



Skilled Nursing Facility Value-Based Purchasing Program

User Guide for the
Early Look Performance Score Report

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Acronyms

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
iQIES	Internet Quality Improvement and Evaluation System
LPN	licensed practical nurse
PAMA	Protecting Access to Medicare Act of 2014
PBJ	Payroll-Based Journal
PHI	protected health information
PII	personally identifiable information
PPS	Prospective Payment System
QIES	Quality Improvement and Evaluation System
R&C	Review and Correction
RN	registered nurse
SNF	skilled nursing facility
SNF HAI	Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization measure
SNF VBP	Skilled Nursing Facility Value-Based Purchasing
SNFRM	Skilled Nursing Facility 30-Day All-Cause Readmission Measure

I. Overview

The Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program is a Centers for Medicare & Medicaid Services (CMS) program that awards incentive payments to skilled nursing facilities (SNFs) to encourage SNFs to improve the quality of care they provide to patients. Beginning in the Fiscal Year (FY) 2026 Program year, the SNF VBP Program is expanding to assess performance on multiple quality measures rather than a single measure of all-cause hospital readmissions. For the FY 2026 Program year, performance in the SNF VBP Program will be based on performance across four quality measures.

The Early Look Performance Score Report (Early Look Report) is intended to accomplish three goals for the newly expanded SNF VBP Program:

1. Familiarize SNFs with the planned format of the official Performance Score Report that will be distributed for the FY 2026 Program year.
2. Familiarize SNFs with the scoring and payment methodology that will be applied for the FY 2026 Program year.
3. Inform SNFs of their past performance on the four quality measures adopted for the FY 2026 Program year, and model performance for the FY 2026 SNF VBP Program year using this historical data.

The Early Look Reports do not reflect facilities' official performance in the SNF VBP Program and will not impact facilities' payments; CMS will share official performance information for the FY 2026 Program year based on updated measure data at a later date.

This user guide accompanies the Early Look Report for the SNF VBP Program. It describes the data in each worksheet of the report and provides reference information and instructions for interpreting those data. The guide includes four sections:

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

The Early Look Reports are 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 Early Look Report in iQIES.

The Early Look Report includes your SNF's modeled performance for the FY 2026 SNF VBP Program year, including a modeled (that is, illustrative, not official) incentive payment multiplier (IPM) that CMS would apply to your SNF's Medicare fee-for-service (FFS) Part A claims in FY 2026, from October 1, 2025, through September 30, 2026.

To determine performance in the SNF VBP Program, CMS assesses SNFs' performance on quality measures during a baseline period and performance period. In Table 1, we provide the baseline and performance periods used for measure and scoring calculations in the Early Look Report.

Table 1. Data periods used for calculations in the Early Look Report

Quality measure	Baseline period in the Early Look Report	Performance period in the Early Look Report
SNF 30-Day All-Cause Readmission Measure (SNFRM)	FY 2021 (10/1/2020–9/30/2021)	FY 2022 (10/1/2021–9/30/2022)
Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI)	FY 2021 (10/1/2020–9/30/2021)	FY 2022 (10/1/2021–9/30/2022)
Total Nursing Staff Turnover (Nursing Staff Turnover)	FY 2021 (10/1/2020–9/30/2021)	FY 2022 (10/1/2021–9/30/2022)
Total Nursing Hours per Resident Day (Total Nurse Staffing)	FY 2021 (10/1/2020–9/30/2021)	FY 2022 (10/1/2021–9/30/2022)

A. Confidential feedback reports

Since October 2016, CMS has provided SNFs with quarterly confidential feedback reports containing 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 Performance Score Report.

However, the Early Look Report is distinct from these four quarterly confidential feedback reports. It is a new, one-time report distributed for informational purposes only. The Early Look Report does not reflect official performance in the SNF VBP Program and will not impact facilities' payments.

The Early Look Reports are read-only documents, which prevents users from unintentionally altering content. To edit your SNF’s Early Look Report, use the File → Save As option to save the report with a different file name.

B. Accessing the Early Look Report in iQIES

CMS distributes confidential feedback reports through iQIES. To locate your SNF’s Early Look Report 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 SNF VBP Program Early Look Report (file name: SNFVBP_[CCN]_FY26_ELRL_Apr2024.xlsx).
5. Once located, select **More** next to the SNF VBP Program Early Look 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 Early Look Report, 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.

