Therapy Minutes and O0400C Physical Therapy Minutes are being retired and item O0425 Therapy Services (B. Occupational Therapy and C. Physical Therapy) has been added. For the measures <i>Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients</i> (CMS ID: S024.07), <i>Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients</i> (CMS ID: S025.07), and <i>Discharge Function Score</i> (CMS ID: S042.03), the risk adjuster 'no physical or occupational therapy' will be determined using the discharge items O0425B and O0425C instead of the retired O0400B and O0400C for the overall risk-adjustment model. For the <i>Discharge Function Score</i> measure, the risk adjuster 'no physical or occupational therapy' will also be determined using O0425B and O0425C instead of the retired O0400B and O0400C for the statistical imputation procedure.</p>	<p>Revisions to this section to describe the impact of the MDS 3.0 V1.19.1 to V1.20.1 transition on certain quality measure specifications.</p> <p>The removal of items O0400B Occupational Therapy Minutes and O0400C Physical Therapy Minutes from the MDS and the addition of item O0425 Therapy Services (B. Occupational Therapy and C. Physical Therapy) resulted in a need for the risk adjuster 'no physical or occupational therapy' to be adjusted accordingly for the <i>Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients</i> (S024.07), <i>Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients</i> (S025.07), and <i>Discharge Function Score</i> (S042.03) measures.</p>

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23.	8	Table 8-4	40	N/A	<p>Covariates</p> <p><i>Data for each covariate are derived from the admission assessment included in the target Medicare Part A SNF stay.</i></p> <ol style="list-style-type: none"> 1. Age group 2. Admission self-care – continuous form 3. Admission self-care – squared form 4. Primary medical condition category 5. Interaction between primary medical condition category and admission self-care 6. Prior surgery 7. Prior functioning: self-care 8. Prior functioning: indoor mobility (ambulation) 9. Prior mobility device use 10. Stage 2 pressure ulcer 11. Stage 3, 4, or unstageable pressure ulcer/injury 12. Cognitive abilities 13. Communication Impairment 14. Urinary Continence 15. Bowel Continence 16. Tube feeding or total parenteral nutrition 17. Comorbidities 18. No physical or occupational therapy at admission discharge <p>See covariate details in <u>Table RA-5</u> and <u>Table RA-6</u> in the associated Risk-Adjustment Appendix File.</p> <p>(See Appendix for a full table excerpt)</p>	<p>The risk adjuster ‘no physical or occupational therapy at the time of admission’ was updated to account for the removal of items O0400B Occupational Therapy Minutes and O0400C Physical Therapy Minutes from the MDS and the addition of item O0425 Therapy Services (B. Occupational Therapy and C. Physical Therapy). The risk adjuster ‘no physical or occupational therapy’ was adjusted accordingly for the <i>Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients</i> (S024.07) measure to be ‘at the time of discharge’ given the O0425 item is only on the discharge assessment.</p>

#	Chapter	Section	Page(s)	Step(s)	SNF QRP Measure Calculations and Reporting User's Manual V7.0	Description of Change
24.	8	Table 8-5	44	N/A	<p>Covariates</p> <p><i>Data for each covariate are derived from the admission assessment included in the target Medicare Part A SNF stays.</i></p> <ol style="list-style-type: none"> 1. Age group 2. Admission mobility – continuous form 3. Admission mobility – squared form 4. Primary medical condition category 5. Interaction between primary medical condition category and admission mobility 6. Prior surgery 7. Prior functioning: indoor mobility (ambulation) 8. Prior functioning: stairs 9. Prior functioning: functional cognition 10. Prior mobility device use 11. Stage 2 pressure ulcer 12. Stage 3, 4, or unstageable pressure ulcer/injury 13. Cognitive abilities 14. Communication impairment 15. Urinary Continence 16. Bowel Continence 17. History of falls 18. Tube feeding or total parenteral nutrition 19. Comorbidities 20. No physical or occupational therapy at admission discharge <p>See covariate details in <u>Table RA-5</u> and <u>Table RA-7</u> in the associated Risk-Adjustment Appendix File.</p> <p>(See Appendix for a full table excerpt)</p>	<p>The risk adjuster ‘no physical or occupational therapy at the time of admission’ was updated to account for the removal of items O0400B Occupational Therapy Minutes and O0400C Physical Therapy Minutes from the MDS and the addition of item O0425 Therapy Services (B. Occupational Therapy and C. Physical Therapy). The risk adjuster ‘no physical or occupational therapy’ was adjusted accordingly for the <i>Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients</i> (S025.07) measure to be ‘at the time of discharge’ given the O0425 item is only on the discharge assessment.</p>

#	Chapter	Section	Page(s)	Step(s)	SNF QRP Measure Calculations and Reporting User's Manual V7.0	Description of Change
25.	8	Table 8-8	50-51	N/A	<p>Covariates</p> <p><i>Data for each covariate are derived from the admission assessment included in the target Medicare Part A SNF Stays.</i></p> <ol style="list-style-type: none"> 1. Age group 2. Admission function – continuous form⁷⁵ 3. Admission function – squared form⁷⁵ 4. Primary medical condition category 5. Interaction between admission function and primary medical condition category 6. Prior surgery 7. Prior functioning: self-care 8. Prior functioning: indoor mobility (ambulation) 9. Prior functioning: stairs 10. Prior functioning: functional cognition 11. Prior mobility device use 12. Stage 2 pressure ulcer/injury 13. Stage 3, 4, or unstageable pressure ulcer/injury 14. Cognitive abilities 15. Communication impairment 16. Urinary Continence 17. Bowel Continence 18. History of falls 19. Nutritional approaches 20. High BMI 21. Low BMI 22. Comorbidities 23. No physical or occupational therapy at the time of admission discharge <p>See covariate details in <u>Table RA-5</u> and <u>Table RA-8</u> in the associated Risk-Adjustment Appendix File.</p> <p>(See Appendix for a full table excerpt)</p>	<p>The risk adjuster ‘no physical or occupational therapy at the time of admission’ was updated to account for the removal of items O0400B Occupational Therapy Minutes and O0400C Physical Therapy Minutes from the MDS and the addition of item O0425 Therapy Services (B. Occupational Therapy and C. Physical Therapy). The risk adjuster ‘no physical or occupational therapy’ was adjusted accordingly for the <i>Discharge Function Score</i> (S042.03) measure to be ‘at the time of discharge’ given the O0425 item is only on the discharge assessment.</p>

