



PEPPER Webinar

September 24, 2026

Thank you for joining today's presentation. We will begin momentarily.

Welcome to Today's PEPPER Webinar



Home Health Agency (HHA)



Partial Hospitalization Program (PHP)

We will begin momentarily.

All participants will be muted for the presentation. To submit a question, please enter your question in the Q&A box in Zoom.

Webinar Agenda



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Updates: *PEPPER Overview & Announcements* (10 minutes)

Review: *Understanding Your PEPPER Report* (25 minutes)

Access: *Portal Access & Navigation* (5 minutes)

Discussion: *Questions & Answers* (10 minutes)

Next Steps: *Closing & Resources* (5 minutes)

PEPPER Overview

What Is a PEPPER?

- A Program for Evaluating Payment Patterns Electronic Report (PEPPER) is an electronic report that provides facility-specific Medicare statistics for discharges and services vulnerable to improper payments.
- Each PEPPER includes statistics for the most recent calendar years for each area at risk for improper payments (“target areas”).
- PEPPERS for Home Health Agency (HHA) and Partial Hospitalization Program (PHP) are released annually.
- PEPPER is generated only for hospitals and facilities with sufficient data (more than 11 periods or episodes) for the target areas included in the report.



PEPPER Purpose

How to Use Your PEPPER?



PEPPER encourages providers to review data about their billing practices to help ensure they submit accurate claims for payment.



PEPPER compares your facility's claims-data statistics with those of other hospitals/facilities in your Medicare Administrative Contractor (MAC) jurisdiction, your state, and the nation.



PEPPER educates providers about their payment patterns and potential risk for improper payments.



PEPPER can help strengthen compliance programs, prepare for audits, and improve documentation and care planning.

Note: PEPPER does not identify improper Medicare payments.

PEPPER Updates

What Changed?

- PEPPERS have been redeveloped. Beginning with the CY 2025 PEPPER, users may notice slight differences in their target area performance compared with historical PEPPERS.
- This release marks the first HHA and PHP PEPPER available through the new PEPPER Portal. The Portal is accessible to Authorized Officials (AOs), Access Managers (AMs), and users with the Staff End User (SEU) business function in the Identity & Access Management (I&A) System.
- Staff End Users should contact their Authorized Official or Access Manager to request access.



PEPPER Target Areas

- PEPPERS display information on facility payment patterns for specific areas identified as potentially at risk for improper Medicare payments, referred to as **Target Areas**.
- These Target Areas were originally identified through Quality Improvement Organization reviews and studies conducted by the Office of Inspector General.
- Target areas may change over time as MACs identify new risks and as policy changes are implemented.

Numerator

Discharges identified as potentially problematic



Denominator

The larger reference group that contains the numerator

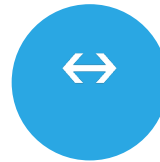
How to Use PEPPER

While PEPPER does not identify the presence of payment errors, facilities can use PEPPER data to:



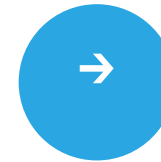
Review

Pinpoint areas for auditing or monitoring



Compare

Assess performance against national, MAC jurisdiction, and state peers



Act

Use findings to guide education, documentation, and monitoring

Example HHA Target Area Review: High Comorbidity

Benchmark	Target Percentage	If Target Area Percentage is Below?	If Target Area Percentage is Above?
National 20 th Percentile	10.5%	<i>Low outlier</i>	Not an outlier
National 80 th Percentile	23.5%	Not an outlier	High outlier

Facility	Target Area Discharge Count (Numerator)	Denominator Discharge Count (Denominator)	Target Area Percentage	Outlier Status
Facility 1	100	1,040	9.6%	<i>Low outlier</i>
Facility 2	276	899	30.7%	High outlier
Facility 3	9	80	<i>N/A – fewer than 11 periods in numerator</i>	No data

Example PHP Target Area Review: 60+ Days of Service (GE60 DOS)

Benchmark	Target Percentage	If Target Area Percentage is Below?	If Target Area Percentage is Above?
National 80 th Percentile	74.4%	Not an outlier	High outlier

Facility	Target Area Discharge Count (Numerator)	Denominator Discharge Count (Denominator)	Target Area Percentage	Outlier Status
Facility 1	15	58	25.9%	Not an outlier
Facility 2	46	60	76.6%	High outlier
Facility 3	9	40	<i>N/A – fewer than 11 periods in numerator</i>	No data