C. Review and Correction process

The Early Look Reports are not eligible for the SNF VBP Program’s Review and Correction (R&C) process. This is because the Early Look Reports are for informational purposes only. The historical measure data used to model performance in the expanded SNF VBP Program are not final and are subject to change; the scores and IPM within the Early Look Reports do not reflect facilities’ official performance in the SNF VBP Program and will not impact facilities’ payments.

CMS will share official performance information for the FY 2026 Program year based on updated measure data at a later date.

For questions about the Early Look Report, contact the SNF VBP Program Help Desk by email at SNFVBP@rti.org.

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.

D. Public reporting

The Early Look Reports are intended for informational purposes only, are confidential, and the results will not be publicly reported on the [CMS-specified website for public reporting](#).

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

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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. CMS subsequently adopted additional measures in the [FY 2023 SNF PPS final rule](#) (pages 47564–47580) and the [FY 2024 SNF PPS final rule](#) (pages 53276-53304).

For the FY 2026 Program year, performance in the SNF VBP Program will be based on performance across four quality measures, as summarized in Table 2. For additional, detailed information about these measures, consult the technical reports linked in the table.

Table 2. Quality measures adopted for the FY 2026 SNF VBP Program year

Quality measure and technical report	Measure result	Measure data source	SNF VBP Program case minimum
SNF 30-Day All-Cause Readmission Measure (SNFRM)	This measure evaluates the annual risk-standardized rate of unplanned, all-cause hospital readmissions.	Medicare FFS Part A claims	25 eligible stays
Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI)	This measure evaluates the annual risk-standardized rate of healthcare-associated infections requiring hospitalization that are acquired during SNF care.	Medicare FFS Part A claims	25 eligible stays
Total Nursing Staff Turnover (Nursing Staff Turnover)	This measure evaluates the annual turnover rate among eligible skilled nursing facility staff, including registered nurses (RNs), licensed practical nurses (LPNs), and nurse aides.	CMS's Payroll-Based Journal (PBJ) system	5 eligible staff and 1 eligible stay
Total Nursing Hours per Resident Day (Total Nurse Staffing)	This measure evaluates the case-mix adjusted total nursing staff hours (including RNs, LPNs, and nurse aides) per a facility's aggregate count of a daily resident census.	CMS's PBJ system	25 average residents per day

The Early Look Report is intended to familiarize SNFs with the newly expanded SNF VBP Program beginning with the FY 2026 Program year. The Early Look Report uses the planned format of the official Performance Score Report that will be distributed for the FY 2026 Program year, and it reflects the scoring and payment methodology that will be applied for the FY 2026 Program year. The Early Look Report also uses historical measure data to inform SNFs of their past performance on the four quality measures listed in Table 2 and model SNFs' performance for the FY 2026 Program year.

The Early Look Reports do not reflect facilities' official performance in the FY 2026 SNF VBP Program and will not impact facilities' payments; CMS will share official performance information for the FY 2026 Program year based on updated measure data at a later date.

The scoring and IPM methodology that will be applied for the FY 2026 Program year is described in more detail below.

A. Scoring and incentive payment multiplier methodology applied for the Early Look Report

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.

In the Early Look Report, CMS used historical measure data to model the scoring and payment methodology that will be applied in the FY 2026 Program year. CMS followed nine steps to calculate

each SNF’s modeled IPM. For more information about the methodology used to calculate results in the Early Look Report, please see the Early Look Performance Score Report Incentive Payment Multiplier Infographic available on the [CMS website](#).

Step 1. Calculate measure results. For the SNF VBP Program, CMS assesses each SNF’s performance on four quality measures during a baseline period and performance period. Table 3 summarizes the baseline and performance period used for the Early Look Report, as well as the official FY 2026 Program year’s baseline and performance period.

The Early Look Report used historical measure data to model performance in the expanded SNF VBP Program. The Early Look Reports do not reflect facilities’ official performance in the SNF VBP Program; CMS will share official performance information for the FY 2026 Program year based on updated measure data at a later date.

