

## PDPM Claim Probe Review:

### *SALT Sweetens Provider Preparation*

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Skilled Nursing is plagued by inaccurate and inconsistent data. The Medicare claim (UB-04), while imperfect, offers a stable foundation for reimbursement analytics and even allows for cross-provider analysis. CMS uses SNF claim data to identify atypical Medicare billing patterns that reflect areas of potential concern. Specifically, its Program for Evaluating Payment Patterns Electronic Report (“[PEPPER](#)”) benchmarks utilization to guide providers through their auditing and monitoring efforts.

The RUG-IV system lacked reimbursement-sensitivity; PEPPER offered little insight beyond a facility’s Ultra High Rehab percentage. Comparatively, PDPM produces thousands of practical composite scores that complicate performance benchmarking. CMS has not quite mastered PEPPER’s PDPM distribution, but the Agency is applying similar data-driven logic per [Transmittal 12037](#), which mandates a 5-Claim Probe and Educate Review of nearly every SNF in the nation, with high-scoring facilities prioritized.

To help Skilled Nursing Facilities gauge their “Reimbursement Risk Profile” at the onset of PDPM, Zimmet Healthcare developed and embedded a proprietary benchmarking algorithm into our [z.CORE-Analytics](#) platform. CORE is now part of [Netsmart’s Simple](#) suite of applications, but ZHSG continues to update the methodology based on accretive and evolving findings of our Reimbursement-Audit department.

ZHSG’s [Statistical Analysis of Likely Targets](#) (SALT) Report is a refined analytical tool for SNF claim benchmarking. SALT quantifies an individual provider’s relative risk under data-driven payment review based on its PDPM claims submitted to Medicare. Like PEPPER, SALT cannot identify the presence of improper payments. Unlike PEPPER’s blunt focus on categorical outlier capture patterns, SALT targets specific reimbursement-drivers within and among the PDPM components most likely to face scrutiny during payment review.

ZHSG has posted SALT Reports on [eCapIntel](#), our data analytics platform, for every Skilled Nursing Facility in the country. Scores are based on claims submitted through September 30, 2022 (2022 Q4 will be added when CMS releases the dataset). CORE users can find their most recent SALT Report for claims submitted through April 2023 in the application’s Benchmarking section. For those not subscribed to eCapIntel or Netsmart’s CORE, eCapIntel will send your facility’s SALT Report [upon request](#).

SALT is one of several ZHSG-defined measures that drive a provider’s Data Profile. For more information about our “*z.Data-Defender*” initiative, or to discuss how Zimmet Healthcare’s Reimbursement-Audit services can prepare you for CMS’ 5-Claim Review, [contact us](#) anytime.

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# SALT Report



The SALT (Statistical Analysis of Likely Targets) Report is a benchmarking tool designed to gauge potential audit risk from Skilled Nursing Facility Medicare Part A claims. Developed by Zimmet Healthcare in 2019 as a practical PDPM proxy for CMS' PEPPER analysis, SALT scores are not, in any way, a measure of compliance or improper payments; SALT quantifies target reimbursement-drivers most likely to trigger third-party, data-driven audits based on industry experience.

<b>PDPM Category</b>	The PDPM rate component associated with the target area being measured.
<b>Target Reimbursement Driver</b>	The specific reimbursement-sensitive PDPM item measured. Target areas are updated as additional information becomes available.
<b>SNF Capture</b>	The Provider's capture % of the target area based on claims submitted to CORE in the specified date range selected by the user.
<b>State / National %</b>	Incidence % of the target area from respective state/national claims; updated quarterly with an approximate 5-month lag after the end of the quarter.
<b>Percentile</b>	Identifies how a Provider compares to respective state/national performance. For example, if a SNF's percentile is 90, then 90% of facilities have a lower percent value than that Provider for a specific target area.
<b>SALT Score</b>	SALT reflects the relative risk of improper payments using data-driven selection techniques. Each Target Reimbursement Driver is assigned a weight based on ZHSG's findings from thousands of compliance audits associated with improper payments. A higher score also represents greater risk of triggering a third-party audit. SALT scores are color-coded by quartile relative to peer group providers.

SALT scores above 60 are more likely targets of third-party data-driven audits. Based on ZHSG's audit experience, Component Percentiles above 80 are statistically more likely to include some measure of improper payment. Component Percentiles below 20 represent high probability of under-coding/lost reimbursement.

Share of SNFs	25%	50%	25%
Risk Level	Low	Moderate	Elevated
SALT Score	0 - 39	40 - 60	61 +

# SALTShakers

eCapIntel updates SALT scores for 14,000+ Skilled Nursing Facilities as CMS releases claims data (LDS files). However, we believe there is too much variation at the local level to make such a broad comparison useful. Instead, we maintain SALT scores by state. As detailed in the following “SALTShaker” data table, risk scores vary considerably across the country. We recommend benchmarking your performance against respective state providers.

## Average SNF Salt Score by State

Highest ← ..... Risk ..... → Least

1 NJ <b>63.9</b>	11 TX <b>54.2</b>	21 VT <b>50.5</b>	31 WY <b>46.2</b>	41 SD <b>40.3</b>
2 NY <b>62.3</b>	12 DE <b>54.1</b>	22 NC <b>49.4</b>	32 CO <b>45.9</b>	42 MT <b>40.1</b>
3 MD <b>57.8</b>	13 WA <b>54.1</b>	23 NH <b>49.1</b>	33 OK <b>45.6</b>	43 ME <b>39.8</b>
4 CA <b>57.7</b>	14 OH <b>53.8</b>	24 MA <b>48.9</b>	34 MI <b>44.9</b>	44 NE <b>39.8</b>
5 FL <b>57.2</b>	15 VA <b>53.3</b>	25 GA <b>48.8</b>	35 DC <b>44.8</b>	45 MS <b>39.1</b>
6 NV <b>57.2</b>	16 AR <b>53.0</b>	26 LA <b>48.3</b>	36 PA <b>44.7</b>	46 AZ <b>38.6</b>
7 TN <b>56.1</b>	17 ID <b>52.8</b>	27 WV <b>48.1</b>	37 OR <b>44.4</b>	47 IA <b>37.2</b>
8 IL <b>55.0</b>	18 KY <b>52.4</b>	28 NM <b>47.6</b>	38 WI <b>43.6</b>	48 MN <b>35.1</b>
9 UT <b>54.5</b>	19 HI <b>51.9</b>	29 SC <b>46.7</b>	39 RI <b>41.0</b>	49 ND <b>34.1</b>
10 IN <b>54.3</b>	20 CT <b>51.1</b>	30 KS <b>46.5</b>	40 MO <b>40.3</b>	50 AK <b>31.8</b>

ZHSG analytics applied to CMS LDS claim files from 10/1/21 - 9/30/22, courtesy of Netsmart

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