



Overview of SNF VBP Program Finalized Policies from the FY 2024 SNF PPS Final Rule

**Hosted by:
Outpatient Quality Program Systems and
Stakeholder Support Team**

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Speaker

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Moderator

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Purpose

This event will provide an overview of the major finalized provisions in the fiscal year (FY) 2024 SNF Prospective Payment System (PPS) final rule for the SNF VBP Program.

Objectives

Participants will be able to:

- Locate the FY 2024 SNF PPS final rule text.
- Identify finalized changes for the SNF VBP Program within the FY 2024 SNF PPS Final Rule.

Acronyms

CCSQ	Center for Clinical Standards and Quality	PAC	post-acute care
CMS	Centers for Medicare & Medicaid Services	PAMA	Protecting Access to Medicare Act
DC	discharge	PBJ	Payroll Based Journal
DCPAC	Division of Chronic and Post Acute Care	PPR	Potentially Preventable Readmission
DES	dual eligibility status	PPS	prospective payment system
DTC	Discharge to Community	QMVIG	Quality Measurement and Value-Based Incentives Group
FFS	Fee for Service	QRP	Quality Reporting Program
FY	fiscal year	RSRR	Risk-Standardized Readmission Rate
HAI	healthcare-associated infection	SNF	skilled nursing facility
HEA	Health Equity Adjustment	SNFRM	Skilled-Nursing Facility 30-Day All-Cause Readmission Measure
LGBTQI+	lesbian, gay, bisexual, transgender, queer, and intersex	VBP	value-based purchasing
MDS	Minimum Data Set	WS	within-stay

Chris Palmer, SNF VBP Program Coordinator
DCPAC, QMVG, CCSQ, CMS

SNF VBP Program Overview

Program Origin

- Section 215 of the Protecting Access to Medicare Act of 2014 (PAMA) added sections 1888(g) and (h) to the Social Security Act, which required the Secretary to establish a SNF VBP Program.
- The program awarded incentive payments to SNFs for quality of care provided to Medicare beneficiaries, measured by the SNF 30-Day All-Cause Readmission Measure (SNFRM).
- The SNF VBP Program began awarding incentive payments in FY 2019.