Table 3. Quality measure data periods for the Early Look Report and the FY 2026 SNF VBP Program year

Quality measure	Early Look Report		FY 2026 Program year	
	Baseline period	Performance period	Baseline period	Performance period
SNF 30-Day All-Cause Readmission Measure (SNFRM)	FY 2021 (10/01/2020–9/30/2021)	FY 2022 (10/01/2021–9/30/2022)	FY 2022 (10/01/2021–9/30/2022)	FY 2024 (10/01/2023–9/30/2024)
Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI)	FY 2021 (10/01/2020–9/30/2021)	FY 2022 (10/01/2021–9/30/2022)	FY 2022 (10/01/2021–9/30/2022)	FY 2024 (10/01/2023–9/30/2024)
Total Nursing Staff Turnover (Nursing Staff Turnover)	FY 2021 (10/01/2020–9/30/2021)	FY 2022 (10/01/2021–9/30/2022)	FY 2022 (10/01/2021–9/30/2022)	FY 2024 (10/01/2023–9/30/2024)
Total Nursing Hours per Resident Day (Total Nurse Staffing)	FY 2021 (10/01/2020–9/30/2021)	FY 2022 (10/01/2021–9/30/2022)	FY 2022 (10/01/2021–9/30/2022)	FY 2024 (10/01/2023–9/30/2024)

Step 2. Calculate the performance standards. CMS calculates two performance standards for each quality measure in the SNF VBP Program: the achievement threshold and the benchmark.

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

The Early Look Report calculated performance standards using FY 2021 data for each measure.

CMS publishes official performance standards in the SNF PPS final rule before the applicable Program year’s performance period begins. CMS published the official FY 2026 Program year performance standards for each measure, all calculated using FY 2022 data, in the [FY 2024 SNF PPS final rule](#) (page 53300).

Step 3. Determine measure scores. For the SNF VBP Program, CMS calculates achievement, improvement, and measure scores for each quality measure for each SNF. To complete these calculations

for the Early Look Report, CMS used baseline period (FY 2021) measure results and performance period (FY 2022) measure results from Step 1, as well as the performance standards calculated using baseline period (FY 2021) data from Step 2.

- Improvement scores compare a SNF’s measure result in the performance period to that SNF’s own past performance during the baseline period. Improvement scores range from 0 to 9; higher scores are better.
- Achievement scores compare a SNF’s measure result in the performance period to national SNF performance during the baseline period. Achievement scores range from 0 to 10; higher scores are better.
- Measure scores compare a SNF’s improvement and achievement score for each measure; whichever score is higher becomes the measure score. Measure scores range from 0 to 10; higher scores are better.

In the Early Look Report, each SNF received up to four improvement scores, four achievement scores, and four measure scores – one score each for each measure.¹

Step 4. Normalize measure scores and determine performance scores. For the SNF VBP Program, CMS combines each measure score into an overall, single performance score. Performance scores range from 0 to 100; higher scores are better.

To calculate the performance score, CMS normalizes (that is, rescales) each measure score to determine its contribution to the performance score. Normalizing measure scores confirms that all SNFs’ performance scores are on a 100-point scale, regardless of the number of measure scores included in the performance score calculation. CMS then sums the normalized measure scores to calculate the performance score.²

Step 5. Transform performance scores. To translate performance scores into incentive payments, CMS transforms performance scores (which range from 0 to 100) using the logistic exchange function below, where x_i is the SNF’s performance score. Transformed performance scores range from 0 to 1.

¹ To receive a measure score in the Early Look Report, a SNF must (1) provide reportable data to CMS and (2) meet the applicable measure’s case minimum during the performance period. This is known as the case minimum policy. If a SNF does not meet the case minimum for a particular measure during the performance period, that measure is not included in the calculation of a performance score or IPM. [Table 2](#) summarizes the case minimum for each measure.

If a SNF does not meet the case minimum for a particular measure during the baseline period only, the SNF will only be scored on achievement; the SNF will not be scored on improvement, so the SNF’s achievement score will equal their measure score.

² To receive a performance score and IPM in the Early Look Report, for at least two of four measures, a SNF must (1) provide reportable data to CMS and (2) meet the case minimum during the performance period. This is known as the measure minimum policy. SNFs that do not meet the measure minimum are excluded from the SNF VBP Program.

If a SNF does not meet the measure minimum policy in the FY 2026 Program year, payments to these SNFs will not be affected by the SNF VBP Program, and these SNFs will not receive a performance score or IPM for the FY 2026 Program year; instead, they will receive their adjusted federal per diem rate. CMS adopted the measure minimum policy in the [FY 2024 SNF PPS final rule](#) (page 53302).

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

Step 6. Calculate the incentive payment pool for all included SNFs. CMS calculates the incentive payment pool to determine what payments are available for redistribution in the form of incentive payments. The Early Look Report used historical payment data from FY 2021 to estimate the incentive payment pool.

