

**Texas Nursing Facility (NF) Medicaid Rates**  
**New Payment Rates Effective September 1, 2025**

Nursing Group	NTA Group	BIMS Eligible	Service Group	Service Code	Bill Code*	Nursing Rate Component	NTA rate component	Dietary Cost	Administration Cost	Operations Cost	Fixed Capital Asset	BIMS rate component	Total
E	1	X	1	1	PD001	\$ 326.71	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 405.33
E	1	Y	1	1	PD019	\$ 326.71	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 417.49
E	2	X	1	1	PD007	\$ 292.50	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 364.07
E	2	Y	1	1	PD025	\$ 292.50	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 376.23
E	3	X	1	1	PD013	\$ 264.94	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 333.50
E	3	Y	1	1	PD031	\$ 264.94	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 345.66
H	1	X	1	1	PD002	\$ 165.72	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 244.34
H	1	Y	1	1	PD020	\$ 165.72	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 256.50
H	2	X	1	1	PD008	\$ 165.72	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 237.29
H	2	Y	1	1	PD026	\$ 165.72	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 249.45
H	3	X	1	1	PD014	\$ 165.72	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 234.28
H	3	Y	1	1	PD032	\$ 165.72	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 246.44
L	1	X	1	1	PD003	\$ 140.28	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 218.90
L	1	Y	1	1	PD021	\$ 140.28	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 231.06
L	2	X	1	1	PD009	\$ 140.28	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 211.85
L	2	Y	1	1	PD027	\$ 140.28	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 224.01
L	3	X	1	1	PD015	\$ 140.28	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 208.84
L	3	Y	1	1	PD033	\$ 140.28	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 221.00
C	1	X	1	1	PD004	\$ 132.85	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 211.47
C	1	Y	1	1	PD022	\$ 132.85	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 223.63
C	2	X	1	1	PD010	\$ 132.85	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 204.42
C	2	Y	1	1	PD028	\$ 132.85	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 216.58
C	3	X	1	1	PD016	\$ 132.85	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 201.41
C	3	Y	1	1	PD034	\$ 132.85	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 213.57
B	1	X	1	1	PD005	\$ 114.29	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 192.91
B	1	Y	1	1	PD023	\$ 114.29	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 205.07
B	2	X	1	1	PD011	\$ 114.29	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 185.86
B	2	Y	1	1	PD029	\$ 114.29	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 198.02
B	3	X	1	1	PD017	\$ 114.29	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 182.85
B	3	Y	1	1	PD035	\$ 114.29	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 195.01
P	1	X	1	1	PD006	\$ 95.68	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 174.30
P	1	Y	1	1	PD024	\$ 95.68	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 186.46
P	2	X	1	1	PD012	\$ 95.68	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 167.25
P	2	Y	1	1	PD030	\$ 95.68	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 179.41
P	3	X	1	1	PD018	\$ 95.68	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 164.24
P	3	Y	1	1	PD036	\$ 95.68	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 176.40
PCE	3	X	1	1	PD038	\$ 95.68	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 164.24
Z01	3	X	1	1	PD037	\$ 95.68	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 164.24

\* Bill code information included with this Attachment was provided by Claims Management Division and represents future fee-for-service coding to be used once PDPM LTC rates are adopted and

**Texas Nursing Facility (NF) Medicaid Rates with HIV/AIDS Enhancement**  
**New Payment Rates Effective September 1, 2025**