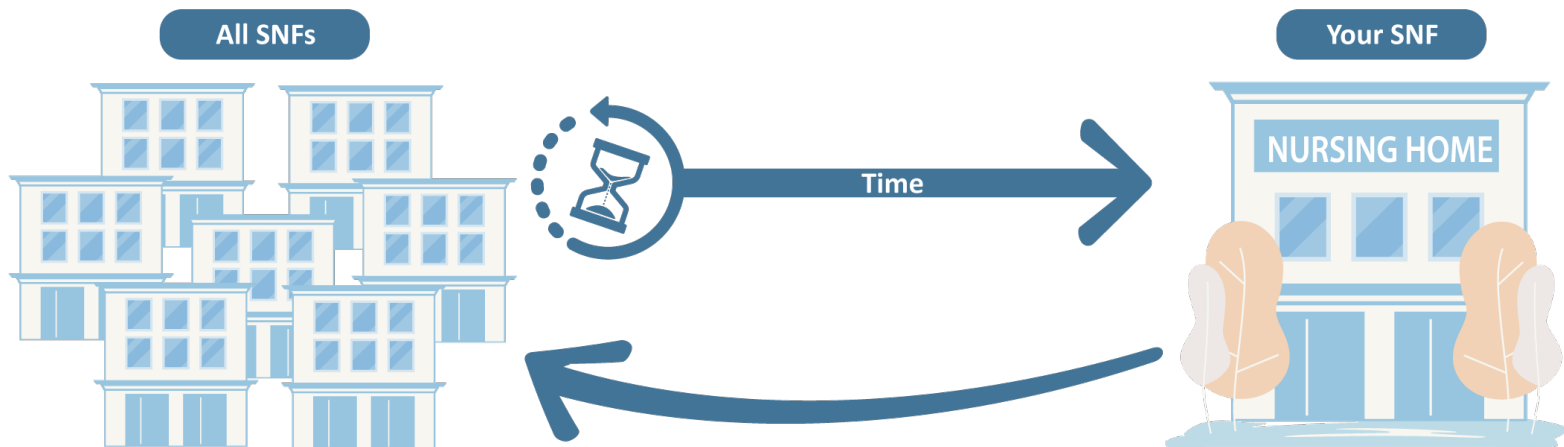
Program Framework and Eligibility

- PAMA specifies that, under the SNF VBP Program, SNFs:
 - Are evaluated by their performance on a hospital readmission measure.
 - Are scored on both improvement and achievement.
 - Receive quarterly confidential feedback reports containing information about their performance.
 - Earn incentive payments based on their performance.
- All SNFs paid under Medicare's SNF PPS are included in the SNF VBP Program

Achievement Score

Achievement Score: Points are awarded by comparing the facility's rate during the performance period with the performance of all SNF facilities nationally during the baseline period through the performance standards.

- 0 points: Rate worse than achievement threshold
- 0–100 points: Rate equal to or better than achievement threshold, but worse than benchmark (use achievement formula)
- 100 points: Rate better or equal to benchmark

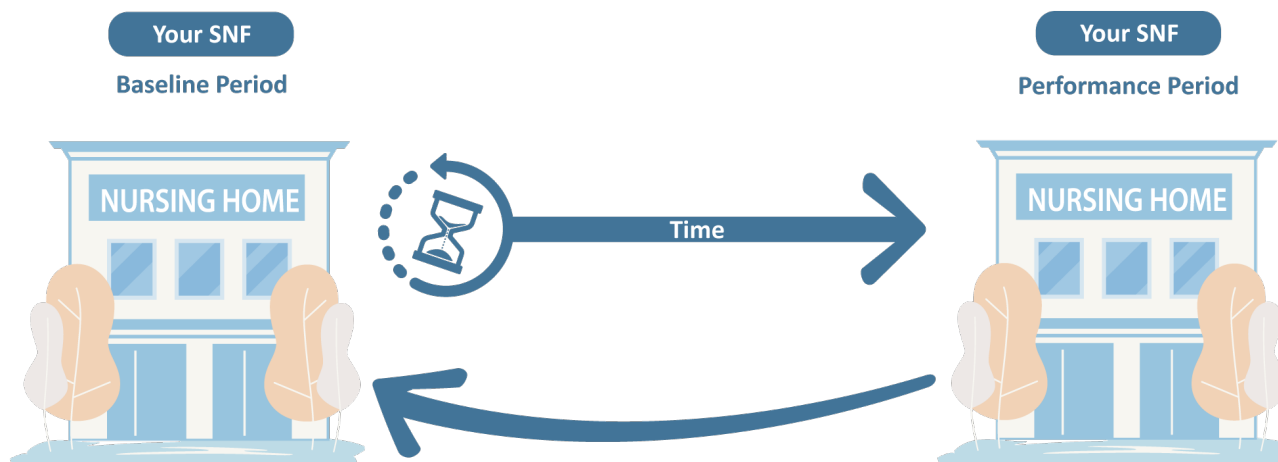


Improvement Score

Improvement Score: Points are awarded by comparing the facility's rate during the performance period with **its own previous performance** during the baseline period.

- 0 points: Rate worse than own baseline period RSSR
- 0–90 points: Rate better than own baseline period rate, but worse than the benchmark (use improvement formula)
- 90 points: Rate better than own baseline period rate and better than the benchmark

Note: SNFs with fewer than 25 eligible stays during the baseline period will not receive an improvement score and will be scored on achievement only.



SNF Performance Score

- The greater of a SNF's achievement and improvement scores becomes the SNF Performance Score.
- The maximum SNF Performance Score is 100 points.



Incentive Payment Multiplier

Each SNF's performance score is transformed into an incentive payment multiplier using a logistic (or S-shaped) exchange function, which is used to calculate the SNF's incentive payment that is included on each Medicare claim.

Creating the Incentive Pool

This uses all SNF Part A Fee for Service (FFS) Medicare payments.



CMS withholds 2% of these payments ("withhold").



CMS redistributes 60% of withhold to SNFs as incentive payments.