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26.	Appendix A	A.1 Table A-1	54-55	N/A	Table A-1 Effective Dates by CMS ID Update for all SNF QRP Quality Measures (See Appendix for a full table excerpt)	Added Measure ID Update .07 to reflect quality measure whose CMS ID logic number was incremented by 1 to indicate a specification change. Measure IDs incremented to .07 include the <i>Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients</i> (S024.07) and the <i>Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients</i> (S025.07) measures. Added Measure ID Update .03 to reflect quality measure whose CMS ID logic number was incremented by 1 to indicate a specification change. Measure IDs incremented to .03 include the <i>Discharge Function Score</i> (S042.03) measure.
27.	Appendix A	A.1 Table A-2	55	N/A	Table A-2 Effective Dates of SNF Quality Manual Versions (See Appendix for a full table excerpt)	Updated the effective dates of Version 6.0 of the manual (10/01/2024 – 09/30/2025), and Version 7.0 of the manual (10/01/2025 – Present).
28.	Appendix B	B.2	58	N/A	<u>Example (Steps 3-5):</u> Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury <ul style="list-style-type: none"> • SNF stay had an Admission assessment (PPS 5-Day) Target Date of 06/15/2025-2026 and a Discharge assessment (PPS Discharge) Target Date of 6/22/2025-2026 • In the Schedule tab of the Risk-Adjustment Appendix File, refer to the Pressure Ulcer measure. • o The Admission assessment (PPS 5-Day) Target Date of 06/15/2025-2026 and Discharge assessment (PPS Discharge) Target Date of 6/22/2025-2026 is within the Target Period for Risk-Adjustment Update ID 6 (10/01/2024-2025– 09/30/2025-2026). Therefore, the user should use the information provided in the Risk-Adjustment Update ID 6 column. 	Updated all target date examples to be more current.

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29.	Appendix B	B.3	59	N/A	Table B-1 Primary Medical Condition Category (I0020B) and Active Diagnosis in the Last 7 Days (I8000A through I8000J) – ICD-10-CM Codes (See Appendix for a full table excerpt)	Updated the table to remove ICD-10-CM Code G82.52 from complete and severe tetraplegia. The G82.52 code is for incomplete tetraplegia.
30.	Appendix B	B.5	61	N/A	<u>Example (Steps 2–4):</u> <ul style="list-style-type: none"> SNF stay had an Admission assessment (PPS 5-Day) Target Date of 06/15/2025-2026 and a Discharge assessment (PPS Discharge) Target Date of 6/22/25-26 and a “Not Attempted” value coded for GG0130A1 (Eating at Admission). In the Schedule tab of the Discharge Function Score Imputation Appendix File, refer to the Discharge Function Score measure. <ul style="list-style-type: none"> The Admission assessment (PPS 5-Day) Target Date of 06/15/2025-2026 and Discharge assessment (PPS Discharge) Target Date of 6/22/2025 2026 is within the Target Period range for Imputation Update ID 2 (10/01/20242025-09/30/20252026). Therefore, the user should use the information provided in the Imputation Update ID 2 column. 	Updated all target date examples to be more current.

Appendix

This appendix provides excerpts from the SNF QRP Measure Calculations and Reporting User's Manual, Version 7.0 to contextualize the information that has been substantially changed since Version 6.0 of the manual. Some changes cover multiple pages and sections of the manual; therefore, examples of a substantive change are included in the Appendix. Please note, the footnote numbering included in the Appendix differs from the footnote numbering in Version 7.0 of the manual.

Appendix Table of Contents

Change Table Initial Search Order	SNF QRP Measure Calculations and Reporting User's Manual V6.0 Reference	SNF QRP Measure Calculations and Reporting User's Manual V7.0 Reference	Description of Change
9	Table 1-1	Table 1-1	Updated the CBE endorsement statuses for the <i>Discharge Function Score</i> (S042.03) measure as the measure received endorsement in the Fall 2024 cycle (#4640). Measure ID updates to increment the CMS ID by .01 to indicate a specification change for the <i>Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients</i> (CMS ID: S024.07), the <i>Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients</i> (CMS ID: S025.07) and the <i>Discharge Function Score</i> (S042.03) measures.
11	Table 1-2	N/A	Removed Table 1-2: Quality Measures Added to the SNF QRP, as there were no measures added to the FY2027 SNF QRP.
23-25	Tables 8-4, 8-5, 8-8	Tables 8-4, 8-5, 8-8	The risk adjuster 'no physical or occupational therapy' was updated to account for the removal of items O0400B Occupational Therapy Minutes and O0400C Physical Therapy Minutes from the MDS and the addition of item O0425 Therapy Services (B. Occupational Therapy and C. Physical Therapy). The risk adjuster 'no physical or occupational therapy' was adjusted accordingly for the <i>Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients</i> (CMS ID: S024.07), the <i>Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients</i> (CMS ID: S025.07), and the <i>Discharge Function Score</i> (S042.03) measures to be 'at discharge' given the O0425 item is only on the discharge assessment.