Nursing Group	NTA group	BIMS eligible	Service Group	Service Code	Bill Code*	Nursing Rate Component	NTA rate component	Dietary Cost	Administration Cost	Operations Cost	Fixed Capital Asset	BIMS rate component	HIV/AIDS Enhancement	Total (with HIV/AIDS)
E	1	X	1	1	PD051	\$ 326.71	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 58.81	\$ 464.14
E	1	Y	1	1	PD069	\$ 326.71	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 58.81	\$ 476.30
E	2	X	1	1	PD057	\$ 292.50	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 59.70	\$ 423.77
E	2	Y	1	1	PD075	\$ 292.50	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 59.70	\$ 435.93
E	3	X	1	1	PD063	\$ 264.94	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 57.75	\$ 391.25
E	3	Y	1	1	PD081	\$ 264.94	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 57.75	\$ 403.41
H	1	X	1	1	PD052	\$ 165.72	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 29.83	\$ 274.17
H	1	Y	1	1	PD070	\$ 165.72	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 29.83	\$ 286.33
H	2	X	1	1	PD058	\$ 165.72	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 36.88	\$ 274.17
H	2	Y	1	1	PD076	\$ 165.72	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 36.88	\$ 286.33
H	3	X	1	1	PD064	\$ 165.72	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 39.89	\$ 274.17
H	3	Y	1	1	PD082	\$ 165.72	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 39.89	\$ 286.33
L	1	X	1	1	PD053	\$ 140.28	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 25.25	\$ 244.15
L	1	Y	1	1	PD071	\$ 140.28	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 25.25	\$ 256.31
L	2	X	1	1	PD059	\$ 140.28	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 32.30	\$ 244.15
L	2	Y	1	1	PD077	\$ 140.28	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 32.30	\$ 256.31
L	3	X	1	1	PD065	\$ 140.28	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 35.31	\$ 244.15
L	3	Y	1	1	PD083	\$ 140.28	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 35.31	\$ 256.31
C	1	X	1	1	PD054	\$ 132.85	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 23.91	\$ 235.38
C	1	Y	1	1	PD072	\$ 132.85	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 23.91	\$ 247.54
C	2	X	1	1	PD060	\$ 132.85	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 30.96	\$ 235.38
C	2	Y	1	1	PD078	\$ 132.85	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 30.96	\$ 247.54
C	3	X	1	1	PD066	\$ 132.85	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 33.97	\$ 235.38
C	3	Y	1	1	PD084	\$ 132.85	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 33.97	\$ 247.54
B	1	X	1	1	PD055	\$ 114.29	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 20.57	\$ 213.48
B	1	Y	1	1	PD073	\$ 114.29	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 20.57	\$ 225.64
B	2	X	1	1	PD061	\$ 114.29	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 27.62	\$ 213.48
B	2	Y	1	1	PD079	\$ 114.29	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 27.62	\$ 225.64
B	3	X	1	1	PD067	\$ 114.29	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 30.63	\$ 213.48
B	3	Y	1	1	PD085	\$ 114.29	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 30.63	\$ 225.64
P	1	X	1	1	PD056	\$ 95.68	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 17.22	\$ 191.52
P	1	Y	1	1	PD074	\$ 95.68	\$ 14.78	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 17.22	\$ 203.68
P	2	X	1	1	PD062	\$ 95.68	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 24.27	\$ 191.52
P	2	Y	1	1	PD080	\$ 95.68	\$ 7.73	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 24.27	\$ 203.68
P	3	X	1	1	PD068	\$ 95.68	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 27.28	\$ 191.52
P	3	Y	1	1	PD086	\$ 95.68	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ 12.16	\$ 27.28	\$ 203.68
PCE	3	X	1	1	PD088	\$ 95.68	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 27.28	\$ 191.52
Z01	3	X	1	1	PD087	\$ 95.68	\$ 4.72	\$ 21.58	\$ 27.43	\$ 7.70	\$ 7.13	\$ -	\$ 27.28	\$ 191.52

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# **Skilled Nursing Facility Data Validation Process: Frequently Asked Questions (FAQs)**

Created August 2025

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## ***General Skilled Nursing Facility Data Validation Process Information***

### **1. What is the Skilled Nursing Facility (SNF) data validation process?**

The SNF data validation process assesses the accuracy of Minimum Data Set (MDS)-based quality measures used in the SNF Value Based Purchasing (VBP) and Quality Reporting Programs (QRPs). The SNF data validation process has been established in response to Section 1888(h)(12) of the Social Security Act that requires the Secretary to apply a data validation process to SNF VBP and QRP measures. In the SNF Prospective Payment System (PPS) fiscal year (FY) 2024 final rule (CMS-1779-F) and FY 2025 final rule (CMS-1802-F), CMS specified that a data validation process for MDS-based measures would be implemented to ensure accurate quality data beginning with the FY 2027 program year/FY 2025 performance period.