The incentive payment pool for all SNFs is 60 percent of 2 percent of all Medicare FFS Part A payments to SNFs. CMS finalized a 60-percent payback percentage in the [FY 2018 SNF PPS final rule](#) (pages 36619–36621).

Step 7. Calculate the scaling factor. CMS calculates the scaling factor to confirm that the sum of all included SNFs’ incentive payment adjustments equals the incentive payment pool.

Step 8. Determine each SNF’s incentive payment adjustment. CMS calculates each SNF’s incentive payment adjustment by multiplying three numbers: 0.02, the scaling factor from Step 7, and the transformed performance score from Step 5.

Step 9. Calculate each SNF’s IPM. CMS calculated each SNF’s modeled IPM in the Early Look Report so that it simultaneously accounts for the 2-percent withhold and the incentive payment adjustment.

The Early Look Reports do not reflect facilities’ official performance in the SNF VBP Program and the IPMs in the Early Look Reports will not impact facilities’ payments; CMS will share official performance information for the FY 2026 Program year at a later date.

III. Early Look Report File Contents and Descriptions

In this section, we describe the information in your SNF’s Early Look Report, which presents your SNF’s modeled performance in the FY 2026 SNF VBP Program year. The results include a modeled IPM that CMS would apply to your SNF’s adjusted federal per diem rate when payments are made for your SNF’s Medicare FFS Part A claims.

The Early Look Report contains six worksheets:

1. Introduction
2. Overview of Performance
3. Measure Results
4. Measure Scores
5. Performance Score
6. Incentive Payment Multiplier

A. Introduction

The first worksheet in the Early Look Report (Introduction) introduces the newly expanded SNF VBP Program, describes the purpose and contents of the report, and includes contact information and links to additional resources.

B. Overview of Performance

The second worksheet in the Early Look Report (Overview of Performance) includes two tables to summarize the highlights of your SNF’s performance in the SNF VBP Program.

First, it details whether your SNF is included in the SNF VBP Program for the Early Look Report, details your SNF’s modeled IPM, and provides national and state-level comparisons of your SNF’s overall performance.

Second, it details your SNF’s measure results and measure scores for each quality measure and provides national comparisons of your SNF’s performance on each measure.

In Table 4, we describe the elements of the Performance Score worksheet.

Table 4. Highlights of your SNF’s performance (Early Look Report Worksheet 2—Overview of Performance contents)

Table element	Description
Is your SNF included in the SNF VBP Program? (i.e., met measure minimum?)	<p>A Yes/No indicator for whether your SNF satisfied the measure minimum policy requirement.</p> <p>To receive a performance score and IPM in the Early Look Report, for at least two of four measures, a SNF must (1) provide reportable data to CMS and (2) meet the case minimum during the performance period. This is known as the measure minimum policy. SNFs that do not meet the measure minimum are excluded from the SNF VBP Program.</p> <p>The Yes/No indicator here in the second worksheet (Overview of Performance) repeats the indicator from the fifth worksheet (Performance Score) for quick reference.</p>
Your SNF's Incentive Payment Multiplier (IPM)	<p>A multiplier assigned to your SNF based on its performance in the SNF VBP Program. When CMS makes payments for your SNF’s Medicare FFS Part A claims, CMS would multiply the adjusted federal per diem rate by this multiplier.</p> <p>If your SNF did not meet the measure minimum, your SNF will not receive an IPM, and this cell will display receive “measure minimum not met.”</p> <p>The IPM here in the second worksheet (Overview of Performance) repeats the IPM from the sixth worksheet (Incentive Payment Multiplier) for quick reference.</p> <p>Reminder: The Early Look Reports do not reflect facilities’ official performance in the SNF VBP Program, and the IPMs in the Early Look Reports will not impact facilities’ payments; CMS will share official performance information for the FY 2026 Program year at a later date.</p>
Interpretation of Your SNF’s IPM	<p>Text describing how to interpret an IPM’s impact on a SNF’s Medicare FFS Part A payments if it less than one, equal to one, or greater than 1.</p> <p>See Table 8 of this guide for a summary of the three possible interpretations of an IPM.</p> <p>If your SNF did not meet the measure minimum, your SNF will not receive an IPM, and this cell will display “measure minimum not met.”</p>
Your SNF's Program Percent Rank, National	<p>Text describing your SNF’s national percent rank among all eligible, included SNFs nationally. Calculated by sorting and ranking all eligible, included SNFs’ performance scores nationally. Higher percent ranks reflect better performance.</p> <p>Any SNFs with equal performance scores each receive the best (that is, highest) percent rank within the tie.</p> <p>If your SNF did not meet the measure minimum, your SNF will not receive a percent rank, and this cell will display “measure minimum not met.”</p>