Change Table Initial Search Order	SNF QRP Measure Calculations and Reporting User's Manual V6.0 Reference	SNF QRP Measure Calculations and Reporting User's Manual V7.0 Reference	Description of Change
26	Table A-1	Table A-1	<p>Added Measure ID Update .07 to reflect quality measure whose CMS ID logic number was incremented by 1 to indicate a specification change. Measure IDs incremented to .07 include the <i>Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients</i> (CMS ID: S024.07) and the <i>Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients</i> (CMS ID: S025.07) measures.</p> <p>Added Measure ID Update .03 to reflect quality measure whose CMS ID logic number was incremented by 1 to indicate a specification change. Measure ID incremented to .03 includes the <i>Discharge Function Score</i> (S042.03) measure.</p>
27	Table A-2	Table A-2	Updated the effective dates of Version 6.0 of the manual (10/01/2024 – 9/30/2025), and Version 7.0 of the manual (10/01/2025 – Present).
29	Table B-1	Table B-1	Updated the ICD-10-CM codes presented in Table B-1. Removed ICD-10-CM code G82.52 which indicates incomplete tetraplegia. The exclusion is intended to be for complete and severe tetraplegia.

Table 1-1
SNF Quality Measures: CMIT Measure ID, CMS ID, Measure Type, and Measure Reference Name Crosswalk

Quality Measure	CMIT Measure ID # ¹	CMS ID ²	Measure Type	Measure Reference Name
National Healthcare Safety Network (NHSN) Measures				
COVID-19 Vaccination Coverage among Healthcare Personnel	00180 (CBE-endorsed)	S040.02	Process	HCP COVID-19 Vaccine
Influenza Vaccination Coverage among Healthcare Personnel (HCP)	00390 (CBE-endorsed)	S041.01	Process	HCP Influenza Vaccine
Medicare Claims-based Measures				
Potentially Preventable 30-Day Post-Discharge Readmission Measure for Skilled Nursing Facility (SNF) Quality Reporting Program (QRP)	00575 (not endorsed)	S004.01	Outcome	PPR
Discharge to Community (DTC)—Post Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP)	00210 (CBE-endorsed)	S005.02	Outcome	DTC
Medicare Spending Per Beneficiary (MSPB)—Post Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP)	00434 (not endorsed)	S006.01	Cost/ Resource	MSPB
SNF Healthcare-Associated Infections (HAI) Requiring Hospitalization	00680 (CBE-endorsed)	S039.01	Outcome	SNF HAI
Assessment-based Measures				
Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) ³	00520 (not endorsed)	S013.02	Outcome	Application of Falls
Drug Regimen Review Conducted With Follow-Up for Identified Issues—Post-Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP)	00225 (not endorsed)	S007.02	Process	DRR
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury	00121 (not endorsed)	S038.02	Outcome	Pressure Ulcer/Injury

(continued)

¹ Refer to the Centers for Medicare & Medicaid Services Measures Inventory Tool (<https://cmit.cms.gov/cmit/#/>) for the CMIT Measure ID, Consensus Based Entity (CBE)-endorsement status, as well as other detailed measure information. CBE-endorsement status is determined by the CMS CBE, which endorses quality measures through a transparent, consensus-based process that incorporates feedback from diverse groups of stakeholders to foster health care quality improvement. The CMS CBE endorses measures only if they pass a set of measure evaluation criteria. For more information, refer to the document titled CMS CBE Endorsement and Maintenance (<https://mmshub.cms.gov/sites/default/files/Blueprint-CMS-CBE-Endorsement-Maintenance.pdf>).

² Reflects changes in CMS measure identifiers based on updated measure specifications.

³ This measure is CBE-endorsed for long-stay residents in nursing homes (<https://p4qm.org/measures/0674>) and an application of this quality measure is finalized for reporting by SNFs under the [SNF QRP \(Federal Register 80\(4 August 2015\): 46440-46444\)](#).

Table 1-1 (continued)
SNF Quality Measures: CMIT Measure ID, CMS ID, Measure Type, and Measure Reference Name Crosswalk

Quality Measure	CMIT Measure ID #	CMS ID	Measure Type	Measure Reference Name
Assessment-based Measure				
Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients ⁴	00404 (not endorsed)	S024.06 S024.07	Outcome	Discharge Self-Care Score
Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients ⁵	00403 (not endorsed)	S025.06 S025.07	Outcome	Discharge Mobility Score
Transfer of Health (TOH) Information to the Provider – Post-Acute Care (PAC)	00728 (not endorsed)	S043.02	Process	TOH-Provider
Transfer of Health (TOH) Information to the Patient – Post-Acute Care (PAC)	00727 (not endorsed)	S044.02	Process	TOH-Patient
Discharge Function Score	01698 (not endorsed) (CBE-endorsed)	S042.02 S042.03	Outcome	Discharge Function Score
COVID-19 Vaccine: Percent of Patients/Residents Who Are Up to Date	01699 (not endorsed)	S045.01	Process	Patient/Resident COVID-19 Vaccine

⁴ This measure is CBE-endorsed for use in the IRF setting (<https://p4qm.org/measures/2635>) and finalized for reporting by SNFs under the [SNF QRP \(Federal Register 82 \(4 August 2017\): 36530-36636\)](#).

⁵ This measure is CBE-endorsed for use in the IRF setting (<https://p4qm.org/measures/2636>) and finalized for reporting by SNFs under the [SNF QRP \(Federal Register 82 \(4 August 2017\): 36530-36636\)](#).

Table 1-2
Quality Measures Added to the SNF QRP

Quality Measure	Planned Initial Release Date ⁶		
	Review and Correct Reports	Quality Measure Reports	Care Compare and Provider Data Catalog
COVID-19 Vaccine: Percent of Patients/Residents Who Are Up to Date	January 2025	October 2025	October 2025

⁶Planned initial release dates are based on the FY2024 Medicare Skilled Nursing Facility (SNF) Prospective Payment System (PPS) final rules.

