

Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) Quick Reference Guide

The IMPACT Act of 2014 mandated the establishment of the SNF QRP. As finalized in the Fiscal Year (FY) 2016 SNF PPS final rule, beginning with FY 2018 and each subsequent FY, the Secretary shall reduce the market basket update (also known as the Annual Payment Update, or APU) by 2 percentage points for any SNF that does not comply with the quality data submission requirements with respect to that FY.

The FY 2018 reporting year is based on one quarter of data from 10/1/16 – 12/31/16. This means that FY 2018 compliance determination will be based on data submitted for admissions to the SNF on and after October 1, 2016, and discharged from the SNF up to and including December 31, 2016. Providers have until June 1, 2017*, to correct and/or submit their quality data from the FY 2018 reporting year. Providers must submit all data necessary to calculate SNF QRP measures on at least 80% of the MDS assessments submitted to be in compliance with FY 2018 SNF QRP requirements.

Refer to Table 1 on page 2 for a list of the current SNF measures for FY 2018.

Frequently Asked Questions

Q: Where can I find more information about the SNF QRP requirements?

Providers should visit the [SNF QRP webpage](#) for more information on SNF QRP measures and requirements. This webpage will be frequently updated with announcements and resources including:

- SNF QRP training materials
- Fact Sheets
- Help Desk Quarterly Q+A Documents

Q: When is a new SNF required to begin reporting SNF QRP data?

As stated in the FY 2016 SNF PPS final rule, a new SNF would be required to begin reporting data on any quality measures finalized for that program year by no later than the first day of the calendar quarter subsequent to 30 days after the date on the SNF's CMS Certification Number (CCN) notification letter.

EXAMPLE: if a SNF received its CCN on August 28, 2016, and 30 days are added (August 28 + 30 days = September 27), the SNF would be required to submit data for residents who are admitted beginning on October 1, 2016.

Q: How do SNFs submit QRP data?

SNF QRP data is submitted through MDS 3.0 via the Quality Improvement and Evaluation System (QIES) Assessment Submission and Processing (ASAP) system. The implementation of the SNF QRP will not change requirements related to the submission of MDS 3.0 data through CMS' QIES ASAP system. For an overview of the steps required to submit an MDS 3.0 file, verify its submission status, and obtain a Final Validation report review the [Helpful Hints Fact Sheet](#).

Q: Are swing beds subject to SNF QRP requirements?

According to the FY 2016 SNF PPS final rule (80 FR 46429), critical access hospitals (CAHs) with swing beds are not required to submit quality data under the SNF QRP. Note, however, that non-CAH swing beds are subject to SNF QRP requirements. For more information about requirements for swing bed providers, please refer to the [SNF Prospective Payment System \(PPS\) Swing Bed webpage](#).

Q: What measures are required for the SNF QRP?

Table 1 outlines the measures required and the data submission mechanism for those measures.

Table 1

NQF Number	Measure Name	Data Submission Mechanism
NQF #0678	Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short-Stay)	Minimum Data Set (MDS) 3.0
NQF #0674	Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long-Stay)	MDS 3.0
NQF #2631	Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function	MDS 3.0

Claims-based measures are also included in the SNF QRP. These measures are calculated through Medicare Fee-For-Service claims data and do not require SNFs to submit any additional data to CMS. A list of claims-based measures is available on the [CMS SNF QRP webpage](#).

Help Desk Assistance

SNFQualityQuestions@cms.hhs.gov (Quality Help Desk)

For questions about SNF reporting requirements, quality measures, and reporting deadlines.

QRPHelp@cormac-corp.com (Post-Acute Care Support Team)

For questions about Outreach and the APU Quick Reference Guide contents.

[MDS 3.0 Coding Questions](#) (State RAI Coordinator)

Please contact your State RAI Coordinator listed in Appendix B of the MDS RAI Manual. You can find this contact list on [CMS's MDS 3.0 RAI Manual Web page under the Downloads section \(file name – MDS-RAI-Manual-Appendix-B\)](#).

Help@qtso.com or 1-877-201-4721 (QIES Help Desk)

For questions about MDS record completion and submission processes, or for technical questions. This group also handles questions related to MDS/CASPER login IDs/passwords and jRAVEN software.

SNFQRPReconsiderations@cms.hhs.gov (APU/Reconsiderations Help Desk)

For reconsideration requests and follow-up questions after the facility has received a CMS determination of noncompliance letter.

Helpful Links

[Post-Acute Care \(PAC\) Listserv](#) — Sign up for the official CMS PAC listserv to receive important QRP updates.

[SNF Quality Reporting FAQs](#) — CMS developed a list of Frequently Asked Questions (FAQ) addressing general questions about the SNF Quality Reporting Program, including information about the quality measures, data submission deadlines, training materials, and other helpful resources.

[SNF Quality Reporting Measures and Technical Information](#) — This page provides details on SNF QRP measures as well as technical updates and resources related to SNF data collection and submission of quality data.

[SNF Quality Reporting Reconsideration and Exception & Extension](#) — If SNFs failed to submit the required measures data by each submission deadline, they receive notifications of their non-compliance, alerting them that they are at risk of having a two (2)-percentage point reduction applied to their APUs. When they receive this notification, they may request a CMS reconsideration of the initial determination. If a SNF is affected by an extraordinary circumstance, it can submit an exception or extension request to CMS. Information on this process is available on this page.