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Table element	Description
Your SNF's Program Percent Rank, State	<p>Text describing your SNF's state percent rank among all eligible, included SNFs in your state. Calculated by sorting and ranking all eligible, included SNFs' performance scores in your state. Higher percent ranks reflect better performance.</p> <p>Any SNFs in your state with equal performance scores each receive the best (that is, highest) percent rank within the tie.</p> <p>If your SNF did not meet the measure minimum, your SNF will not receive a percent rank, and this cell will display "measure minimum not met."</p>
Your SNF's Baseline Period Measure Result	<p>Your SNF's measure result during the baseline period (FY 2021) for each quality measure. See Table 2 of this guide for a summary of each measure result.</p> <p>If your SNF did not have any reportable data during the baseline period, your SNF will not receive a measure result, and this cell will display "no reportable data."</p> <p>The measure results here in the second worksheet (Overview of Performance) repeat the measure results from the third worksheet (Measure Results) for quick reference.</p>
Your SNF's Performance Period Measure Result	<p>Your SNF's measure result during the performance period (FY 2022) for each quality measure. See Table 2 of this guide for a summary of each measure result.</p> <p>If your SNF did not have any reportable data during the performance period, your SNF will not receive a measure result, and this cell will display "no reportable data."</p> <p>The measure results here in the second worksheet (Overview of Performance) repeat the measure results from the third worksheet (Measure Results) for quick reference.</p>
Compared to the Baseline Period, Your SNF's Performance Period Measure Result is...	<p>A better/worse/same indicator for whether your SNF's measure performance in the performance period (FY 2022) has improved ("better"), declined ("worse"), or stayed the same ("same") compared to your SNF's measure performance in the baseline period (FY 2021) for each quality measure.</p> <p>If your SNF did not have any reportable data during the baseline period or performance period, your SNF will not receive a comparison indicator, and this cell will display "not available."</p>
Your SNF's Measure Score (0 – 10; higher is better)	<p>The higher of your SNF's achievement score and improvement score for each quality measure. Scores range from 0 to 10, with higher scores indicating better performance.</p> <p>To receive a measure score in the Early Look Report, a SNF must (1) provide reportable data to CMS and (2) meet the applicable measure's case minimum during the performance period. This is known as the case minimum policy. If a SNF does not meet the case minimum for a particular measure during the performance period, this cell will display "not enough data," and that measure is not included in the calculation of a performance score or IPM.</p> <p>The measure scores here in the second worksheet (Overview of Performance) repeat the measure scores from the fourth worksheet (Measure Scores) for quick reference.</p>
Your SNF's Measure Score is...	<p>Text describing your SNF's measure performance relative to all eligible, included SNFs nationally for each quality measure. Calculated by sorting and ranking all eligible, included SNFs' measure results nationally. Higher percent ranks reflect better measure performance.</p> <p>Any SNFs with equal measure results each receive the best (that is, highest) percent rank within the tie.</p> <p>If your SNF did not receive a measure score for the respective measure, your SNF will not receive a percent rank, and this cell will display "not available."</p>

C. Measure Results

The third worksheet in the Early Look Report (Measure Results) provides your SNF's baseline period and performance period measure results for each quality measure and information to assist interpretation of your SNF's measure results. It also details whether your SNF met the case minimum policy for each

measure. SNFs that do not meet the case minimum policy for a particular measure will receive a measure result but will not receive a measure score for that measure.

In Table 5, we describe the elements of the Measure Results worksheet.