Table 8-4
Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients (CMS ID: ~~S024.06~~ S024.07)⁷

Measure Description
This measure estimates the percentage of Medicare Part A SNF stays that meet or exceed an expected discharge self-care score.
Measure Specifications ^{b8}
<p>If a resident has multiple Medicare Part A SNF stays during the target 12 months, then all stays are included in this measure.</p> <p><i>Self-Care items and Rating scale:</i> The Self-Care assessment items used for discharge Self-Care score calculations are:</p> <ul style="list-style-type: none"> • GG0130A3. Eating • GG0130B3. Oral hygiene • GG0130C3. Toileting hygiene • GG0130E3. Shower/bathe self • GG0130F3. Upper body dressing • GG0130G3. Lower body dressing • GG0130H3. Putting on/taking off footwear <p>Valid codes and code definitions for the coding of the discharge Self-Care items are:</p> <ul style="list-style-type: none"> • 06 – Independent • 05 – Setup or clean-up assistance • 04 – Supervision or touching assistance • 03 – Partial/moderate assistance • 02 – Substantial/maximal assistance • 01 – Dependent • 07 – Resident refused • 09 – Not applicable • 10 – Not attempted due to environmental limitations • 88 – Not attempted due to medical condition or safety concerns • ^ – Skip pattern • - Not assessed/no information <p>To obtain the discharge self-care score, use the following procedure:</p> <ul style="list-style-type: none"> • If code is between 01 and 06, then use code as the value. • If code is 07, 09, 10, or 88, then recode to 01 and use this code as the value. • If the self-care item is skipped (^), dashed (-) or missing, recode to 01 and use this code as the value. <p>Sum the values of the discharge self-care items to create a discharge self-care score for each Medicare Part A SNF stay record. Scores can range from 7 to 42, with a higher score indicating greater independence.</p> <p><i>Numerator</i> The total number of Medicare Part A SNF stays (Type 1 SNF Stays only) in the denominator, except those that meet the exclusion criteria, with a discharge self-care score that is equal to or higher than the calculated expected discharge self-care score.</p>

(continued)

⁷ This measure was finalized for reporting by SNFs under the SNF QRP (Federal Register 82 (4 August 2017): 36530-36636).

⁸ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

Table 8-4 (continued)
Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients (CMS ID: ~~S024.06~~ S024.07)⁹

Measure Specifications ¹⁰	
Denominator	The total number of Medicare Part A SNF stays (Type 1 SNF Stays only), except those that meet the exclusion criteria.
Exclusions	Medicare Part A SNF stays are excluded if:
1.	<p>The Medicare Part A SNF stay is an incomplete stay: Residents with incomplete stays (<i>incomplete</i> = [1]) are identified based on the following criteria using the specified data elements:</p> <ul style="list-style-type: none"> a. Unplanned discharge, which would include discharge against medical advice, indicated by A0310G (Type of Discharge) = 2 (Unplanned discharge) [as indicated on an OBRA Discharge (RFA: A0310F = [10, 11]) that has a discharge date (A2000) that is on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C)]. OR b. Discharge to acute hospital, long-term care hospital, psychiatric hospital indicated by A2105 = [04, 05, 07]. [as indicated on an OBRA Discharge (RFA: A0310F = [10, 11]) that has a discharge date (A2000) that is on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C)]. OR c. SNF PPS Part A stay less than 3 days ((A2400C minus A2400B) < 3 days) OR d. The resident died during the SNF stay (i.e., Type 2 SNF Stays). Type 2 SNF Stays are SNF stays with a PPS 5-Day Assessment (A0310B = [01]) and a matched Death in Facility Tracking Record (A0310F = [12]).
2.	<p>The resident has any of the following medical conditions at the time of admission (i.e., on the 5-Day PPS assessment):</p> <ul style="list-style-type: none"> a. Coma, persistent vegetative state, complete tetraplegia, severe brain damage, locked-in syndrome, or severe anoxic brain damage, cerebral edema or compression of brain, as identified by: B0100 (Comatose) = 1 or ICD-10 codes (see Appendix B, Table B-1).
3.	<p>The resident is younger than age 18:</p> <ul style="list-style-type: none"> a. A1600 (Entry Date) – A0900 (Birth Date) is less than 18 years. b. Age is calculated in years based on the truncated difference between entry date (A1600) and birth date (A0900); i.e., the difference is not rounded to the nearest whole number
4.	<p>The resident is discharged to hospice or received hospice while a resident:</p> <ul style="list-style-type: none"> a. A2105 (Discharge status) = [09, 10], as indicated on an OBRA Discharge (RFA: A0310F = [10, 11] that has a discharge date (A2000) on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C) OR b. O0110K1b (Hospice while a Resident) = [1], as indicated at the time of admission (i.e., on the PPS 5-Day Assessment)

⁹ This measure was finalized for reporting by SNFs under the [SNF ORP \(Federal Register 82 \(4 August 2017\): 36530-36636\)](#).

¹⁰ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

Table 8-4 (continued)
Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients (CMS ID: ~~S024.06~~ S024.07)¹¹

Covariates
<p><i>Data for each covariate are derived from the admission assessment included in the target Medicare Part A SNF stay.</i></p> <ol style="list-style-type: none"> 1. Age group 2. Admission self-care – continuous form 3. Admission self-care – squared form 4. Primary medical condition category 5. Interaction between primary medical condition category and admission self-care 6. Prior surgery 7. Prior functioning: self-care 8. Prior functioning: indoor mobility (ambulation) 9. Prior mobility device use 10. Stage 2 pressure ulcer 11. Stage 3, 4, or unstageable pressure ulcer/injury 12. Cognitive abilities 13. Communication Impairment 14. Urinary Continence 15. Bowel Continence 16. Tube feeding or total parenteral nutrition 17. Comorbidities 18. No physical or occupational therapy at admission discharge <p>See covariate details in <u>Table RA-5</u> and <u>Table RA-6</u> in the associated Risk-Adjustment Appendix File.</p>

¹¹ This measure was finalized for reporting by SNFs under the SNF QRP (Federal Register 82 (4 August 2017): 36530-36636).
Manual Version 7.0 is current as of October 1, 2025

Table 8-5
Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients (CMS ID: ~~S025.06~~ S025.07)¹²