Incentive Payment Multiplier

Multiplier > 1

Net Positive

SNF would earn more than their 2% withhold back



The SNF earns more than they would have absent of the SNF VBP Program.

Multiplier = 1

Net Neutral

SNF earns the full 2% withhold



The SNF earns the same payment they would have received in the absence of the SNF VBP Program.

Multiplier < 1

Net Negative

SNF received less than the 2% withhold back



The SNF receives less than they would have absent of the SNF VBP Program.

SNF VBP Program Measures Added by the FY 2023 SNF PPS Final Rule

In the FY 2023 SNF PPS final rule, CMS finalized the addition of three new measures to the Program.

- Two measures begin with the FY 2026 SNF VBP Program Year:
 - Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI) measure
 - Total Nursing Hours per Resident Day Staffing (Total Nurse Staffing) measure
- One measure begins with the FY 2027 SNF VBP Program Year:
 - Discharge to Community—Post-Acute Care Measure for Skilled Nursing Facilities (DTC PAC SNF) measure

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SNF VBP Program Major Policies Overview

SNF VBP Program

Major Finalized Policies Overview

On August 7, 2023, CMS published the FY 2024 SNF PPS final rule. It updated policies for the SNF VBP Program and is available on the *Federal Register*, pages 53276–53326:

<https://www.federalregister.gov/documents/2023/08/07/2023-16249/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities>

SNF VBP Program

Major Finalized Policies Overview

In the FY 2024 SNF PPS Final Rule, CMS finalized the following:

- Adoption of four new quality measures
- Replacement of one quality measure
- Case minimum and measure minimum policies
- Application of the SNF VBP scoring methodology to proposed measures
- Incorporation of a Health Equity Adjustment (HEA)
- Updated validation processes

Adoption of Four New Quality Measures

1. Total Nursing Staff Turnover

- Nursing Staff Turnover
- FY 2026 Program Year (Performance Period FY 2024)

2. Percent of Residents Experiencing One or More Falls With Major Injury (Long-Stay)

- Falls with Major Injury (Long Stay)
- FY 2027 Program Year (Performance Period FY 2025)

3. Discharge Function Score for SNFs

- DC Function
- FY 2027 Program Year (Performance Period FY 2025)

4. Number of Hospitalization per 1,000 Long Stay Resident Days

- Long Stay Hospitalization
- FY 2027 Program Year (Performance Period FY 2025)

Adoption of Nursing Staff Turnover Beginning With FY 2026 Program Year

- Nursing home staffing, including nursing staff turnover, has long been considered an important indicator of nursing home quality.
- There is considerable evidence demonstrating the impact of nursing staff turnover on resident outcomes, with higher turnover associated with poorer quality of care.
- The measure is calculated using auditable, electronic staffing data submitted by each SNF for each quarter through the Payroll Based Journal (PBJ) system.

Nursing Staff Turnover Measure Rate Calculation

We will calculate the Nursing Staff Turnover measure rate for the SNF VBP Program using the following formula:

$$\textit{Total Nursing Staff Turnover Rate} = \frac{\textit{Total number of employment spells that ended in turnover}}{\textit{Total number of eligible employment spells}}$$

Adoption of Falls with Major Injury (Long Stay) Beginning With FY 2027 Program Year

- In 2016, nearly 30,000 U.S. residents aged 65 years and older died as the result of a fall. This represents a greater than 30 percent increase in fall-related deaths from 2007.
- Fall-related emergency department visits are estimated at approximately 3 million per year.

Adoption of Falls with Major Injury (Long Stay) Beginning With FY 2027 Program Year

- The Falls with Major Injury (Long Stay) measure is an outcome measure that reports the percentage of long-stay residents in a nursing home who have experienced one or more falls with major injury using 1 year of data from the Minimum Data Set (MDS) 3.0.
- Major injuries include bone fractures, joint dislocations, closed head injuries with altered consciousness and subdural hematomas.