Understanding the Compare Targets Report

Compare Targets Report

- Shows Target Area information for the most recent calendar year.
- Includes your facility's percentile rankings.
- Think of it as: *How does your facility compare to others this year?*

Table 2 Compare Targets Report

Target	Numerator Count	Percent	PHP National %ile	PHP Jurisdict. %ile	PHP State %ile	Sum of Payments
Group Therapy	28	48.3%	7.6	7.4	7.8	\$150,845
No Individual Psychotherapy	58	100%	82.5	89.5	85.6	\$345,755
60+ Days of Service	15	25.9%	16.9	n/a	n/a	\$185,465

Understanding the Comparative Data Table

Target Area Comparative Data Table

- Shows National, Jurisdiction, and State information for the respective Target Area.
- If your facility's target area percentage is greater than the National 80th percentile for that target area, you are considered a high outlier.
- Think of it as: *How do 80% of facilities score for this target area?*

Table 4 Comparative Data for Group Therapy

Time Period	National 80th Percentile	Jurisdiction 80th Percentile	State 80th Percentile	Target Area Rate
CY 2023	100%	#N/A	#N/A	#N/A
CY 2024	100%	#N/A	#N/A	46.3%
CY 2025	100%	100%	100%	48.3%

Example Next Steps For a High Outlier

Target Area Has a High Outlier Status

Audit Cases

Review cases that meet the numerator criteria for potential billing anomalies.

Implement Intervention

For more information, review the suggested interventions for high outliers in the User Guide.

Follow Up

Track progress in this area following the intervention.

PEPPER Content

Home Health Agency (HHA)

Purpose
Definitions
Compare
Low Comorbidity
High Comorbidity
Functional Impairment Medium
Functional Impairment High
Average Case Mix
Average Number of Periods
Periods with Low Visits
Non-LUPA Payments
Outlier Payments
Admission Source
Top Clinical Groups

Partial Hospitalization Program (PHP)

Purpose
Definitions
Compare
Group Tx
No Individual Psychotx
GE60 DOS
30-Day Readm
Top Diagnoses

