



# **Skilled Nursing Facility Value-Based Purchasing Program**

Performance Score Report User Guide  
FY 2024 Program Year

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## Acronyms

CASPER	Certification and Survey Provider Enhanced Reports
CCN	CMS Certification Number
CMS	Centers for Medicare & Medicaid Services
FFS	fee-for-service
FY	fiscal year
HARP	HCQIS Access Roles and Profile
HCQIS	Health Care Quality Information Systems
HHS	U.S. Department of Health and Human Services
HIPAA	Health Insurance Portability and Accountability Act of 1996
IPM	incentive payment multiplier
MAC	Medicare Administrative Contractor
PAMA	Protecting Access to Medicare Act of 2014
PHE	public health emergency
PHI	protected health information
PII	personally identifiable information
PPS	Prospective Payment System
PSR	Performance Score Report
QIES/iQIES	Quality Improvement and Evaluation System/Internet Quality Improvement and Evaluation System
R&C	Review and Correction
RSRR	risk-standardized readmission rate
SNF	skilled nursing facility
SNF VBP	Skilled Nursing Facility Value-Based Purchasing
SNFRM	Skilled Nursing Facility 30-Day All-Cause Readmission Measure

## I. Overview

This user guide accompanies the Performance Score Report (PSR) for the fiscal year (FY) 2024 Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program year. It describes the data in each worksheet of the PSR and provides reference information and instructions for interpreting those data. The guide includes four sections:

1. [Overview](#)
2. [Background](#)
3. [PSR File Contents and Descriptions](#)
4. [Contacts and Additional Resources](#)

The PSR is available to download in Microsoft Excel format from the Internet Quality Improvement and Evaluation System (iQIES). [Section I.B](#) of this guide provides instructions on how to access your facility’s PSR in iQIES.

The PSR contains your skilled nursing facility’s (SNF’s) performance results for the FY 2024 SNF VBP Program year. The results include the incentive payment multiplier (IPM) that the Centers for Medicare & Medicaid Services (CMS) will apply to your SNF’s Medicare fee-for-service (FFS) Part A claims in FY 2024, from October 1, 2023, through September 30, 2024.

CMS assesses SNFs’ performance on the SNF 30-Day All-Cause Readmission Measure (SNFRM) during a baseline period and a performance period. In Table 1, we provide the baseline and performance periods for the FY 2024 Program year, as finalized through rulemaking.

**Table 1. SNFRM data periods for the FY 2024 Program year**

SNF VBP Program year	Baseline period	Performance period
FY 2024	FY 2019 (10/1/2018–9/30/2019)	FY 2022 (10/1/2021–9/30/2022)

### A. Confidential feedback reports

Since October 2016, CMS has provided SNFs with quarterly confidential feedback reports. These reports contain information about SNFs’ performance in the SNF VBP Program. CMS distributes four quarterly confidential feedback reports each Program year: an interim (partial-year) workbook, two full-year workbooks (one each for the baseline period and performance period), and a PSR.

The first three confidential feedback reports contained your SNF’s stay-level results for the FY 2024 Program year:

1. A full-year workbook containing baseline period (FY 2019, that is, 10/1/2018–9/30/2019) data, distributed in December 2022
2. An interim workbook containing partial performance period (10/1/2021–06/30/2022) data, distributed in March 2023
3. A full-year workbook containing full performance period (FY 2022, that is, 10/1/2021–9/30/2022) data, distributed in June 2023

In this user guide, we describe the data in each worksheet of the fourth and final confidential feedback report for the FY 2024 Program year, the PSR, and provide reference information and instructions for interpreting the report.

PSRs are read-only documents, which prevents users from unintentionally altering content. To edit your SNF's PSR, use the File → Save As option to save the document with a different file name.

### B. Accessing confidential feedback reports in iQIES

Starting in June 2023, CMS began distributing confidential feedback reports through the Internet Quality Improvement and Evaluation System (iQIES).<sup>1</sup> To locate your SNF's PSR in iQIES, please follow the instructions listed below:

1. Log into iQIES at <https://iqies.cms.gov/> using your Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) user ID and password.
  - a. If you do not have a HARP account, you may [register for a HARP ID](#).
2. In the Reports menu, select My Reports.
3. From the My Reports page, locate the MDS 3.0 Provider Preview Reports folder. Select the MDS 3.0 Provider Preview Reports link to open the folder.
4. Here you can see the list of reports available for download. Locate the desired SNF VBP Program Quarterly Confidential Feedback Report.
5. Once located, select More next to your desired SNF VBP Program Quarterly Confidential Feedback Report and the report will be downloaded through your browser. Once downloaded, open the file to view your facility's report.

