Medicare Provider Utilization and Payment Data

Skilled Nursing Facilities PUF: Frequently Asked Questions

What is the difference between "Medicare Payment Amount" and "Medicare Standard Payment Amount" in the Skilled Nursing Facility PUF?

"Medicare Payment Amount" is the actual amount that Medicare pays for skilled nursing facility care. "Medicare Standard Payment Amount" is the amount that Medicare pays for care adjusted for geographic differences in payment rates.

How are averages calculated for the "Average Charge Amount", "Average Allowed Amount", "Average Payment Amount", and "Average Standardized Payment Amount" variables in the Skilled Nursing Facility PUF?

The average payment and charge variables reflect the total payments or charges for a given provider/RUG code divided by either the number of days or number of beneficiaries.

What are the definitions for the "Total Stays" and "Distinct Beneficiaries" variables in the Skilled Nursing Facility PUF?

"Total stays" reflects the total count of stays provided by a specific skilled nursing facility in the calendar year. "Distinct Beneficiaries" reflects the number of distinct Medicare beneficiaries with at least one stay or day in a skilled nursing facility in the calendar year. Beneficiaries may have multiple stays or days per year but are only counted once in this field per row, however they may be double-counted across rows.

Why is "Total Stays" only included on the Provider table but not the other tables in the Skilled Nursing Facility PUF?

"Total Stays" is only included on the Provider table as a beneficiary may be categorized into multiple RUGs within a single stay, and therefore any table that delineates by RUG will not have "stay" information.

Can "Distinct Beneficiaries" be summed across providers or RUGs for a total count of distinct skilled nursing facility users in the Skilled Nursing Facility PUF?

No, beneficiaries cannot be summed across providers or RUGs for a total count of distinct users. Beneficiaries will only be counted once per provider, per RUG, or per unique combination, but a beneficiary may receive services from more than one skilled nursing facility in a year and may be categorized into more than one RUG during the year.

How is therapy minutes defined on the "Therapy" table in the Skilled Nursing Facility PUF?

"Total therapy minutes" includes speech therapy, occupational therapy, and physical therapy types. All individual, half of concurrent, and one fourth of group minutes are included in this calculation.

Does the Skilled Nursing Facility PUF contain information for beneficiaries in Medicare Advantage or Medicaid?

No, the Skilled Nursing Facility PUF only includes claims submitted under the Medicare fee-for-service program. The file does not include claims from commercial payers or Medicaid.

Are any of the data suppressed in the Skilled Nursing Facility PUF data?

Data was suppressed if the facility provided services to 10 or fewer beneficiaries in the calendar year.

If I publish findings from the Skilled Nursing Facility PUF in medical journals do I need to obtain permission from CMS?

No, this data is public information and users are free to use the data in publications.

Can a beneficiary be listed in more than one chronic condition indicator per row?

Yes, a beneficiary may have multiple chronic conditions and may be listed in more than one chronic condition indicator for a particular skilled nursing facility.