Adoption of the DC Function Beginning With the FY 2027 Program Year

- Impaired functional capacity is associated with poorer quality of life and an increased risk of all-cause mortality, postoperative complications, and cognitive impairment
- The DC Function measure is an outcome measure that estimates the percentage of SNF residents who meet or exceed an expected discharge score during the reporting period.
- The expected discharge function score is computed by risk adjusting the observed discharge function score for each SNF stay from the MDS.
- This measure is also adopted for the SNF Quality Reporting Program.

Adoption of Long Stay Hospitalization Beginning with FY 2027 Program Year

- Facilities with lower hospitalization rates tend to perform better on other dimensions of quality such as health inspection survey results, staffing level, other quality measures, and overall ratings.
- This measure is calculated using Medicare FFS claims data. We use the inpatient hospital claims data to determine the hospital admission, outpatient hospital claims data to determine the outpatient observation stay, and items from the Minimum Data Set for building resident stays and for risk-adjustment.
- CMS believes that including long-stay measures in the SNF VBP Program is appropriate because it would better capture the quality of care provided to the entirety of the population.

Performance Periods and Baseline Periods

Measure	First SNF VBP Program Year	First Performance Period	First Baseline Period
Nursing Staff Turnover	FY 2026	FY 2024 (October 1, 2023– September 30, 2024)	FY 2022 (October 1, 2021– September 30, 2022)
Falls with Major Injury (Long-Stay)	FY 2027	FY 2025 (October 1, 2024– September 30, 2025)	FY 2023 (October 1, 2022– September 30, 2023)
DC Function	FY 2027	FY 2025 (October 1, 2024– September 30, 2025)	FY 2023 (October 1, 2022– September 30, 2023)
Long Stay Hospitalization	FY 2027	FY 2025 (October 1, 2024– September 30, 2025)	FY 2023 (October 1, 2022– September 30, 2023)

Current and Newly Adopted SNF VBP Program Measures

Measure Name	Short Name	First Program Year	First Performance Period
SNF 30-Day All-Cause Readmission* *SNF Within-Stay (WS) Potentially Preventable Readmissions (PPR) replaces this beginning FY 2028.	SNFRM	FY 2019	CY 2017
SNF Healthcare-Associated Infections Requiring Hospitalization	SNF HAI	FY 2026	FY 2024
Total Nurse Staffing Hours per Resident Day	Total Nurse Staffing	FY 2026	FY 2024
Total Nursing Staff Turnover	Nursing Staff Turnover	FY 2026	FY 2024
Discharge to Community-Post-Acute Care Measure for SNFs	DTC PAC SNF	FY 2027	FY 2024 and FY 2025
Percent of Residents Experiencing One or More Falls with Major Injury (Long-Stay)	Falls with Major Injury (Long-Stay)	FY 2027	FY 2025
Discharge Function Score for SNFs	DC Function	FY 2027	FY 2025
Number of Hospitalizations per 1,000 Long Stay Resident Days	Long Stay Hospitalization	FY 2027	FY 2025
SNF Within-Stay Potentially Preventable Readmissions	SNF WS PPR	FY 2028	FY 2025 and FY 2026

Replacement of the SNFRM with the SNF WS PPR Measure

The SNF WS PPR measure:

- Estimates the risk-standardized rate of unplanned PPR that occur during SNF stays among Medicare FFS beneficiaries.
- Focuses on potentially preventable and unplanned readmissions.
- Does not count planned readmissions in the numerator.
- Is risk adjusted to control for risk factor differences across SNF residents and SNF facilities.
- Is calculated entirely using administrative data. It will not impose any additional data collection or submission burden for SNFs.

Performance and Baseline Periods for SNF WS PPR Measure Beginning With FY 2028 Program Year

Measure	First SNF VBP Program Year	First Performance Period	First Baseline Period
SNF WS PPR	FY 2028	FY 2025 and FY 2026 (October 1, 2024– September 30, 2026)	FY 2022 and FY 2023 (October 1, 2021– September 30, 2023)

SNFRM and SNF WS PPR Performance and Baseline Period Considerations

Measure	Last SNF VBP Program Year	Last Performance Period	Last Baseline Period
SNFRM	FY 2027	FY 2025 (October 1, 2024– September 30, 2025)	FY 2023 (October 1, 2022– September 30, 2023)

Measure	First SNF VBP Program Year	First Performance Period	First Baseline Period
SNF WS PPR	FY 2028	FY 2025 and FY 2026 (October 1, 2024– September 30, 2026)	FY 2022 and FY 2023 (October 1, 2021– September 30, 2023)

- The SNF WS PPR measure is a 2-year measure. The SNFRM is a 1-year measure.
- The data used to calculate the baseline and performance period for the SNF WS PPR measure for the FY 2028 program year will include data that are also used to calculate the baseline and performance period for the SNFRM for the FY 2027 program year.