Sample PEPPER Review



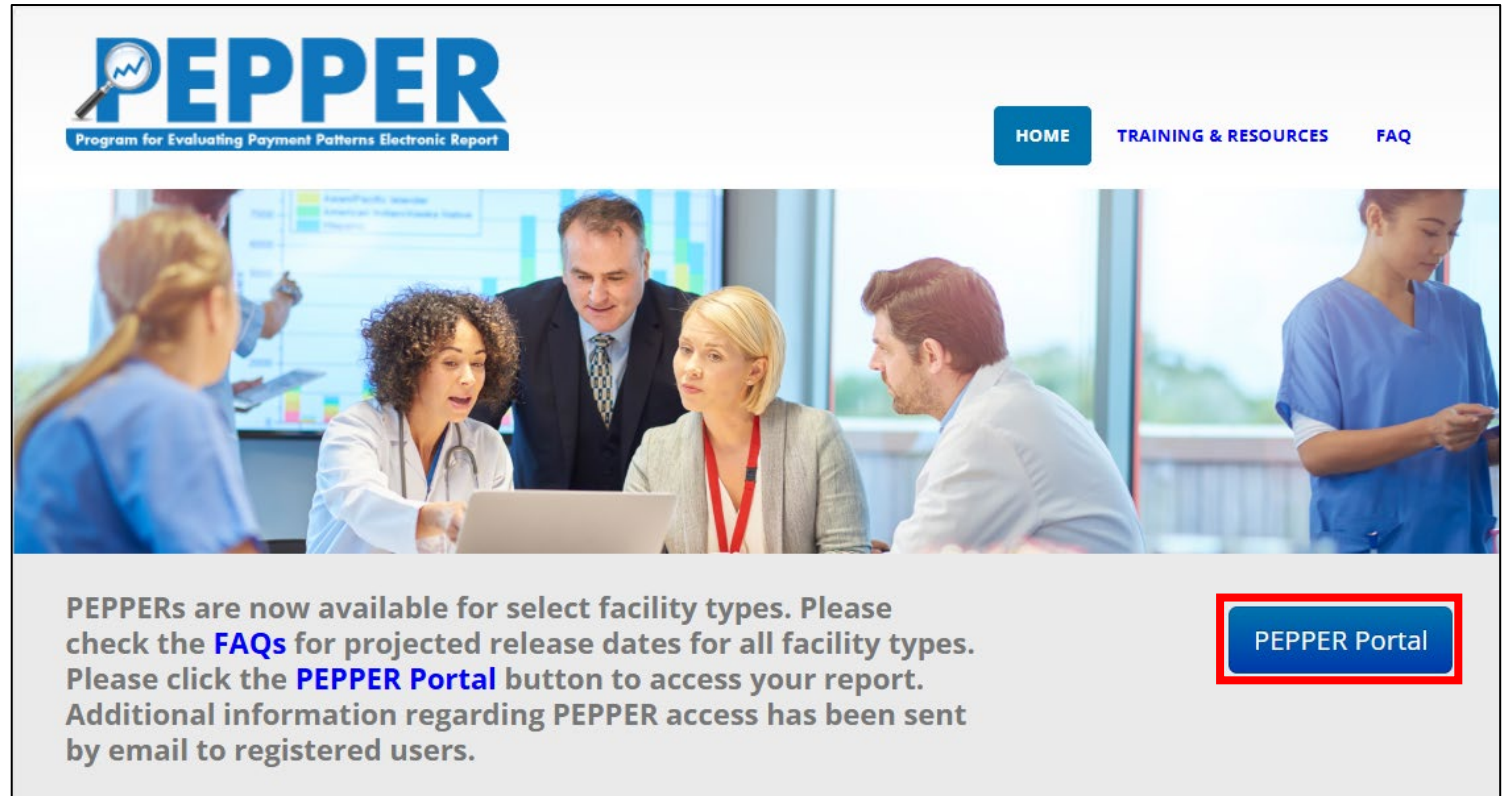
Website Portal Overview



PEPPER Website

Visit the [CMS PEPPER website](#) for more information, including links to the following tools:

- **FAQs**
- **User Guide**
- **PEPPER Help Desk**



The screenshot shows the CMS PEPPER website. At the top left is the PEPPER logo with the tagline "Program for Evaluating Payment Patterns Electronic Report". To the right are navigation links: "HOME", "TRAINING & RESOURCES", and "FAQ". Below the navigation is a large image of healthcare professionals in a meeting. At the bottom, a text box contains the following message: "PEPPERS are now available for select facility types. Please check the [FAQs](#) for projected release dates for all facility types. Please click the [PEPPER Portal](#) button to access your report. Additional information regarding PEPPER access has been sent by email to registered users." To the right of this text is a blue button labeled "PEPPER Portal" which is highlighted with a red rectangular border.

PEPPER Login Page



Login

Username

Password

Submit

A valid Identity & Access Management (I&A) System account is needed to access the Provider Portal of the website. This account is the same login information that is used to access NPES and PECOS systems. Only Authorized Officials and Individual Practitioners who have been vetted will be able to access Pepper reports.

If you have forgotten your Password, click the [Identity & Access Management System - Reset Forgotten Password](#) hyperlink to navigate to the Reset Password page.

If you enter an incorrect User ID and Password combination three times, your User ID will be disabled.

Please contact the EUS help desk if your account is disabled, you have forgotten your User ID, or you need to modify your account to accurately reflect your Authorized Official or Individual Practitioner status:

PECOS External User Services (EUS) Help Desk:

Phone: 1-866-484-8049

E-mail: EUS_Support@cms.hhs.gov

Hours of Operation: Monday - Friday, 7am-7pm EST

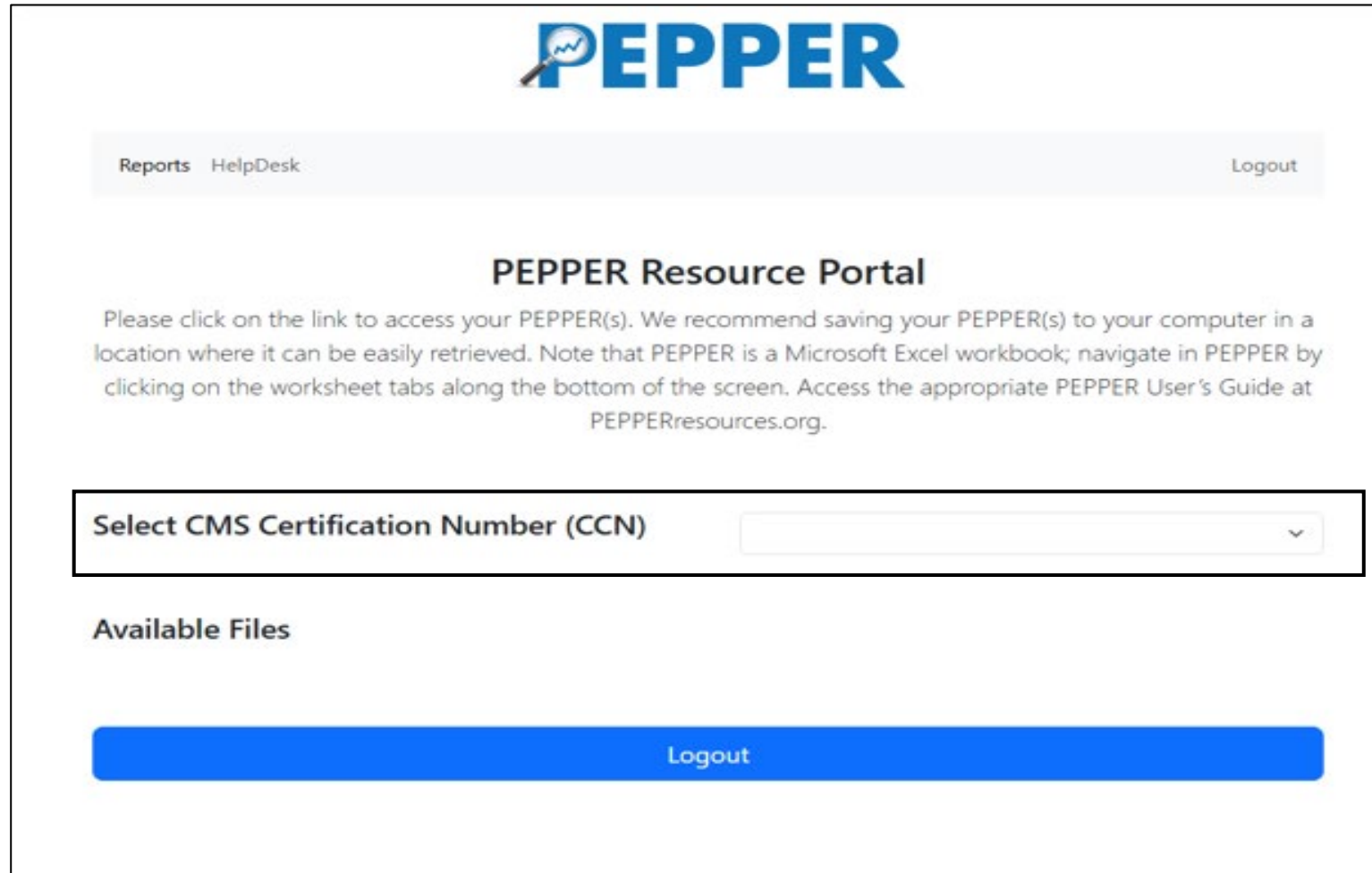
Website: <https://eus.cms.gov>

IMPORTANT! - Every individual user with access to the I&A system is responsible for:

- Keeping login information secure.
- Selecting strong passwords.
- Reporting any unauthorized use of accounts.

Sharing of login information is strictly prohibited!

Accessing Your PEPPER: Select Your Organization



The screenshot shows the PEPPER Resource Portal interface. At the top is the PEPPER logo, which consists of a magnifying glass icon over a line graph, followed by the word "PEPPER" in blue. Below the logo is a navigation bar with links for "Reports" and "HelpDesk" on the left, and a "Logout" link on the right. The main heading is "PEPPER Resource Portal". Below this is a paragraph of instructions: "Please click on the link to access your PEPPER(s). We recommend saving your PEPPER(s) to your computer in a location where it can be easily retrieved. Note that PEPPER is a Microsoft Excel workbook; navigate in PEPPER by clicking on the worksheet tabs along the bottom of the screen. Access the appropriate PEPPER User's Guide at PEPPERresources.org." Below the text is a form field labeled "Select CMS Certification Number (CCN)" with a dropdown arrow. Below the form field is the text "Available Files". At the bottom is a large blue button labeled "Logout".