Measure Description
This measure estimates the percentage of Medicare Part A SNF stays that meet or exceed an expected discharge mobility score.
Measure Specifications ¹³
<p>If a resident has multiple Medicare Part A SNF stays during the target 12 months, then all stays are included in this measure.</p> <p><i>Mobility items and Rating scale:</i> The Mobility assessment items used for discharge Mobility score calculations are:</p> <ul style="list-style-type: none"> • GG0170A3. Roll left and right • GG0170B3. Sit to lying • GG0170C3. Lying to sitting on side of bed • GG0170D3. Sit to stand • GG0170E3. Chair/bed-to-chair transfer • GG0170F3. Toilet transfer • GG0170G3. Car transfer • GG0170I3. Walk 10 feet* • GG0170J3. Walk 50 feet with two turns* • GG0170K3. Walk 150 feet* • GG0170L3. Walking 10 feet on uneven surfaces* • GG0170M3. 1 step (curb) • GG0170N3. 4 steps • GG0170O3. 12 steps • GG0170P3. Picking up object • GG0170R3. Wheel 50 feet with 2 turns* • GG0170S3. Wheel 150 feet* <p>* Count the Wheel 50 feet with 2 turns (GG0170R) and the Wheel 150 feet (GG0170S) values twice to calculate the observed discharge mobility score for stays where (i) Walk 10 feet (GG0170I) has an activity not attempted (ANA) code at both admission and discharge and (ii) either Wheel 50 feet with two turns (GG0170R) or Wheel 150 feet (GG0170S) has a code between 01 and 06 at either admission or at discharge. The remaining residents use Walk 10 feet (GG0170I) + Walk 50 feet with two turns (GG0170J) + Walk 150 feet (GG0170K) + Walking 10 feet on uneven surfaces (GG0170L) to calculate the total observed discharge mobility score. In either case, 15 items are used to calculate a resident's observed mobility score and scores range from 15 – 90.</p> <p>Valid codes and code definitions for the coding of the discharge Mobility items are:</p> <ul style="list-style-type: none"> • 06 – Independent • 05 – Setup or clean-up assistance • 04 – Supervision or touching assistance • 03 – Partial/moderate assistance • 02 – Substantial/maximal assistance • 01 – Dependent

(continued)

¹² This measure was finalized for reporting by SNFs under the SNF QRP (Federal Register 82 (4 August 2017): 36530-36636).

¹³ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

Table -3 (continued)
Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients (CMS ID: ~~S025.06~~ S025.07)¹⁴

Measure Specifications ¹⁵
<p>Valid codes and code definitions for the coding of the discharge Mobility items are (continued):</p> <ul style="list-style-type: none"> • 07 – Resident refused • 09 – Not applicable • 10 – Not attempted due to environmental limitations • 88 – Not attempted due to medical condition or safety concerns • ^ – Skip pattern • - – Not assessed/no information <p>To obtain the discharge mobility score, use the following procedure:</p> <ul style="list-style-type: none"> • If code is between 01 and 06, then use code as the value. • If code is 07, 09, 10, or 88, then recode to 01 and use this code as the value. • If the mobility item is skipped (^), dashed (-), or missing, recode to 01 and use this code as the value. <p>Sum the values of the discharge mobility items to create a discharge mobility score for each Medicare Part A SNF stay. Scores can range from 15 – 90, with a higher score indicating greater independence.</p> <p><i>Numerator</i> The total number of Medicare Part A SNF stays (Type 1 SNF Stays only) in the denominator, except those that meet the exclusion criteria, with a discharge mobility score that is equal to or higher than the calculated expected discharge mobility score.</p> <p><i>Denominator</i> The total number of Medicare Part A SNF stays (Type 1 SNF Stays only), except those that meet the exclusion criteria.</p> <p><i>Exclusions</i> Medicare Part A SNF stays are excluded if:</p> <ol style="list-style-type: none"> 1. The Medicare Part A SNF stay is an incomplete stay: Residents with incomplete stays (<i>incomplete = [1]</i>) are identified based on the following criteria using the specified data elements: <ol style="list-style-type: none"> a. Unplanned discharge, which would include discharge against medical advice, indicated by A0310G (Type of Discharge) = 2 (Unplanned discharge) [as indicated on an OBRA Discharge (RFA: A0310F = [10, 11]) that has a discharge date (A2000) that is on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C)]. OR b. Discharge to acute hospital, long-term care hospital, psychiatric hospital indicated by A2105 = [04, 05, 07]. [as indicated on an OBRA Discharge (RFA: A0310F = [10, 11]) that has a discharge date (A2000) that is on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C)]. OR c. SNF PPS Part A stay less than 3 days ((A2400C minus A2400B) < 3 days) OR d. The resident died during the SNF stay (i.e., Type 2 SNF Stays). Type 2 SNF Stays are SNF stays with a PPS 5-Day Assessment (A0310B = [01]) and a matched Death in Facility Tracking Record (A0310F = [12]).

(continued)

¹⁴ This measure was finalized for reporting by SNFs under the [SNF QRP \(Federal Register 82 \(4 August 2017\): 36530-36636\)](#).