Table 5. Your SNF’s measure result calculations (Early Look Report Worksheet 3—Measure Results contents)

Table element	Description
Your SNF's Baseline Period Case Count	<p>Your SNF’s count of cases within the baseline period (FY 2021) for each quality measure. The unit displayed is specific to each measure. The count for the Total Nurse Staffing measure is rounded to the nearest whole number.</p> <p>If your SNF did not have any reportable data during the baseline period, this cell will display “no reportable data.”</p>
Met Case Minimum Requirement During Baseline Period?	<p>A Yes/No indicator for whether your SNF satisfied the case minimum requirement during the baseline period (FY 2021) for each quality measure.</p> <p>The case minimum is the minimum number of cases needed to reliably calculate each quality measure:</p> <ul style="list-style-type: none"> • 25 eligible stays for the SNFRM • 25 eligible stays for the SNF HAI measure • 5 eligible staff and 1 eligible stay for the Nursing Staff Turnover measure (the measure is considered to have at least one eligible stay if the SNF’s average daily census, based on the Minimum Data Set, is non-zero) • 25 average residents per day for the Total Nurse Staffing measure; meeting the case minimum for this measure is determined by the unrounded average residents per day <p>To receive an improvement score in the Early Look Report, your SNF must provide reportable data to CMS and meet the case minimum requirement during the baseline period (FY 2021) for that measure.</p>
Your SNF's Performance Period Case Count	<p>Your SNF’s count of cases within the performance period (FY 2022) for each quality measure. The unit displayed is specific to each measure. The count for the Total Nurse Staffing measure is rounded to the nearest whole number.</p> <p>If your SNF did not have any reportable data during the performance period, this cell will display “no reportable data.”</p>
Met Case Minimum Requirement During Performance Period?	<p>A Yes/No indicator for whether your SNF satisfied the case minimum requirement during the performance period (FY 2022) for each quality measure.</p> <p>The case minimum is the minimum number of cases needed to reliably calculate each quality measure:</p> <ul style="list-style-type: none"> • 25 eligible stays for the SNFRM • 25 eligible stays for the SNF HAI measure • 5 eligible staff and 1 eligible stay for the Nursing Staff Turnover measure (the measure is considered to have at least one eligible stay if the SNF’s average daily census, based on the Minimum Data Set, is non-zero) • 25 average residents per day for the Total Nurse Staffing measure; meeting the case minimum for this measure is determined by the unrounded average residents per day <p>To receive an achievement score and measure score in the Early Look Report, and to be included in the calculation of a performance score and IPM, your SNF must provide reportable data to CMS and meet the case minimum requirement during the performance period (FY 2022) for that measure.</p>

Table element	Description
Measure Result Interpretation	<p>An up/down arrow indicator for whether higher or lower measure results indicate better performance for each quality measure. For all SNFs, the following indicators are displayed for each measure:</p> <ul style="list-style-type: none"> • “A higher (↑) result indicates better performance” is applicable to the Total Nurse Staffing measure • “A lower (↓) result indicates better performance” is applicable to the SNFRM, the SNF HAI measure, and the Nursing Staff Turnover measure
Your SNF's Baseline Period Measure Result	<p>Your SNF's measure result during the baseline period (FY 2021) for each quality measure. See Table 2 of this guide for a summary of each measure result.</p> <p>A measure result is provided in the Early Look Report even if your SNF did not meet the case minimum requirement for that measure. The measure result is provided to inform of your SNF's historical measure performance. However, such a measure result is not used to calculate measure scores, performance scores, or IPMs.</p> <p>If your SNF did not have any reportable data during the baseline period, your SNF will not receive a measure result, this cell will display “no reportable data.”</p>
Your SNF's Performance Period Measure Result	<p>Your SNF's measure result during the performance period (FY 2022) for each quality measure. See Table 2 of this guide for a summary of each measure result.</p> <p>A measure result is provided in the Early Look Report even if your SNF did not meet the case minimum requirement for that measure. The measure result is provided to inform of your SNF's historical measure performance. However, such a measure result is not used to calculate measure scores, performance scores, or IPMs.</p> <p>If your SNF did not have any reportable data during the performance period, your SNF will not receive a measure result, and this cell will display “no reportable data.”</p>

D. Measure Scores

The fourth worksheet in the Early Look Report (Measure Scores) provides your SNF's achievement score, improvement score, and measure score for each quality measure. In Table 6, we describe the elements of the Measure Scores worksheet.