PEPPER

[Reports](#) [HelpDesk](#) [Logout](#)

PEPPER Resource Portal

Please click on the link to access your PEPPER(s). We recommend saving your PEPPER(s) to your computer in a location where it can be easily retrieved. Note that PEPPER is a Microsoft Excel workbook; navigate in PEPPER by clicking on the worksheet tabs along the bottom of the screen. Access the appropriate PEPPER User's Guide at PEPPERresources.org.

Select CMS Certification Number (CCN)

Available Files

[Logout](#)

View and Download Your Available PEPPER



Reports HelpDesk Logout

PEPPER Resource Portal

Please click on the link to access your PEPPER(s). We recommend saving your PEPPER(s) to your computer in a location where it can be easily retrieved. Note that PEPPER is a Microsoft Excel workbook; navigate in PEPPER by clicking on the worksheet tabs along the bottom of the screen. Access the appropriate PEPPER User's Guide at PEPPERresources.org.

Select CMS Certification Number (CCN) 010001

Available Files

 Click filename to download

010001 20251205043009 Short-term Acute Care Hospital.xlsx	337 KB
010001 20260204023009 Short-term Acute Care Hospital.xlsx	286 KB

Logout

PEPPER Resources Portal Help Desk Request Form



Reports **HelpDesk** Logout

Submit a New Help Request

If you would like to submit a question or request support, please complete the form below and click on the "Submit" button at the bottom of the page.

Select CMS Certification Number (CCN)

Issue Category

Problem Description

Contact e-mail

Phone Number

Interpreting PEPPER Target Area Results



Demonstration: Interpreting PHP PEPPER Results

- Table 3 shows the Group Therapy Target Area results for one PHP.
- In CY 2025, only Group Therapy was billed for 28 of the PHP's 58 total beneficiary episodes.
- As a result, the PHP's Target Area percentage for CY 2025 is 48.3%.
- The National 80th percentile for CY 2025 is 100.0%, as shown in Table 4.
- Because the PHP's Target Area percentage is less than the National 80th percentile, the PHP is not an outlier for this Target Area.

Table 3 PHP Statistics for Group Therapy

Time Period	Outlier Status	Target Area Percent	Target Count	Denominator Count	Target Area Average Length of Stay (ALOS)	Denominator Average Length of Stay (ALOS)	Target Average Medicare Payment	Target Sum Medicare Payment
CY 2025	Not an outlier	48.3%	28	58	41.5	38.9	\$8,528	\$150,845

Table 4 Comparative Data for Group Therapy

Time Period	National 80th Percentile	Jurisdiction 80th Percentile	State 80th Percentile	Target Area Percent
CY 2025	100.0%	100.0%	100.0%	48.3%

Demonstration: Interpreting HHA PEPPER Results

- Table 13 shows the Average Number of Periods Target Area results for one HHA.
- In CY 2025, the HHA billed 899 periods for 212 unique beneficiaries.
- The HHA's Target Area rate for CY 2025 is 4.24, meaning the HHA averaged 4.24 periods per beneficiary.
- The National 80th percentile for CY 2025 is 4.91, as shown in Table 14.
- Because the HHA's Target Area rate is less than the National 80th percentile, the HHA is not an outlier for this Target Area.

Table 13 HHA Statistics for Average Number of Periods

Time Period	Outlier Status	Target Area Rate	Target Count	Denominator Count	Target Area Average Length of Stay (ALOS)	Target (Numerator) Average Payment	Target (Numerator) Sum of Payments
CY 2025	Not an outlier	4.24	899	212	26.2	\$2,130	\$1,622,784

Table 14 Comparative Data for Average Number of Periods

Time Period	National 80th Percentile	Jurisdiction 80th Percentile	State 80th Percentile	Target Area Rate
CY 2025	4.91	5.28	5.43	4.24

Questions & Answers



Call to Action



- 1 Complete the Webinar Feedback Survey
- 2 Register for the Staff End User (SEU) PEPPER Business Function
- 3 Download and Use Your PEPPER

Webinar Feedback Survey

1. Overall Satisfaction: How satisfied were you with this webinar?
 - Very satisfied
 - Satisfied
 - Neutral
 - Dissatisfied
 - Very dissatisfied
2. Usefulness: This webinar provided information that was useful to me.
 - Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly disagree
3. Improvement (Optional): What is one improvement you would like to see in future webinars?
(Open-ended response)
4. What topic would you be interested in seeing presented in future webinars?

Disclaimer: This survey is voluntary and anonymous. The information collected will be used solely to assess participant satisfaction and improve future webinars. No personally identifiable information is requested or collected.