For additional questions about accessing your SNF's PSR, which can only be accessed in iQIES, please contact the QIES/iQIES Service Center by phone at (800) 339-9313 or by email at [iQIES@cms.hhs.gov](mailto:iQIES@cms.hhs.gov).

### C. Review and Correction process

CMS grants SNFs a 30-day Review and Correction (R&C) period to review their results in their PSR before the data are made publicly available. This is known as Phase 2 of the R&C process. During this phase, SNFs may submit requests for corrections to only their performance score and ranking contained in their PSR.

SNFs must submit correction requests to the SNF VBP Program Help Desk at [SNFVBP@rti.org](mailto:SNFVBP@rti.org) within 30 calendar days after dissemination of the PSR. CMS notifies SNFs of the exact dates of the Phase 2 R&C period via email. CMS will not consider correction requests received more than 30 calendar days after dissemination of the PSR. Requests must include the following information:

- The SNF's CMS Certification Number (CCN)
- The SNF's name
- The correction requested
- The reason for requesting the correction

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<sup>1</sup> Previously, CMS distributed confidential feedback reports via the Quality Improvement and Evaluation System (QIES)/Certification and Survey Provider Enhanced Reports (CASPER) reporting system. CMS decommissioned the CASPER reporting system in July 2023.

Do **NOT** submit protected health information (PHI) or personally identifiable information (PII) to the SNF VBP Program Help Desk. Any disclosure of PHI or PII should only be in accordance with, and to the extent permitted by, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy and Security Rules and other applicable laws. CMS will review the correction requests and notify the requesting SNF of the final decision. CMS will implement any approved corrections before any affected data become publicly available.

Previously, during Phase 1 of the R&C process for the FY 2024 SNF VBP Program year, SNFs had the opportunity to review and submit corrections to the readmission measure rates in their confidential feedback reports for the baseline period (distributed in December 2022) and performance period (distributed in June 2023).<sup>2</sup> As with Phase 2 of the R&C process, CMS considered correction requests for up to 30 calendar days after disseminating the applicable reports. CMS used the information from these two reports to calculate the results in the PSRs.

## II. Background

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 2024 Program year, performance in the SNF VBP Program is 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, requiring the Secretary of the U.S. Department of Health and Human Services (HHS) to establish a SNF VBP Program. PAMA specifies that, under the 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
- Earn incentive payments based on their performance

All SNFs paid under Medicare's [SNF Prospective Payment System \(PPS\)](#) are subject to the SNF VBP Program. Inclusion in the SNF VBP Program does not require any action on the part of SNFs.

CMS is required to withhold 2 percent of SNFs' Medicare FFS Part A payments to fund the SNF VBP Program and then redistribute between 50 and 70 percent of this withhold to SNFs as incentive payments. CMS finalized a 60-percent payback percentage in the [FY 2018 SNF PPS final rule](#) (pages 36619–36621), with the remaining 40 percent of the withhold retained in the Medicare Trust Fund. CMS applies incentive payments prospectively to all Medicare FFS Part A claims paid under the SNF PPS for the

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<sup>2</sup> As finalized in the [FY 2022 SNF PPS final rule](#) (pages 42516 and 42517), beginning October 1, 2021, corrections during Phase 1 of the R&C process are limited to errors made by CMS or its contractors when calculating a SNF's readmission measure rate. SNFs are not able to correct any of the underlying administrative claims data (for example, a SNF discharge destination code) used to calculate their readmission measure rate during Phase 1 of the R&C process. For corrections to the underlying administrative claims data to be reflected in the SNF VBP Program's quarterly confidential feedback reports, SNFs must submit any claims correction requests to the Medicare Administrative Contractor (MAC), and the MAC must process the corrections before the "snapshot date." The quarterly confidential feedback reports do not reflect any claims corrections processed after the date of the claims snapshot, which is three months following the last index SNF admission in the applicable baseline period or performance period. CMS cannot recalculate any results in the quarterly confidential feedback reports to reflect claims corrected after the date of the claims snapshot.

applicable Program year (beginning October 1). CMS began applying incentive payments for SNFs on October 1, 2018.

