Critical Access Hospital and Short-Term Acute Care Hospital PEPPER Webinar

Questions and Answers

June 23, 2026

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1. PEPPER Access

The following subsection describes how to gain PEPPER access.

1.1 How do I identify my organization's Authorized Official (AO) or Access Manager (AM)?

The External User Services (EUS) Help Desk can assist you in identifying your organization's AO or AM and can answer questions about submitting a Staff End User role request with the PEPPER business function, if needed.

Note: You must have a pending role in the Identity & Access (I&A) Management System for the EUS Help Desk to provide the name of your AO or AM.

PECOS EUS Help Desk:

Phone: 1-866-484-8049

Email: EUS_Support@cms.hhs.gov

Hours of Operation: Monday - Friday, 7:00 a.m. - 7:00 p.m. ET

Website: https://eus.cms.gov

2. Webinar Materials

The following subsections provide information on the webinar materials.

2.1 Will this presentation be recorded and available to view later?

Yes, the webinar recording, slides, transcript, and questions and answers will be available on the PEPPER website under the Training and Resources section.

2.2 Will there be a separate presentation for Hospice PEPPER?

Yes, the webinar for Hospice PEPPER was held on June 24, 2026. The webinar recording, slides, transcript, and questions and answers will be available on the PEPPER website under the Training and Resources section.

3. PEPPER Release Schedule

The following subsection provides the PEPPER release schedule.

3.1 What is the release schedule of other PEPPER types?

CMS is relaunching PEPPER via ongoing releases through September 2026. See the schedule below for upcoming releases and currently available reports.

- March: Q4 FY 2025 Short-Term Acute Care Hospitals (STACH)
- May: Critical Access Hospitals (CAH)
- June: Hospice and Q1 FY 2026 STACH

- July: Long-Term Acute Care Hospitals (LTACH) and Inpatient Rehabilitation Facilities (IRF)
- August: Home Health Agencies (HHA) and Inpatient Psychiatric Facilities (IPF)
- September: Partial Hospitalization Program (PHP), Skilled Nursing Facilities (SNF), and Q2 FY 2026 STACH

4. Topic-Specific Questions

The following subsections provide answers to topic-specific questions.

4.1 I received the Quarter 3 (Q3) Fiscal Year (FY) 2025 Short-Term PEPPER and noticed that when I compared it to the Q4 FY 2025 report, the outliers shown in the Q3 historical data column on the Outlier Rank tab were different. Why did this change?

With each PEPPER release, metrics are recalculated using the most current claims data available at that time. As a result, historical target area results may change from one report to the next, which can affect a provider's outlier status for prior quarters. Therefore, you may notice differences in the Q3 FY 2025 outliers shown in the Q4 FY 2025 report compared with those shown in the original Q3 FY 2025 report. For the most accurate and up-to-date information, we recommend relying on the most recent PEPPER.

4.2 Will PEPPER change its methodology to include Medicare Advantage (MA) patients because the Hospital Readmissions Reduction Program (HRRP) now includes certain MA in its readmissions in its calculations?

Even though HRRP has expanded to include MA readmissions, PEPPER is not currently changing its data source or calculations to include MA patients. PEPPER will continue using its existing methodology and data set for now.

4.3 If your low outlier number (e.g., for simple pneumonia) increases quarter over quarter AND year over year, what should be the focus if this is the trend?

If your facility is a high or low outlier for a target area, consider working with your compliance team to review the claims that meet the numerator criteria for that time period. Review the related medical records for patterns or trends that may indicate potential billing or documentation concerns.

4.4 If you do not have Top DRG discharges, what does this mean?

There were fewer than 11 discharges for each of the top DRGs during the reporting period. As a result, Top DRG discharge data are not displayed.