



PEPPER Sessions Chapter 2 Data SNF

During this session, I'm going to talk about the data that are summarized in this PEPPER. When you look at the data and the statistics in your PEPPER, keep in mind, that it only includes data from Skilled Nursing Facility Medicare claims. It does not include any other payer. The statistics are calculated based on paid Medicare UB-04 claim for SNFs that are submitted to the Medicare Administrative Contractor. These are traditional Part A fee-for-service Medicare claims. These claims are identified for inclusion in PEPPER based on specific inclusion criteria, which are included on this slide.

Claims that are included in the PEPPER if they are Skilled Nursing Facility or swing bed final action claims submitted by Skilled Nursing Facility, swing beds operated by a short and long-term acute care hospitals, and inpatient rehabilitation facilities. Critical access hospitals swing beds are not included. And there is not a skilled nursing facility PEPPER available for critical access hospital swing beds, which are not reimbursed through the skilled nursing facility PPS. The services must have been provided during the report time period, which are the three fiscal years I'll be talking about in just a moment. The Medicare claim payment amount must be greater than \$0. And we do include Medicare secondary payer claims, as long as the Medicare claim payment amount is greater than \$0. We do not include HMO claims, Medicare advantage, Medicare replacement claims. Those claims are not included in the PEPPER. And we also do not include canceled claims. I would refer you to the skilled nursing facility PEPPER User's Guide, which is available at PEPPER.CBRPEPPER.org for data specifications related to these criteria. And it is important for you to use these criteria if you are attempting to identify your skilled nursing facility episodes of care that are summarized in the PEPPER in the case that you would like to look at a few medical records.

So, when you look at your PEPPER, you'll notice that these statistics are organized in three 12-month time periods, according to the fiscal year. The fiscal year runs October 1 through September 30. The Q4FY19 release, which is through the fourth quarter release of fiscal year 2019, summarizes statistics for episodes of care at the skilled nursing facility that end between October the 1st, 2016 through September 30th 2019. Again, that would be fiscal years 2017, 2018, and 2019. I want to point out that each time we release a new PEPPER the oldest time period rolls off as we add the most recent time period. And also, with each PEPPER release, we refresh the statistics for all of the time periods included in the PEPPER. So it is possible that there may be slight changes in the numerator and denominator counts for prior time period if there could have been late claims submitted for that fiscal year or if there might have been adjustments made to claim, again, during that time period. And it's also possible that the percentile values change slightly from one release to the next, also related to this refresh in the data.

The PEPPER reports on services provided to the beneficiary at the skilled nursing facility, whose episode of care occurs in during that respective fiscal year. So, if a beneficiary's care ends between October 1, 2015 and September the 30, 2016 and claims met the inclusion criteria on the slide earlier, then that episode of care would be counted in the fiscal year 2017 time period, even if the beneficiaries care began before October the 1st, 2016. We use the claims data from the SNF to create an episode of care for each beneficiary.

Let me talk a little bit about an episode of care, talk about how we identify and create that episode. The episode is intended to represent a beneficiary's course of treatment for the purposes of summarizing skilled nursing facility data in the PEPPER. To create an episode of care, we start by taking all of the claims submitted by a skilled nursing facility or a beneficiary. And we sort them from the earliest claim from date to the latest. If the latest or the last claim in a series indicates that the beneficiary was discharged or did not return or continued care, then we identify that series of claim from the first to the last as an episode of care and count that beneficiary's episode in the fiscal year in which it ended. Now if there is a gap between one claim "Through Date" and the next claim "From Date" of more than 30 days, then we would count this as the ending of one episode of care and the beginning of a new episode of care. Lastly, if the latest claim in a series ends in the last month of the latest time period, which is September 30, 2019 for this Q4FY19 report, and if the claim indicates that the beneficiary was still a patient, then that beneficiary's episode is not included in that time period. When analyzing claims data to identify episodes, we collect the claims for four months prior to each time period so that we can assess longer lengths of stay.

Let me give you an idea, an example of how we create some episodes. This is an example of claims submitted from one skilled nursing facility for one beneficiary, again, to give you an idea how the episodes are identified. You can see from the first column that these are all for the same beneficiary, beneficiary A. We've numbered the claims submitted by the SNFs in the second column. So, you can see that the skilled nursing facility submitted 10 claims for this beneficiary. The next two columns represent the from and the through date followed by the day count per claim. Next, we've calculated the gap in days between the claim. And then the last column identifies the episode of care.

You can see the first eight claim are combined to form one episode of care, because there was not a gap of 30 or more days between any of these claims. There was a gap, however, of 77 days between claims eight and nine. So, claim nine represents the beginning of a new episode of care for this beneficiary. Claim eight is ending of the first episode. Both of these episodes would be counted in fiscal year 2018, which is the fiscal year in which they in end.

While we're talking about the data in the PEPPER, I want to make you aware of a restriction that is imposed on us by CMS. It requires us to suppress the SNF statistics from being displayed if the numerator count is less than 11 for a target area in any time period. When the numerator or denominator count is less than 11, the PEPPER will display blank cells for that particular time period. And it might appear that there is data missing in the PEPPER. In some cases, entire target area worksheets may not have any data. In addition, state percentiles will not be calculated if there are fewer than 11 skilled nursing facilities in a state with reportable data. The state percentiles would not be reported in that instance, and so there would be a blank cell there for that as well. So if you see missing data in your PEPPER, as in the sample images here, either in the graph, the data table, or in the comparison data table, it's due to this data restriction and not to any error in the PEPPER itself. I should add that it is possible a skilled nursing facility may not have a PEPPER available. This would occur if the numerator count was less than 11 for all of the target areas and for all of the time periods included in the PEPPER.

Sometimes I get a question about why the PEPPER statistics seem to be so old. When we are generating the PEPPERS, we have to wait four months after the most recent month in a reporting time period before we download the claim to analyze for the record. This is when we have at least 95% of the claims submitted. So, the data is relatively complete. So, for example, data for the fiscal year ending September the 30th are downloaded at the end of the following January. The data processing, the quality checks, report production, and distribution require an additional three months. Providers can calculate their own statistics using their claims data to track and trend in between PEPPER releases. I do recommend that if you are interested in calculating some interim statistics, use the same inclusion criteria as we used for the PEPPER and make sure that you use the same numerator and denominator definition.