For the FY 2024 Program year, SNFs' performance in the SNF VBP Program is based on their results on the SNFRM. CMS calculates the SNFRM using claims data extracted from SNF and hospital Medicare FFS Part A claims submitted to CMS for payment.

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 more details on future expansion of the SNF VBP Program beginning in the FY 2026 SNF VBP Program year, see the [FY 2023 SNF PPS final rule](#) and the [FY 2024 SNF PPS final rule](#).

### A. FY 2024 updates

#### 1. Updated baseline and performance periods

For the FY 2024 Program year, CMS updated the baseline and performance periods for assessing SNF performance on the SNFRM. As finalized through rulemaking, the FY 2024 Program year's baseline period is FY 2019 (October 1, 2018–September 30, 2019), and the performance period is FY 2022 (October 1, 2021–September 30, 2022).

#### 2. Resumed standard SNFRM risk adjustment lookback period for the performance period

The SNFRM is risk adjusted to account for differences in patient demographics, comorbidities, and other health status information between patients in different SNFs. This approach allows for comparison of performance between SNFs. To risk adjust the measure, CMS uses a defined period of data prior to the index stay to determine what comorbidities and other health status variables are present that affect the probability of a hospital readmission. The data period used to identify these comorbidities and health status information (referred to as risk adjustors) is called the “lookback” period. For the FY 2024 Program year, CMS will resume use of a 365-day risk adjustment lookback period for the performance period (FY 2022, that is, October 1, 2021–September 30, 2022).<sup>3</sup>

#### 3. Resumed standard scoring policies

For the FY 2024 Program year, CMS resumed the use of standard scoring policies. CMS calculated a risk-standardized readmission rate (RSRR) for both the baseline and performance periods and used those RSRRs for purposes of scoring. SNFs received performance scores and IPMs unique to and reflective of their facilities' performance on the SNFRM. Reference information and instructions for interpreting performance scores and IPMs are in [Section II.B](#) and [Section III](#) of this guide.

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<sup>3</sup> In the [FY 2022 SNF PPS final rule](#) (page 42507), CMS finalized a revision to the SNFRM risk adjustment lookback period for only the FY 2023 Program year performance period (FY 2021) in response to the COVID-19 public health emergency (PHE). CMS revised the originally specified 365-day lookback period, finalized in the [FY 2016 SNF PPS final rule](#) (page 46418), to a 90-day lookback period for the FY 2023 Program year performance period (FY 2021).

## B. Incentive payment multiplier calculation methodology

To determine incentive payments for a given Program year, CMS calculates each SNF’s IPM. CMS applies this multiplier to a SNF’s adjusted federal per diem rate when payments are made for the SNF’s Medicare FFS Part A claims for the applicable Program year.

CMS followed eight steps to calculate each SNF’s IPM for the FY 2024 Program year.

**Step 1. Calculate RSRRs.** The SNF VBP Program assesses each SNF’s performance on the SNFRM during a baseline period and performance period. CMS calculated an RSRR for both the baseline and performance periods using the following equation:

$$\left( \frac{\text{Predicted \# of readmissions}}{\text{Expected \# of readmissions}} \right) \times \frac{\text{National unadjusted readmission rate}}{\text{rate}} = \text{RSRR}$$

The predicted number of readmissions is the number of unplanned readmissions predicted based on a SNF’s performance, given the SNF’s unique case mix. The expected number of readmissions is the number of unplanned readmissions that would be expected if the residents at a given SNF were treated at the average SNF.

CMS previously provided SNFs with their baseline period RSRR in the confidential feedback report for the baseline period, distributed in December 2022. Likewise, CMS provided SNFs with their performance period RSRR in the confidential feedback report for the performance period, distributed in June 2023.<sup>4</sup>

CMS inverts the RSRRs for the baseline and performance periods by subtracting the RSRR from 1 so that higher results indicate better performance:

$$1 - \text{RSRR} = \text{Inverted RSRR}$$

**Step 2. Calculate the achievement threshold and benchmark.** CMS calculated two performance standards for the SNF VBP Program: the achievement threshold and the benchmark. CMS calculates both performance standards using inverted RSRRs.

- The achievement threshold is the 25th percentile of all SNFs’ performance on the SNFRM during the baseline period.
- The benchmark is the mean of the top decile of all SNFs’ performance on the SNFRM during the baseline period.

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<sup>4</sup> The RSRRs for both the baseline and performance periods are subject to Phase 1 of the R&C process. If a SNF submits a successful correction request during Phase 1 of the R&C process, the affected RSRR results in the SNF’s PSR could differ from the results previously provided in the confidential feedback reports for the baseline or performance period.