Table 6. Your SNF's measure score calculations (Early Look Report Worksheet 4—Measure Scores contents)

Table element	Description
Your SNF's Baseline Period Measure Result	<p>Your SNF's measure result during the baseline period (FY 2021) for each quality measure. See Table 2 of this guide for a summary of each measure result.</p> <p>If your SNF did not have any reportable data during the baseline period, your SNF will not receive a measure result, and this cell will display “no reportable data.”</p> <p>The measure results here in the fourth worksheet (Measure Scores) repeat the measure results from the third worksheet (Measure Results) for quick reference.</p>
Your SNF's Performance Period Measure Result	<p>Your SNF's measure result during the performance period (FY 2022) for each quality measure. See Table 2 of this guide for a summary of each measure result.</p> <p>If your SNF did not have any reportable data during the performance period, your SNF will not receive a measure result, and this cell will display “no reportable data.”</p> <p>The measure results here in the fourth worksheet (Measure Scores) repeat the measure results from the third worksheet (Measure Results) for quick reference.</p>

Table element	Description
Your SNF's Achievement Score (0 - 10; higher is better)	<p>A calculation of how well your SNF performed during the performance period (FY 2022) compared with national SNF performance during the baseline period (FY 2021) for each quality measure. Scores range from 0 to 10, with higher scores indicating better performance.</p> <p>To receive an achievement score in the Early Look Report, a SNF must provide reportable data to CMS and meet the applicable measure's case minimum during the performance period. If a SNF does not meet these criteria for a particular measure during the performance period, this cell will display "not enough data."</p>
Your SNF's Improvement Score (0 - 9; higher is better)	<p>A calculation of how much your SNF improved from the baseline period (FY 2021) to the performance period (FY 2022) for each quality measure. Scores range from 0 to 9, with higher scores indicating better performance.</p> <p>To receive an improvement score in the Early Look Report, a SNF must provide reportable data to CMS and meet the applicable measure's case minimum during the baseline period <i>and</i> performance period. If a SNF does not meet these criteria for a particular measure during the baseline period <i>or</i> performance period, this cell will display "not enough data."</p>
Your SNF's Measure Score (0 - 10; higher is better)	<p>The higher of your SNF's achievement score and improvement score for each quality measure. Scores range from 0 to 10, with higher scores indicating better performance.</p> <p>To receive a measure score in the Early Look Report, a SNF must (1) provide reportable data to CMS and (2) meet the applicable measure's case minimum during the performance period. This is known as the case minimum policy. If a SNF does not meet the case minimum for a particular measure during the performance period, this cell will display "not enough data," and that measure is not included in the calculation of a performance score or IPM.</p>

E. Performance Score

The fifth worksheet in the Early Look Report (Performance Score) includes three tables to summarize your SNF's overall performance across all four quality measures.

First, it details whether your SNF met the measure minimum policy requirement. SNFs that do not meet the measure minimum are excluded from the SNF VBP Program.³

Second, it details each measure score's contribution to the overall performance score and sums those contributions to calculate your SNF's performance score.

Third, it sorts all SNFs' performance scores to calculate your SNF's national rank in the SNF VBP Program among eligible, included SNFs.

In Table 7, we describe the elements of the Performance Score worksheet.

³ The same measure minimum policy will be applied to the FY 2026 Program year. If a SNF does not meet the measure minimum policy in the FY 2026 Program year, payments to these SNFs will not be affected by the SNF VBP Program, and these SNFs will not receive a performance score or IPM for the FY 2026 Program year; instead, they will receive their adjusted federal per diem rate. CMS adopted the measure minimum policy in the [FY 2024 SNF PPS final rule](#) (page 53302).

Table 7. Your SNF’s performance score calculations (Early Look Report Worksheet 5—Performance Score contents)