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Performance Standards

Final Performance Standards for the FY 2026 Program Year

TABLE 17—FINAL FY 2026 SNF VBP PROGRAM PERFORMANCE STANDARDS

Measure short name	Achievement threshold	Benchmark
SNFRM	0.78800	0.82971
SNF HAI Measure	0.92315	0.95004
Total Nurse Staffing Measure	3.18523	5.70680
Nursing Staff Turnover Measure	0.35912	0.72343

Final Performance Standards for the DTC PAC SNF Measure for FY 2027 Program Year

TABLE 18—FINAL FY 2027 SNF VBP PROGRAM PERFORMANCE STANDARDS FOR THE DTC PAC SNF MEASURE

Measure short name	Achievement threshold	Benchmark
DTC PAC SNF Measure	0.42946	0.66370

Performance Scoring Methodology Case Minimum and Measure Minimum Policies

- The rule finalized the following:
 - The Nursing Staff Turnover measure to begin with the FY 2026 program year.
 - The Falls with Major Injury (Long-Stay), DC Function, and Long Stay Hospitalization measures to begin with the FY 2027 program year.
 - The SNF WS PPR measure to begin with the FY 2028 program year.
- We adopted case minimums for the new measures and updated the previously finalized measure minimum for the FY 2027 program year.

Finalized Case Minimums During a Performance Period

- **Nursing Staff Turnover Measure:** SNFs must have a minimum of 1 eligible stay during the 1-year performance period and at least 5 eligible nursing staff (Registered Nurses, Licensed Practical Nurses, and nurse aides) during the 3 quarters of PBJ data included in the measure denominator. SNFs must meet both of these requirements in order to be eligible to receive a score on the measure.
- **Falls with Major Injury (Long Stay) Measure:** SNFs must have a minimum of 20 residents in the measure denominator during the 1-year performance period.
- **Long Stay Hospitalization Measure:** SNFs must have a minimum of 20 eligible stays during the 1-year performance period.
- **DC Function Measure:** SNFs must have a minimum of 20 eligible stays during the 1-year performance period.
- **SNF WS PPR Measure:** SNFs must have a minimum of 25 eligible stays during the 2-year performance period.

FY 2026 Measure Minimum

- In the FY 2023 SNF PPS final rule, we finalized the measure minimum for the FY 2026 program year:
 - SNFs must report the minimum number of cases for two of the three measures during the applicable performance period to receive a SNF Performance Score and value-based incentive payment.
- Although finalizing the Nursing Staff Turnover measure beginning with the FY 2026 program year will increase the total number of measures applicable in FY 2026 to four, we believe that our previously finalized minimum of two measures for FY 2026 remains sufficient.

Updates to the FY 2027 Measure Minimum

- The FY 2027 SNF VBP measure set will consist of a total of eight measures.
- For the FY 2027 program year, SNFs must report the minimum number of cases for four of the eight measures during the performance period to receive a SNF Performance Score and value-based incentive payment.
- SNFs that do not meet these minimum requirements would be excluded from the FY 2027 program.

FY 2026 Performance Scoring with the Addition of Nursing Staff Turnover Measure

We finalized the proposal to apply our previously finalized scoring methodology to the proposed Nursing Staff Turnover measure.

- Award up to 10 points based on achievement, and up to nine points based on improvement.
- Add the score for each of the four measures for which the SNF met the case minimum to get the raw point total.
 - The maximum raw point total for the FY 2026 program year would be 40 points.
- Normalize each SNF's raw point total, based on the number of measures for which that SNF met the case minimum, to get a SNF Performance Score that is on a 100-point scale using our previously finalized normalization policy.