CMS publishes the performance standards in the SNF PPS final rule before the applicable Program year’s performance period begins. In Table 2, we provide the performance standards for the FY 2024 Program year.

**Table 2. FY 2024 SNF VBP Program performance standards**

SNF VBP Program year	Achievement threshold	Benchmark	SNF PPS final rule
FY 2024	0.79271	0.83033	<a href="#">FY 2022 SNF PPS final rule</a> (page 42513)

**Step 3. Determine performance scores.** CMS used the following elements to determine SNFs’ performance scores:

- The SNF’s baseline period inverted RSRR, rounded to five decimal places (Step 1)<sup>5</sup>
- The SNF’s performance period inverted RSRR, rounded to five decimal places (Step 1)<sup>6</sup>
- The applicable achievement threshold and benchmark for the Program year (Step 2)

To determine the performance score, CMS first calculated the improvement score (scores range from 0 to 90) and the achievement score (scores range from 0 to 100) using the criteria and equations below.

Improvement score:

- If the SNF’s performance period inverted RSRR was equal to or lower than the baseline period inverted RSRR, the SNF received 0 points for improvement.
- If the SNF’s performance period inverted RSRR was equal to or greater than the benchmark, the SNF received 90 points for improvement.<sup>7</sup>
- If the SNF’s performance period inverted RSRR was greater than its baseline period inverted RSRR, but less than the benchmark, CMS awarded between 0 and 90 points for improvement according to the following formula:

$$\left( \left[ 10 \times \left( \frac{(\text{SNF perf. period inverted RSRR} - \text{SNF baseline period inverted RSRR})}{(\text{Benchmark} - \text{SNF baseline period inverted RSRR})} \right) - 0.5 \right] \times 10 \right)$$

Achievement score:

- If a SNF’s performance period inverted RSRR was less than the achievement threshold, the SNF received 0 points for achievement.

<sup>5</sup> SNFs with fewer than 25 eligible stays during the baseline period (FY 2019) are included in the SNF VBP Program for FY 2024 but are scored on achievement only. These SNFs will not receive a baseline period RSRR or improvement score, so their achievement score will equal their performance score.

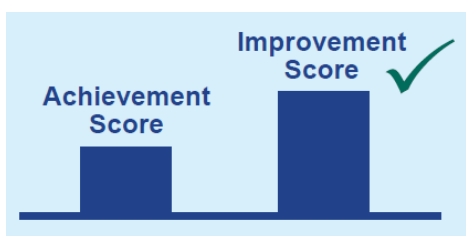
<sup>6</sup> SNFs that did not meet the SNFRM’s case minimum (25 or more eligible stays) in the performance period (FY 2022) are excluded from the SNF VBP Program for FY 2024. Payments to these SNFs in FY 2024 will not be affected by the SNF VBP Program; instead, these SNFs will receive their adjusted federal per diem rate

<sup>7</sup> If a SNF’s performance period inverted RSRR is less than or equal to the SNF’s baseline period inverted RSRR and greater than or equal to the benchmark—that is, if the SNF satisfies both criteria—then the SNF receives 0 points for improvement.

- If the SNF’s performance period inverted RSRR was equal to or greater than the benchmark, the SNF received 100 points for achievement.
- If a SNF’s performance period inverted RSRR was equal to or greater than the achievement threshold, but less than the benchmark, CMS awarded between 0 and 100 points for achievement according to the following formula:

$$\left[ \left( 9 \times \left( \frac{(\text{SNF perf. period inverted RSRR} - \text{Achievement threshold})}{(\text{Benchmark} - \text{Achievement threshold})} \right) + 0.5 \right) \times 10 \right]$$

Finally, whichever score was higher—either the improvement or achievement score—becomes the SNF’s performance score in the PSR.



**Step 4. Transform performance scores.** CMS transformed all performance scores (which range from 0 to 100, rounded to five decimal places) using the logistic exchange function below, where  $x_i$  is the SNF’s performance score. Transformed performance scores now range from 0 to 1.

$$f(X_i) = \frac{1}{1 + e^{-0.1(X_i - 50)}}$$

**Step 5. Calculate the incentive payment pool for all included SNFs.** CMS calculated the incentive payment pool for all SNFs as 60 percent of 2 percent of SNFs’ Medicare FFS Part A payments.

