

Reference #: 2026-66-IP
From: Inpatient VIQR Support Contractor
Sent: August 4, 2026
To: IQR, HVBP, eCQM, PCH
Subject: CMS Issues FY 2027 IPPS/LTCH PPS Final Rule

On August 4, 2026, the Centers for Medicare & Medicaid Services (CMS) issued a final rule to update fiscal year (FY) 2027 Medicare payment policies and rates under the Inpatient Prospective Payment System (IPPS) and the Long-Term Care Hospital (LTCH) Prospective Payment System (PPS).

The FY 2027 IPPS/LTCH PPS final rule was published at the Office of the Federal Register Public Inspection Desk at [the federal register](https://www.federalregister.gov). To view the published version of the FY 2027 IPPS/LTCH PPS proposed rule, go to the following web address and click on PDF:
<https://www.federalregister.gov/documents/2026/08/04/2026-15833/medicare-program-hospital-inpatient-prospective-payment-systems-for-acute-care-hospitals-ipp-and>

Changes to multiple quality reporting programs are included in the regulation. Details regarding finalized proposals for various quality reporting programs can be found on the pages listed below:

- Hospital Readmissions Reduction Program pp. 49885-49901
- Hospital Value-Based Purchasing Program pp. 49901-49909
- Hospital-Acquired Condition Reduction Program pp. 49910
- Crosscutting Quality Program Changes pp. 49932-49957
- Hospital Inpatient Quality Reporting Program pp. 49963-50008
- PPS-Exempt Cancer Hospital Quality Reporting Program pp. 50008-50018
- Medicare Promoting Interoperability Program pp. 50028-50084

For more information on the final rule, please see the FY 2027 IPPS/LTCH PPS Final Rule Fact Sheet: <https://www.cms.gov/newsroom/fact-sheets/fy-2027-hospital-inpatient-prospective-payment-system-long-term-care-hospital-prospective-payment>

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