FY 2027 Performance Scoring With the Addition of the New Measures

- With the adoption of Falls with Major Injury (Long-Stay), DC Function, and Long Stay Hospitalization measures, the FY 2027 program year measure set will include eight measures.
- The current scoring methodology will be applied to all measures.
- We will award up to 10 points based on achievement and up to nine points based on improvement for each measure.
- The maximum raw point total for the FY 2027 program year would be 80 points.
- We will normalize each SNF's raw point total, based on the number of measures for which that SNF met the case minimum.

Incorporation of Health Equity Into the SNF VBP Program Scoring Methodology Beginning with the FY 2027 Program Year

- Advancing health equity is a key pillar of CMS' strategic vision, and we are working to advance health equity by designing, implementing, and operationalizing policies and programs aimed at identifying and reducing health disparities.
- Prioritizing the achievement of health equity is essential in the SNF VBP Program because disparities in SNFs appear to be widespread, from admissions, to quality of care, to nurse staffing and turnover.
- We finalized our proposal to adopt a scoring methodology change to reward excellent care for vulnerable populations by SNF providers in the SNF VBP Program. Specifically, we finalized awarding bonus points to high performing SNFs with higher proportions of residents with dual eligibility status (DES) through the Health Equity Adjustment.

Dual Eligibility Status

Individuals with dual eligibility status (DES) are more likely to:

- Have disabilities or functional impairments.
- Be medically complex.
- Have greater social needs.
- Have a greater risk of negative health outcomes.
- Be admitted to SNFs that have lower staffing levels, have a higher share of residents who are enrolled in Medicaid in their total resident population, and experience resource constraints.

Incorporation of Health Equity Into the SNF VBP Program Scoring Methodology Beginning with the FY 2027 Program Year

- The goal of the Health Equity Adjustment (HEA) is to not only appropriately measure performance by rewarding SNFs that overcome the challenges of caring for higher proportions of SNF residents with DES but also to incentivize those who have not achieved such high-quality care to work towards improvement.
- HEA is adopted beginning with the FY 2027 program year.
- We finalized our proposal to define the term “underserved population” as residents with DES for purposes of this HEA.

HEA Bonus Point Calculation: Assigned Points and Measure Performance Scaler

- Each measure will be assessed independently; a SNF performing in the top tier for one measure will be assigned 2 points for that measure even if they are not a top-tier performing SNF for any other measure.
- A top-tier performing SNF has a performance for the program year that is in the top third (greater than or equal to the 66.67th percentile) of the performance of all SNFs on the measure for the same program year.
- We will assign a **Measure Performance Scaler** for each SNF that will be equal to the total number of assigned points that the SNF earns on all measures as a result of its performance for a maximum of 16 points, for the 8 measures currently finalized in the Program.

Calculation of HEA Bonus Points

Step 1: Calculate Performance Scaler Points for each SNF.

TABLE 19—EXAMPLE OF THE MEASURE PERFORMANCE SCALER ASSIGNED TO SNFS BASED ON PERFORMANCE BY MEASURE

Measure	Example SNF 1		Example SNF 2		Example SNF 3		Example SNF 4	
	Performance group	Value	Performance group	Value	Performance group	Value	Performance group	Value
SNFRM*	Top third	2	Top Third	2	Top Third	2	Bottom Two-Thirds	0
SNF HAI Measure	Top third	2	Top Third	2	Top Third	2	Bottom Two-Thirds	0
Total Nurse Staffing Measure.	Top third	2	Bottom Two-Thirds	0	Bottom Two-Thirds	0	Top Third	2
DTC-PAC SNF Measure.	Top third	2	Top Third	2	Bottom Two-Thirds	0	Bottom Two-Thirds	0
Falls with Major Injury (Long-Stay) Measure**.	Top Third	2	Top Third	2	Bottom Two-Thirds	0	Bottom Two-Thirds	0
DC Function Measure**	Top Third	2	Top Third	2	Top Third	2	Bottom Two-Thirds	0
Long Stay Hospitalization Measure**.	Top Third	2	Top Third	2	Top Third	2	Bottom Two-Thirds	0
Nursing Staff Turnover Measure**.	Top Third	2	Top Third	2	Top Third	2	Bottom Two-Thirds	0
	Measure Performance Scaler.	16	Measure Performance Scaler.	14	Measure Performance Scaler.	10	Measure Performance Scaler.	2