CMS finalized a 60-percent payback percentage as part of the [FY 2018 SNF PPS final rule](#) (pages 36619–36621).

$$\text{Incentive payment pool} = 60\% \text{ of } 2\% \text{ of SNF Medicare fee-for-service (FFS) Part A payments}$$

**Step 6. Calculate a scaling factor.** Using the equation below, CMS calculated a scaling factor to confirm that the sum of all included SNFs’ incentive payment adjustments equals the incentive payment pool:

$$\text{Scaling factor} = \frac{\text{Incentive payment pool (Step 5)}}{\sum \left( 0.02 \times \frac{\text{Total Medicare payments to SNF}}{\text{SNF's transformed performance score (Step 4)}} \right)}$$

**Step 7. Determine each SNF’s incentive payment adjustment.** Using the equation below, CMS calculated each SNF’s incentive payment adjustment:

$$\text{Incentive payment adjustment} = 0.02 \times \text{SNF's transformed performance score (Step 4)} \times \text{Scaling factor (Step 6)}$$

**Step 8. Calculate each SNF’s IPM.** CMS calculated each SNF’s IPM, which simultaneously accounts for the 2-percent withhold and the incentive payment adjustment, as shown in the equation below:

$$\text{Incentive payment multiplier} = \frac{\text{Incentive payment adjustment (Step 7)}}{\text{Incentive payment adjustment (Step 7)}} + 0.98$$

CMS applies each SNF’s IPM to the adjusted federal per diem rate for the applicable Program year. When payments are made for a SNF’s Medicare FFS Part A claims in FY 2024, CMS multiplies the adjusted federal per diem rate by the IPM.

See the [SNF VBP Program: FY 2024 Incentive Payment Multiplier Calculation Infographic](#) on the CMS.gov website for more information on how CMS determined performance standards, performance scores, and IPMs for the FY 2024 Program year.

See the [SNF VBP Program Exchange Function Methodology Report](#) for more information about why CMS selected the logistic exchange function and how CMS uses SNFs’ performance scores to determine incentive payments.

### C. Public reporting

CMS publicly reports facility-level and national, aggregate-level results for the SNF VBP Program on a [CMS-specified website](#). Generally, CMS makes these results publicly available in the fall following distribution of the annual PSRs, which typically takes place in August.

The publicly reported facility-level results are as follows:

- SNF VBP Program rankings
- Facility information (CCNs, facility names, and facility addresses)
- Baseline period RSRRs
- Performance period RSRRs
- Achievement scores
- Improvement scores
- Performance scores
- IPMs

The publicly reported national, aggregate-level results are as follows:

- The unadjusted national average readmission rates for the baseline period and performance period

- The achievement threshold and benchmark (that is, the performance standards for a given Program year)
- The range of performance scores
- The total number of SNFs receiving value-based incentive payments
- The range of IPMs
- The range of value-based incentive payments (in dollars)
- The total amount of value-based incentive payments (in dollars)

As finalized in the [FY 2023 SNF PPS final rule](#) (pages 47585–47588), SNFs that did not meet the SNFRM’s case minimum (25 or more eligible stays) in the performance period (FY 2022) are excluded from the SNF VBP Program for the FY 2024 Program year. CMS will not publicly report any data for these excluded SNFs.<sup>8</sup>

### III. PSR File Contents and Descriptions

In this section, we describe the information in your SNF’s PSR, which presents your SNF’s performance results for the FY 2024 SNF VBP Program year. It includes the IPM that CMS will apply to your SNF’s adjusted federal per diem rate when payments are made for your SNF’s Medicare FFS Part A claims in FY 2024 (October 1, 2023–September 30, 2024).

The PSR contains three worksheets:

1. [Cover Sheet](#)
2. [Facility Performance](#)
3. [Data Dictionary](#)

#### A. Cover Sheet

The Cover Sheet worksheet of the PSR describes the contents of the PSR, introduces the SNF VBP Program, and includes contact information and links to additional resources.

#### B. Facility Performance

The second worksheet in the PSR (Facility Performance) provides your SNF’s performance results for the FY 2024 SNF VBP Program year. In Table 3, we describe the variables in the Facility Performance worksheet.

SNFs that did not meet the SNFRM’s case minimum (25 or more eligible stays) during the performance period (FY 2022) are excluded from the SNF VBP Program for FY 2024. Payments to these SNFs in FY 2024 will not be affected by the SNF VBP Program; instead, these SNFs will receive their adjusted federal per diem rate. In addition, these SNFs will not receive any data in their PSR; their PSR will contain a “---” for all variables shown in the Facility Performance worksheet.