Table element	Description
Number of Measures Required for SNF VBP Program Eligibility [a]	For all SNFs, this cell displays “2 of 4.” To receive a performance score and IPM in the Early Look Report, for at least two of four measures, a SNF must (1) provide reportable data to CMS and (2) meet the case minimum during the performance period. This is known as the measure minimum policy, and this cell states the measure minimum policy requirement for the Early Look Report. The same measure minimum policy will be applied to the FY 2026 Program year.
Your SNF's Number of Measures Receiving a Measure Score	Your SNF’s number of quality measures where your SNF (1) provided reportable data to CMS, (2) met the case minimum during the performance period, and thus (3) received a measure score. Possible values include: “0 of 4,” “1 of 4,” “2 of 4,” “3 of 4,” and “4 of 4.”
Measure Minimum Met?	A Yes/No indicator for whether your SNF satisfied the measure minimum policy requirement. To receive a performance score and IPM in the Early Look Report, your SNF must satisfy the measure minimum policy requirement (described above).
Your SNF’s Measure Score (0 – 10; higher is better)	The higher of your SNF’s achievement score and improvement score for each quality measure. Scores range from 0 to 10, with higher scores indicating better performance. To receive a measure score in the Early Look Report, a SNF must (1) provide reportable data to CMS and (2) meet the applicable measure’s case minimum during the performance period. This is known as the case minimum policy. If a SNF does not meet the case minimum for a particular measure during the performance period, this cell will display “not enough data,” and that measure is not included in the calculation of a performance score or IPM. The measure scores here in the fifth worksheet (Performance Score) repeat the measure scores from the fourth worksheet (Measure Scores) for quick reference.
Maximum Possible Score	Your SNF’s maximum possible measure score for each quality measure. For all four measures, the maximum is “10.00000.” However, this column will display “0.00000” if your SNF did not receive a measure score for the respective measure. The maximum possible measure scores for each quality measure are summed to create the denominator for the normalization equation (described below).
Contribution to Performance Score	The contribution to the performance score for each quality measure. These values are also known as normalized measure scores. This column will display “not enough data” if your SNF did not receive a measure score for the respective measure. Measure scores are normalized (that is, rescaled) so that all SNFs’ performance scores are on a 100-point scale, regardless of the number of measures included in a SNF’s performance score calculation. Each measure score is normalized by dividing your SNF’s measure score by the sum of the Maximum Possible Score column, and multiplying by 100. The normalized measure scores for each quality measure are summed to create your SNF’s performance score.
Your SNF’s Performance Score (0 – 100; higher is better)	A calculation of your SNF’s overall performance across all quality measures included in the SNF VBP Program. Scores range from 0 to 100, with higher scores indicating better performance. Equal to the sum of your SNF’s normalized measure scores. If your SNF did not meet the measure minimum, your SNF will not receive a performance score, and this cell will display “measure minimum not met.”

Table element	Description
Your SNF's Program National Rank (out of 13,720 SNFs)	Your SNF's national rank among eligible, included SNFs in the SNF VBP Program. Calculated by sorting and ranking all eligible, included SNFs' performance scores. Lower ranks reflect better performance. Any SNFs with equal performance scores each receive the best (that is, lowest) rank within the tie. If your SNF did not meet the measure minimum, your SNF will not receive a national rank, and this cell will display "measure minimum not met."

F. Incentive Payment Multiplier

The sixth worksheet in the Early Look Report (Incentive Payment Multiplier) repeats your SNF's performance score for quick reference and provides your SNF's modeled IPM.

To receive a performance score and IPM in the Early Look Report, for at least two of four measures, a SNF must (1) provide reportable data to CMS and (2) meet the case minimum during the performance period. This is known as the measure minimum policy. If your SNF did not meet the measure minimum policy requirement, your SNF will not receive a performance score or IPM, and this worksheet will display receive "measure minimum not met."

In Table 8, we describe how to interpret an IPM's impact on a SNF's Medicare FFS Part A payments. When CMS makes payments for a SNF's Medicare FFS Part A claims in the applicable Program year, CMS would multiply the adjusted federal per diem rate by the SNF's IPM. **However, the IPMs in the Early Look Reports will not impact facilities' payments; CMS will share official performance information for the FY 2026 Program year at a later date.**

Table 8. 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 would receive less than the 2-percent withhold. That is, your SNF would earn less than it would have in the absence of the SNF VBP Program in the applicable Program year.
IPM = 1	Your SNF's IPM is net neutral, meaning your SNF would receive the 2-percent withhold. That is, your SNF would earn the same amount it would have in the absence of the SNF VBP Program in the applicable Program year.
IPM > 1	Your SNF's IPM is net positive, meaning your SNF would receive more than the 2-percent withhold. That is, your SNF would earn more than it would have in the absence of the SNF VBP Program in the applicable Program year.

IV. Contacts and Additional Resources

More information regarding the Early Look Report, including a summary fact sheet and an infographic detailing the methodology used to calculate your SNF's results, is available on the [SNF VBP Program webpage on CMS.gov](#).

For help obtaining access to your SNF's Early Look Report in iQIES, contact the QIES/iQIES Service Center by phone at (800) 339-9313 or by email at iQIES@cms.hhs.gov.

General information regarding the SNF VBP Program, including recent announcements, the quarterly confidential feedback reports, public reporting efforts, and more, is also available on the [SNF VBP Program webpage on CMS.gov](#).

For any additional questions about the SNF VBP Program, email the SNF VBP Program Help Desk at SNFVBP@rti.org.