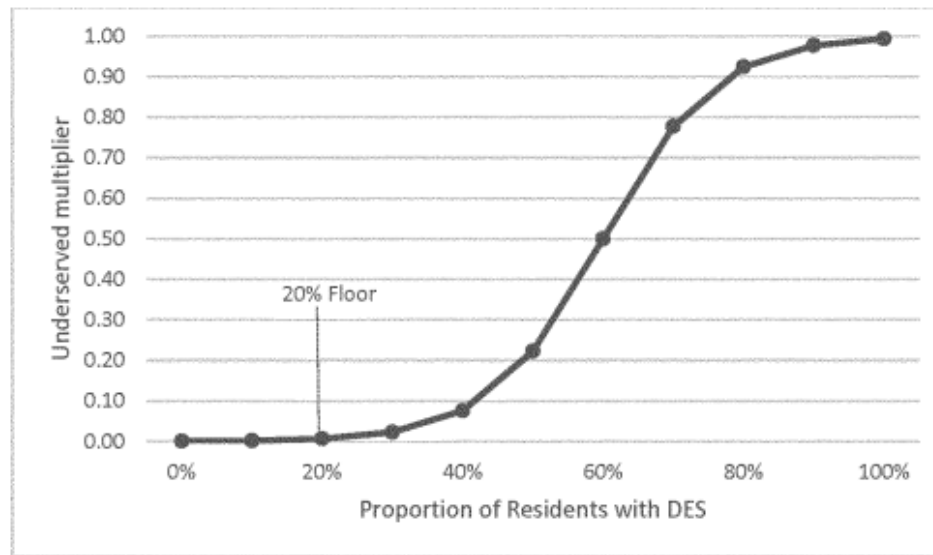
Notes:
 * We proposed to replace the SNFRM would be replaced with the SNF WS PPR beginning with the FY 2028 program year.
 ** We proposed to adopt the Nursing Staff Turnover Measure beginning with the FY 2026 program year and the Falls with Major Injury (Long-Stay) Measure, DC Function Measure, and Long Stay Hospitalization Measure beginning with the FY 2027 program year.

Calculation of HEA Bonus Points

Step 2: Calculate the Underserved Multiplier

$$\text{underserved multiplier} = \frac{1}{1 + e^{-12.5(\text{percent of residents with DES} - 0.6)}}$$

Figure A: Determining the Underserved Multiplier From a SNF's Proportion of Residents With DES Using the Logistic Exchange Function



Calculation of HEA Bonus Points

Step 3: Calculate the HEA Bonus Points.

Example SNF	Measure performance scaler	Proportion of Residents with DES (%)	Underserved multiplier	HEA bonus points
	[A]	[B]	[C]	[D] ([A]*[C])
SNF 1	16	50	0.22	3.52
SNF 2	14	70	0.78	10.92
SNF 3	10	10	0	0
SNF 4	2	80	0.92	1.84

Calculation of HEA Bonus Points

Step 4: Add HEA Bonus Points to the normalized sum of all points awarded for each measure.

TABLE 21—EXAMPLE OF THE HEA BONUS POINTS CALCULATION

Example SNF	Normalized sum of all points awarded for each measure	HEA bonus points (Step 3, column [D])	SNF performance score
	[A]	[B]	[(A) + (B)]
SNF 1	80	3.52	83.52
SNF 2	65	10.92	75.92
SNF 3	42	0	42.00
SNF 4	10	1.84	11.84

Payback Percentage Changes

- Starting with FY 2027 program year, we will be increasing payback to approximately 66% to accommodate the HEA.
- Utilizing a variable approach ensures that SNFs that do not receive the HEA will be unaffected (to the greatest extent possible) by the addition of the HEA
- Payback Percentage will fluctuate year to year.