### **2. Which SNFs are eligible for the data validation process?**

SNFs that submitted at least one MDS assessment record in the previous calendar year and have submitted at least one MDS assessment record in the current fiscal year are eligible for selection.

### **3. Who is conducting the data validation process?**

Healthcare Management Solutions, LLC (HMS) is the data validation process contractor. HMS has an executed Data Use Agreement (DUA) with CMS and has the authority granted by CMS to request and receive medical records. No additional DUAs or other agreements are required to transmit medical records to HMS.

### **4. When will the data validation process begin?**

The data validation process is scheduled to begin in Fall 2025.

## ***Selection for Data Validation***

### **5. How are SNFs selected for the SNF data validation process?**

SNFs are selected randomly from all SNFs eligible for the data validation process. SNFs can only be selected once within a fiscal year.

### **6. How are SNFs informed if they are selected for the data validation process?**

SNFs are notified of selection through their Internet Quality Improvement and Evaluation System (iQIES) MDS 3.0 Provider Preview Reports folder. The selection notification will contain instructions for documentation submission, the list of sample residents for which medical records are being requested and contact information for the data validation contractor.

### **7. How are selection notifications labeled to make them easy to identify?**

The initial selection notification is labeled *Skilled Nursing Facility Data Validation Process - Initial Selection Notification*. The follow-up selection notification is labeled *Skilled Nursing Facility Data Validation Process - Second Selection Notification*.

## **8. How do SNFs access their iQIES Provider folder to locate their selection notification?**

SNFs can locate their selection notification using the following instructions:

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 browse to locate the selection notification.

## **9. When are SNFs informed of their selection for the data validation process?**

SNFs begin receiving selection notifications in Fall 2025.

### ***Submitting SNF Points of Contact***

## **10. Why do SNFs need to identify points of contact (POCs)?**

SNFs must designate and submit POCs to receive review-related emails, including successful file upload receipts, documentation submission verifications, and questions regarding medical record submissions.

## **11. How can SNF POC information be updated/revised?**

To revise or update POC information, return to the original POC link provided in the SNF review notification. Click on the original POC link that was provided and enter revised POC information. This will automatically update the SNF POC information.

### ***Data Validation Process Requirements***

## **12. What are the data validation process requirements to ensure SNF compliance?**

SNFs are required to submit requested medical record documentation to support the validation of up to 10 MDS assessment records. Any selected SNF that fails to submit requested medical record documentation within 45 calendar days of the initial selection notification will be considered noncompliant.

## **13. What information does the SNF need to submit to remain in compliance?**

SNFs are required to submit requested medical record documentation to support the validation of up to 10 MDS assessment records. The selection notification will provide detailed instructions on which medical records to submit and what sections of each medical record to submit.

## **14. How long does a SNF have to respond to ensure they remain in compliance with process requirements?**

To remain in compliance, SNFs have 45 calendar days from the date the initial selection notification is uploaded to submit medical record documentation.

## ***Medical Record Documentation Submissions***

### **15. How does a SNF submit medical record documentation for the data validation process?**

SNFs submit requested medical record documentation through a secured portal. The URL to a SNF's secured portal is included in the initial selection notification along with detailed instructions on how to upload files.

### **16. What format should medical record documentation be submitted in?**

Medical record documentation must be provided in PDF format; no other formats are accepted.

### **17. How is medical record documentation prepared before submission?**

Detailed instructions on how to prepare medical record documentation for submission are included in the selection notification.

### **18. What naming convention should be used when submitting requested medical record documentation?**

Each resident's medical record documentation must be bundled into a single PDF file and use the following naming convention: "CCN\_Validation ID." The CCN is the six-digit CMS certification number assigned by CMS to identify providers including skilled nursing facilities. The validation id is a unique identifier used to identify MDS assessment records selected for audit. For example, if a SNF's CCN is 111111 and the Validation ID for a sampled medical record is 1234, the PDF file is named 111111\_1234.pdf.