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<sup>8</sup> SNFs with fewer than 25 eligible stays during only the baseline period (FY 2019) are included in the SNF VBP Program for FY 2024. However, CMS will not publicly report baseline period RSRRs or improvement scores for these SNFs.

**Table 3. Your SNF’s performance results (PSR Worksheet 2—Facility Performance contents)**

Row name	Description
Baseline Period RSRR	Your SNF’s rate of unplanned readmissions during the baseline period (FY 2019). This rate is adjusted for stay-level risk factors such as clinical characteristics and comorbidities, as calculated by the SNFRM. Provided that no corrections were made as a result of Phase 1 of the R&C process, this value will match the baseline period RSRR in your SNF’s confidential feedback report for the baseline period, distributed in December 2022. SNFs with fewer than 25 eligible stays during the baseline period (FY 2019) will not receive a baseline period RSRR, and their PSR will contain a triple dash: “---.”
Performance Period RSRR	Your SNF’s rate of unplanned readmissions during the performance period (FY 2022). This rate is adjusted for stay-level risk factors such as clinical characteristics and comorbidities, as calculated by the SNFRM. Provided that no corrections were made as a result of Phase 1 of the R&C process, this value will match the performance period RSRR in your SNF’s confidential feedback report for the performance period, distributed in June 2023.
Achievement Score	A measure of how well your SNF performed during the performance period (FY 2022) compared with national SNF performance during the baseline period (FY 2019). Scores range from 0 to 100, with higher scores indicating better performance. For a full explanation of how CMS calculates SNF achievement scores, see <a href="#">Step 3 of the IPM calculation methodology in this user guide.</a>
Improvement Score	A measure of how much your SNF improved from the baseline period (FY 2019) to the performance period (FY 2022). Scores range from 0 to 90, with higher scores indicating better performance. For a full explanation of how CMS calculates SNF improvement scores, see <a href="#">Step 3 of the IPM calculation methodology in this user guide.</a> SNFs with fewer than 25 eligible stays during the baseline period (FY 2019) will not receive an improvement score, and their PSR will contain a triple dash: “---.”
Performance Score	The higher of your SNF’s achievement score and improvement score. Scores range from 0 to 100, with higher scores indicating better performance.
Program Rank	Your SNF’s national rank among eligible, included SNFs in the SNF VBP Program.
Incentive Payment Multiplier	A multiplier assigned to your SNF based on its performance in the SNF VBP Program. When payments are made for your SNF’s Medicare FFS Part A claims in FY 2024, CMS multiplies the adjusted federal per diem rate by this multiplier.

In Table 4, we describe how to interpret an incentive payment multiplier’s impact on a SNF’s Medicare FFS Part A payments in FY 2024.

**Table 4. Interpreting a SNF VBP Program incentive payment multiplier**

Incentive payment multiplier (IPM) result	Interpretation
IPM < 1	Your SNF’s IPM is net negative, meaning your SNF will receive less than the 2-percent withhold. That is, your SNF will earn less than it would have in the absence of the SNF VBP Program in FY 2024.
IPM = 1	Your SNF’s IPM is net neutral, meaning your SNF will receive the 2-percent withhold. That is, your SNF will earn the same amount it would have in the absence of the SNF VBP Program in FY 2024.
IPM > 1	Your SNF’s IPM is net positive, meaning your SNF will receive more than the 2-percent withhold. That is, your SNF will earn more than it would have in the absence of the SNF VBP Program in FY 2024.

### C. Data Dictionary

The third and final worksheet in the PSR is the Data Dictionary. This worksheet includes the variable names and descriptions of the data in Worksheet 2—Facility Performance.

## IV. Contacts and Additional Resources

More information on the SNF VBP Program, including information regarding the Program’s scoring methodology, confidential feedback reports, public reporting efforts, and R&C process, is available on the [SNF VBP Program webpage on CMS.gov](#).

For help obtaining access to quarterly reports in iQIES, contact the QIES/iQIES Service Center by phone at (800) 339-9313 or by email at [iQIES@cms.hhs.gov](mailto:iQIES@cms.hhs.gov).

For additional questions about the SNF VBP Program, email the SNF VBP Program Help Desk at [SNFVBP@rti.org](mailto:SNFVBP@rti.org).