Updating SNF VBP Program Validation Processes

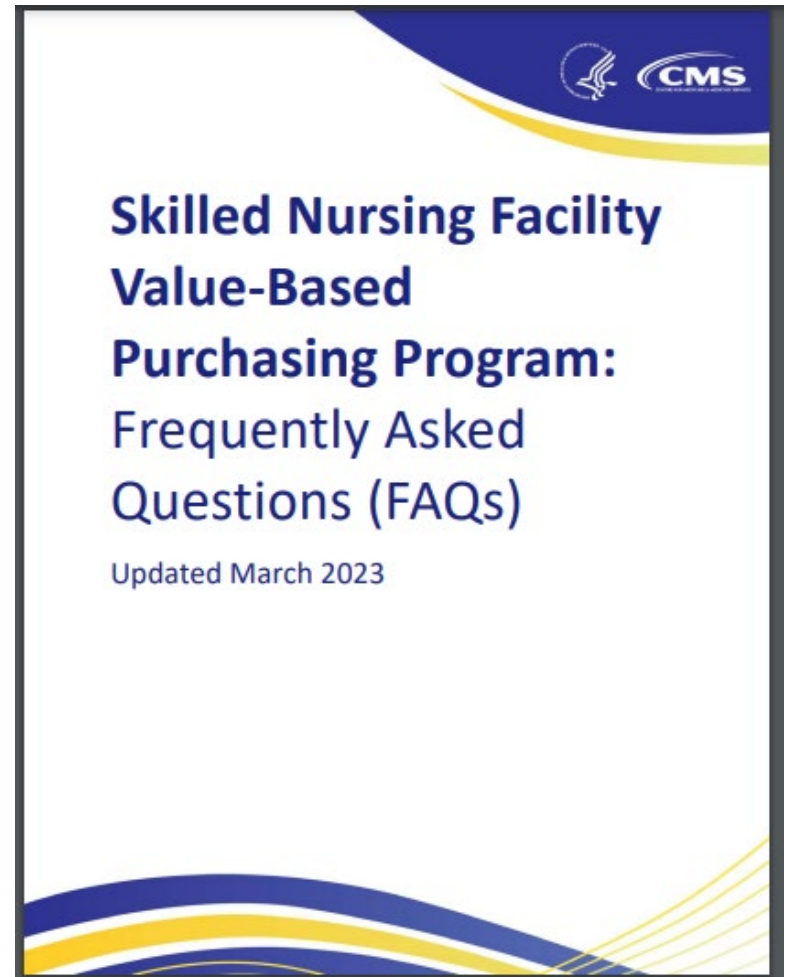
- Section 1888(h)(12) of the Act requires the Secretary to apply a validation process to SNF VBP Program measures and the data submitted as appropriate.
- We finalized the proposal to:
 - Apply existing SNFRM validation process to all claims-based measures.
 - Apply existing PBJ data validation process to SNF VBP measures that use PBJ data as the data source.
 - Adopt the validation process that would apply to SNF VBP measures that use MDS data as the data source. This will include auditing up to 10 records a year from up to 1,500 SNFs a year.
 - For example, for validation in the FY 2027 SNF VBP Program, we would choose up to 1,500 SNFs that submitted at least one MDS record in calendar year 2024 or were participating in the FY 2026 SNF VBP Program/ FY 2024 performance year.

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Questions

Resources

- Find and compare nursing homes on Care Compare:
<https://www.medicare.gov/care-compare/>
- General program information:
<https://www.cms.gov/medicare/quality/nursing-home-improvement/value-based-purchasing>
- Frequently Asked Questions:
<https://www.cms.gov/files/document/snf-vbp-faqs-august-2023.pdf>
- SNF VBP Help Desk: SNFVBP@rti.org



Continuing Education Approval

This program has been approved for one [continuing education credit](#) for the following boards:

- **National credit**
 - Board of Registered Nursing (Provider #16578)
- **Florida-only credit**
 - Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
 - Board of Registered Nursing
 - Board of Nursing Home Administrators
 - Board of Dietetics and Nutrition Practice Council
 - Board of Pharmacy

Note: To verify approval for any other state, license, or certification, please check with your licensing or certification board.

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Thank you!

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