¹⁵ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

Table -4 (continued)
Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients (CMS ID: ~~S025.06~~ S025.07) ¹⁶

Measure Specifications ¹⁷	
2.	The resident has any of the following medical conditions at the time of admission (i.e., on the 5-Day PPS assessment): <ul style="list-style-type: none"> a. Coma, persistent vegetative state, complete tetraplegia, severe brain damage, locked-in syndrome, or severe anoxic brain damage, cerebral edema or compression of brain, as identified by: B0100 (Comatose) = 1 or ICD-10 codes (see Appendix B, Table B-1).
3.	The resident is younger than age 18: <ul style="list-style-type: none"> a. A1600 (Entry Date) – A0900 (Birth Date) is less than 18 years. b. Age is calculated in years based on the truncated difference between entry date (A1600) and birth date (A0900); i.e., the difference is not rounded to the nearest whole number.
4.	The resident is discharged to hospice or received hospice while a resident: <ul style="list-style-type: none"> a. A2105 (Discharge status) = [09, 10], as indicated on an OBRA Discharge (RFA: A0310F = [10, 11] that has a discharge date (A2000) on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C) OR b. O0110K1b (Hospice while a Resident) = [1], as indicated at the time of admission (i.e., on the PPS 5-Day Assessment)
Covariates	
<i>Data for each covariate are derived from the admission assessment included in the target Medicare Part A SNF stays.</i>	
1.	Age group
2.	Admission mobility – continuous form
3.	Admission mobility – squared form
4.	Primary medical condition category
5.	Interaction between primary medical condition category and admission mobility
6.	Prior surgery
7.	Prior functioning: indoor mobility (ambulation)
8.	Prior functioning: stairs
9.	Prior functioning: functional cognition
10.	Prior mobility device use
11.	Stage 2 pressure ulcer
12.	Stage 3, 4, or unstageable pressure ulcer/injury
13.	Cognitive abilities
14.	Communication impairment
15.	Urinary Continence
16.	Bowel Continence
17.	History of falls
18.	Tube feeding or total parenteral nutrition
19.	Comorbidities
20.	No physical or occupational therapy at admission discharge
21.	See covariate details in Table RA-5 and Table RA-7 in the associated Risk-Adjustment Appendix File.

¹⁶ This measure was finalized for reporting by SNFs under the SNF QRP (Federal Register 82 (4 August 2017): 36530-36636).

¹⁷ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

Table 8-8
Discharge Function Score (CMS ID: ~~S042.02~~ S042.03)¹⁸

Measure Description
This measure estimates the percentage of Medicare Part A SNF stays that meet or exceed an expected discharge function score.
Measure Specifications ¹⁹
<p>If a resident has multiple Medicare Part A SNF stays during the target 12 months, then all stays are included in this measure.</p> <p>Function items and Rating scale:</p> <p>The function assessment items used for discharge function score calculations are:</p> <ul style="list-style-type: none"> • GG0130A3. Eating • GG0130B3. Oral hygiene • GG0130C3. Toileting hygiene • GG0170A3. Roll left and right • GG0170C3. Lying to sitting on side of bed • GG0170D3. Sit to stand • GG0170E3. Chair/bed-to-chair transfer • GG0170F3. Toilet transfer • GG0170I3. Walk 10 feet* • GG0170J3. Walk 50 feet with 2 turns* • GG0170R3. Wheel 50 feet with 2 turns* <p>* Count Wheel 50 feet with 2 turns (GG0170R) value twice to calculate the total observed discharge function score for stays where (i) Walk 10 feet (GG0170I) has an activity not attempted (ANA) code at both admission and discharge and (ii) either Wheel 50 feet with 2 turns (GG0170R) or Wheel 150 feet (GG0170S) has a code between 01 and 06 at either at admission or at discharge. The remaining stays use Walk 10 feet (GG0170I) + Walk 50 feet with 2 turns (GG0170J) to calculate the total observed discharge function score.</p> <p>In either case, 10 items are used to calculate a resident's total observed discharge score and scores range from 10 – 60.</p> <p>Valid codes and their definitions for the discharge function items are:</p> <ul style="list-style-type: none"> • 06 – Independent • 05 – Setup or clean-up assistance • 04 – Supervision or touching assistance • 03 – Partial/moderate assistance • 02 – Substantial/maximal assistance • 01 – Dependent • 07 – Resident refused • 09 – Not applicable • 10 – Not attempted due to environmental limitations • 88 – Not attempted due to medical condition or safety concerns • ^ – Skip pattern • - – Not assessed/no information

(continued)

¹⁸ This measure is finalized for reporting by SNFs under the SNF QRP (Federal Register 88 (7 August 2023): 53233-53243).

¹⁹ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

Table 8-8 (continued)
Discharge Function Score (~~S042.02~~ S042.03)²¹

Measure Specifications^{b20}

To obtain the discharge function score, use the following procedure:

- If code is between 01 and 06, use the code as the value.
- If code is 07, 09, 10, 88, dashed (-), then use statistical imputation to estimate the item value for that item and use this code as the value.
- If the item is skipped (^), dashed (-), or missing, then use statistical imputation to estimate the item value for that item and use this code as the value.

Sum the values of the discharge function items to calculate the observed discharge function score for each Medicare Part A SNF stay. Scores can range from 10 to 60, with a higher score indicating greater independence.

Statistical Imputation

To calculate the imputed values for items with NA codes, use the procedure below. (Note that these steps first describe imputing the value for a single item at discharge and then describe the relevant modifications for the other items.)

1. Start with Eating (GG0130A). For each SNF stay where the item has a NA code at discharge, calculate z , a continuous variable that represents a patient's underlying degree of independence on this item, using the imputation coefficients specific to the GG0130A discharge model:

$$[1] \quad z = \gamma_1 x_1 + \dots + \gamma_m x_m$$

Where:

- γ_1 through γ_m are the imputation regression coefficients for the covariates specific to the GG0130A discharge model (See Discharge Function Score Appendix File. Note that the coefficients used in this calculation do not include the thresholds described in Step 2.)
 - x_1 – x_m are the imputation risk adjustors specific to the GG0130A discharge model.
2. Calculate the probability for each possible value, had the GG item been assessed, using z (Step 1) and the equations below.

$$[2] \quad \begin{aligned} \Pr(z \leq \alpha_1) &= \Phi(\alpha_1 - z), \\ \Pr(\alpha_1 < z \leq \alpha_2) &= \Phi(\alpha_2 - z) - \Phi(\alpha_1 - z), \\ \Pr(\alpha_2 < z \leq \alpha_3) &= \Phi(\alpha_3 - z) - \Phi(\alpha_2 - z), \\ \Pr(\alpha_3 < z \leq \alpha_4) &= \Phi(\alpha_4 - z) - \Phi(\alpha_3 - z), \\ \Pr(\alpha_4 < z \leq \alpha_5) &= \Phi(\alpha_5 - z) - \Phi(\alpha_4 - z), \\ \Pr(z > \alpha_5) &= 1 - \Phi(\alpha_5 - z), \end{aligned}$$