### **19. What timeframe should be included in the medical record documentation submitted?**

The selection notification specifies the exact date range required for medical record submission.

### **20. What should be included in the medical record documentation submission?**

Medical records must be submitted following the submission instructions provided in the selection notification. All submission methods are secure and protect personally identifiable information/protected health information (PII/PHI).

### **21. What should NOT be included in the medical record documentation submission?**

Medical record documentation should NOT contain any resident social security numbers or resident face sheets. Medical record documentation should NOT contain any documentation outside of the date range requested.

### **22. How does a SNF know that their medical record documentation has been received?**

SNF POCs receive an automated email notification when files have been successfully uploaded. This email is sent to both designated POCs and include the count of files successfully uploaded.

### **23. How does a SNF know that medical record documentation has been accepted?**

SNF POCs receive an email notification once all requested medical record documentation has been verified as submitted.

## ***Security Concerns***

### **24. How is medical record documentation submitted for the data validation process kept protected?**

All submitted medical records are stored in the CMS SharePoint environment. The CMS SharePoint environment employs a robust security framework that includes encryption, access controls, and compliance features to safeguard files. Access to the environment is limited to only CMS trusted networks. All users are vetted and approved before being granted access to data.

## ***Data Validation Process Results***

### **25. How is a SNF notified of their results?**

SNFs receive a Summary Scoring Report via iQIES. The report contains the SNF's data validation process results for each measure and MDS item, including detailed results from each sampled assessment and validated medical record. The report is for informational purposes only; SNFs are not penalized for their validation results.

### **26. When should SNFs expect to receive their report findings?**

SNFs receive their Summary Scoring Report within three months following the medical record documentation submission deadline.

## ***Data Validation Process Penalties***

### **27. What are the penalties if a SNF does not comply with the data validation process requirements?**

For the FY2025 performance year/FY2027 program year, noncompliance may result in a 2% reduction of a SNF's Annual Payment Update for the FY2027 SNF QRP program year in accordance with Section 1888(e)(6)(A) of the Act.

### **28. How is a SNF be notified if they are found to be noncompliant with the data validation process?**

Selected SNFs receive a Summary Scoring Report that includes a notification that they were noncompliant. SNFs also receive a non-compliance notification letter from their Medicare Administrative Contractor (MAC). More information regarding the notification of noncompliance can be found here: <https://www.cms.gov/medicare/quality/snf-quality-reporting-program/reconsideration-and-exception-extension>

### **29. What appeal process is available if a SNF disagrees with the data validation process findings of noncompliance?**

SNFs may file for reconsideration if they believe the finding of noncompliance is in error. A SNF that

disagrees with the compliance determination, and the impending payment reduction decision may submit a request for reconsideration to CMS within thirty (30) days from the date at the top of the noncompliance notification letter. CMS will not accept any requests submitted after the 30-day deadline.

SNFs are required to submit their request to CMS via email with the subject line: “SNF QRP Reconsideration Request” and include the SNF CMS Certification Number (CCN) (e.g., SNF QRP Reconsideration Request, XXXXXX). The request must be sent to the following email address: SNFQRPreconsiderations@cms.hhs.gov.

For additional details on what must be included in your request, please review instructions here: <https://www.cms.gov/medicare/quality/snf-quality-reporting-program/reconsideration-and-exception-extension>

## **Additional Resources**

### **30. Who do SNFs contact if they have issues submitting documentation or have general questions about the SNF Data Validation Process?**

Starting July 1, 2025, SNFs may contact the SNF Data Validation Help Desk at [snfvalidation@hcmsllc.com](mailto:snfvalidation@hcmsllc.com) to aid with the process and answer any questions. The Help Desk’s operating hours are Monday through Friday from 8:00 AM to 6:00 PM Eastern Time.