Where:

- $\Phi(\cdot)$ is the standard normal cumulative distribution function.
 - $\alpha_1 \dots \alpha_5$ represent thresholds of levels of independence that are used to assign a value of 1-6 based on z for the GG0130A discharge model (see Discharge Function Score Appendix File).
3. Compute the imputed value of the GG item using the six probabilities determined in Step 2 and the equation below.

$$[3] \quad \text{Imputed value of GG item} = \Pr(z \leq \alpha_1) + 2 * \Pr(\alpha_1 < z \leq \alpha_2) + 3 * \Pr(\alpha_2 < z \leq \alpha_3) + 4 * \Pr(\alpha_3 < z \leq \alpha_4) + 5 * \Pr(\alpha_4 < z \leq \alpha_5) + 6 * \Pr(z > \alpha_5)$$

4. Repeat Steps 1-3 to calculate imputed values for each GG item included in the observed discharge function score that was coded as NA, replacing the Eating (GG0130A) item with each applicable GG item.

(continued)

²⁰ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

²¹ This measure is finalized for reporting by SNFs under the SNF ORP (Federal Register 88 (7 August 2023): 53233-53243).

Table 8-8 (continued)
Discharge Function Score (~~S042.02~~ S042.03)²²

Measure Specifications^{b23}

See [Table IA-1](#), [Table IA-4](#), and [Table IA-5](#) in the associated Discharge Function Score Imputation Appendix File for the imputation coefficients and thresholds, as well as detailed MDS coding for each risk adjustor. The imputation coefficients and thresholds for each GG item are values obtained through ordered probit model analyses of all eligible Medicare Part A SNF stays where the item value is not missing (i.e., had a value 01-06) at discharge, and covariates include the predictors used in risk adjustment and values on all GG items available in MDS. The admission function values are included in the covariates and calculated using the same procedure as the observed discharge function scores, including the replacement of NA codes with imputed values. Please note that the iQIES QM and Provider Preview Reports use fixed regression coefficients and thresholds based on the target period in [Table IA-1](#), [Table IA-4](#), and [Table IA-5](#) in the Discharge Function Score Imputation Appendix File.

Numerator

The total number of Medicare Part A SNF stays ([Type 1 SNF Stays](#) only) in the denominator, except those that meet the exclusion criteria, with an observed discharge function score that is equal to or greater than the calculated expected discharge function score.

Denominator

The total number of Medicare Part A SNF stays ([Type 1 SNF Stays](#) only), except those that meet the exclusion criteria.

Exclusions

Medicare Part A SNF stays are excluded if:

1. The Medicare Part A SNF stay is an incomplete stay: Residents with incomplete stays (*incomplete* = [1]) are identified based on the following criteria using the specified data elements:
 - a. Unplanned discharge, which includes discharge against medical advice, indicated by A0310G (Type of Discharge) = 2 (Unplanned discharge) [as indicated on an OBRA Discharge (RFA: A0310F = [10, 11]) that has a discharge date (A2000) on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C)].
OR
 - b. Discharge to acute hospital, psychiatric hospital, long-term care hospital indicated by A2105 = [04, 05, 07]. [as indicated on an OBRA Discharge (RFA: A0310F = [10, 11]) that has a discharge date (A2000) that is on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C)].
 - c. SNF PPS Part A stay less than 3 days ((A2400C minus A2400B) < 3 days)
OR
 - d. The resident died during the SNF stay (i.e., [Type 2 SNF Stays](#)). Type 2 SNF Stays are SNF stays with a PPS 5-Day Assessment (A0310B = [01]) and a matched Death in Facility Tracking Record (A0310F = [12]).
2. The resident has any of the following medical conditions at the time of admission (i.e., on the 5-Day PPS assessment):
 - a. Coma, persistent vegetative state, complete tetraplegia, severe brain damage, locked-in syndrome, or severe anoxic brain damage, cerebral edema or compression of brain, as identified by: B0100 (Comatose) = 1 or ICD-10 codes (see [Appendix B, Table B-1](#)).

(continued)

²² This measure is finalized for reporting by SNFs under the SNF ORP (Federal Register 88 (7 August 2023): 53233-53243).

²³ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

Table 8-8 (continued)
Discharge Function Score (CMS ID: ~~S042.02~~ S042.03)²⁴

Measure Specifications ^{b25}	
3.	The resident is younger than age 18: a. A1600 (Entry Date) – A0900 (Birth Date) is less than 18 years. b. Age is calculated in years based on the truncated differences between entry date (A1600) and birth date (A0900); i.e., the difference is not rounded to the nearest whole number
4.	The resident is discharged to hospice or received hospice while a resident: a. A2105 (Discharge status) = [09, 10], as indicated on an OBRA Discharge (RFA: A0310F = [10, 11] that has a discharge date (A2000) on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C) OR b. O0110K1b (Hospice while a Resident) = [1], as indicated at the time of admission (i.e., on the PPS 5-Day Assessment)
Covariates	
<i>Data for each covariate are derived from the admission assessment included in the target Medicare Part A SNF Stays.</i>	
1.	Age group
2.	Admission function – continuous form ²⁶
3.	Admission function – squared form ²⁷
4.	Primary medical condition category
5.	Interaction between admission function and primary medical condition category
6.	Prior surgery
7.	Prior functioning: self-care
8.	Prior functioning: indoor mobility (ambulation)
9.	Prior functioning: stairs
10.	Prior functioning: functional cognition
11.	Prior mobility device use
12.	Stage 2 pressure ulcer/injury
13.	Stage 3, 4, or unstageable pressure ulcer/injury
14.	Cognitive abilities
15.	Communication impairment
16.	Urinary Continence
17.	Bowel Continence
18.	History of falls

²⁴ This measure is finalized for reporting by SNFs under the SNF QRP (Federal Register 88 (7 August 2023): 53233-53243).

²⁵ The national average observed score is calculated using the Medicare Part A SNF stay as the unit of analysis.

²⁶ Admission function score is the sum of admission values for function items included in the discharge score. NAs coded on admission items are treated the same way as NAs coded on discharge items, with NAs replaced with imputed values. Walking items and wheeling item are used in the same manner as in the discharge score.

²⁷ Admission function score is the sum of admission values for function items included in the discharge score. NAs coded on admission items are treated the same way as NAs coded on discharge items, with NAs replaced with imputed values. Walking items and wheeling item are used in the same manner as in the discharge score.

Table 8-8 (continued)
Discharge Function Score (CMS ID: ~~S042.02~~ S042.03)²⁸

Covariates	
19. Nutritional approaches	
20. High BMI	
21. Low BMI	
22. Comorbidities	
23. No physical or occupational therapy at the time of admission discharge	

²⁸ This measure is finalized for reporting by SNFs under the SNF QRP (Federal Register 88 (7 August 2023): 53233-53243).
Manual Version 7.0 is current as of October 1, 2025

Table A-1
Effective Dates by CMS ID Update for all SNF QRP Quality Measures

Quality Measure	Measure ID Update						
	.01	.02	.03	.04	.05	.06	.07
NHSN Measures							
COVID-19 Vaccination Coverage among Healthcare Personnel (CMS ID: S040.02)	Inception – 09/30/2023	10/01/2023 – Present	—	—	—	—	—
Influenza Vaccination Coverage among Healthcare Personnel (CMS ID: S041.01)	Inception – Present	—	—	—	—	—	—
Medicare Claims-based Measures							
Potentially Preventable 30-Day Post-Discharge Readmission Measure for Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) (CMS ID: S004.01)	Inception – Present	—	—	—	—	—	—
Discharge to Community (DTC)—Post Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) (CMS ID: S005.02)	Inception – 09/30/2020	10/1/2020 – Present	—	—	—	—	—
Medicare Spending Per Beneficiary (MSPB)—Post Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) (CMS ID: S006.01)	Inception – Present	—	—	—	—	—	—
SNF Healthcare-Associated Infections (HAI) Requiring Hospitalization (CMS ID: S039.01)	Inception – Present	—	—	—	—	—	—

(continued)

Table A-1 (continued)
Effective Dates by CMS ID Update for all SNF QRP Quality Measures

Quality Measure	Measure ID Update						
	.01	.02	.03	.04	.05	.06	.07
Assessment-based Measures							
Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) (CMS ID: S013.02)	Inception – 09/30/2019	10/01/2019 – Present	—	—	—	—	—
Drug Regimen Review Conducted With Follow-Up for Identified Issues–Post-Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) (CMS ID: S007.02)	Inception – 09/30/2019	10/01/2019 – Present	—	—	—	—	—
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)	Inception – 09/30/2019	10/01/2019 – Present	—	—	—	—	—
Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients (CMS ID: S024.06 S024.07)	Inception – 09/30/2019	10/01/2019 – 09/30/2020	10/01/2020 – 09/30/2022	10/01/2022 – 09/30/2023	10/01/2023 – 09/30/2024	10/01/2024 – Present 09/30/2025	10/01/2025 – Present
Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients (CMS ID: S025.06 S025.07)	Inception – 09/30/2019	10/01/2019 – 09/30/2020	10/01/2020 – 09/30/2022	10/01/2022 – 09/30/2023	10/01/2023 – 09/30/2024	10/01/2024 – Present 09/30/2025	10/01/2025 – Present
Transfer of Health (TOH) Information to the Provider – Post Acute Care (PAC) (CMS ID: S043.02)	Inception – 09/30/2024	10/01/2024 – Present	—	—	—	—	—
Transfer of Health (TOH) Information to the Patient – Post Acute Care (PAC) (CMS ID: S044.02)	Inception – 09/30/2024	10/01/2024 – Present	—	—	—	—	—
Discharge Function Score (CMS ID: S042.02 S042.03)	Inception – 09/30/2024	10/01/2024 – Present 09/30/2025	10/01/2025 – Present	—	—	—	—
COVID-19 Vaccine: Percent of Patients/Residents Who Are Up to Date (CMS ID: S045.01)	Inception – Present	—	—	—	—	—	—

Table A-2
Effective Dates of SNF Quality Manual Versions

Manual Version	Effective Dates
Manual V1.0	05/22/2017 – 09/30/2018
Manual V2.0	10/01/2018 – 09/30/2019
Manual V3.0	10/01/2019 – 09/30/2020
Addendum V3.0.1	10/01/2020 – 09/30/2022
Manual V4.0	10/01/2022 – 09/30/2023
Manual V5.0	10/01/2023 – 09/30/2024
Manual V6.0	10/01/2024 – Present 09/30/2025
Manual V7.0	10/01/2025 – Present

Manual Version 7.0 is current as of October 1, 2025

Table B-1
Primary Medical Condition Category (I0020B) and Active Diagnosis in the Last 7 Days
(I8000A through I8000J) – ICD-10-CM Codes

Primary Medical Condition Category (Item I0020B and I8000A through I8000J)	ICD-10-CM Codes			
Severe brain damage	S06.A1XA S06.A1XD S06.A1XS			
Complete and severe tetraplegia	G82.51, G82.52, G82.53, S14.111A, S14.111D, S14.112A, S14.112D,	S14.113A, S14.113D, S14.114A, S14.114D, S14.115A, S14.115D,	S14.116A, S14.116D, S14.117A, S14.117D,	S14.118A, S14.118D, S14.119A, S14.119D,
Locked-in state	G83.5			
Severe anoxic brain damage, edema or compression	G93.1, G93.5, G93.6			