## Fiscal Year (FY) 2027 Hospital Value-Based Purchasing (VBP) Program Quick Reference Guide



Payment adjustment effective for discharges from October 1, 2026, to September 30, 2027

				charges fro	om October 1, 2026, to Sep	terriber 30, 2021		
	Mo	Mortality Measures						
	Jul	Baseline Period July 1, 2017–June 30, 2020*			Performance Period July 1, 2022–June 30, 2025			
		Measure ID Measure Name			Achievement Threshold	Benchmark		
Clinical Outcomes		MORT-30-AMI	Acute Myocardial Infarction 30-Day Mortality Coronary Artery Bypass Graft Surgery 30-Day Mortality Chronic Obstructive Pulmonary Disease 30-Day Mortality		0.877824	0.893133	25%	
		MORT-30-CABG			0.971149	0.980752		
		MORT-30-COPD			0.917395	0.932640		
nica		MORT-30-HF MORT-30-PN	Heart Failure 30-Day Mortality Pneumonia 30-Day Mortality		0.887571 0.844826	0.913388 0.877204		
ᅙ	Complication Measure							
	Apı	Baseline Period April 1, 2017–March 31, 2020*			Performance Period April 1, 2022–March 31, 2025			
		Measure ID	Measure Nam		Achievement Threshold	Benchmark		
	1	COMP-HIP- KNEE	Total Hip Arthroplas Knee Arthroplasty C		0.023322	0.017018		
Person and Community Engagement		<b>Baseline Period</b> n. 1, 2023–Dec. 31, 2			Performance Period Jan. 1, 2025–Dec. 31, 2025		1	
		HCAHPS Survey D			Achievement Threshold (%)	Benchmark (%)		
		Communication with		51.40	77.32	86.30	25%	
		Communication with		51.59	77.53	86.29		
		Responsiveness of		Х	X	X		
		Communication abo		35.92	58.08	70.11		
		Hospital Cleanlines		38.41	63.37	77.73		
		Discharge Informati	tion	64.47	86.02	91.48		
		Care Transition	:4-1	X	X	X		
		Overall Rating of Hospital 34.52			68.79	83.97		
Healthcare-Associated Infections								
Safety	Jar	<b>Baseline Period</b> Jan. 1, 2023–Dec. 31, 2023			Performance Period Jan. 1, 2025–Dec. 31, 2025			
		Measure ID	Measure Name		Achievement Threshold	Benchmark		
	1	CAUTI	Catheter-Associated Urinary Tract Infection Clostridium difficile Infection		0.500	0.000	25%	
	1	CDI			0.351	0.000		
	1	CLABSI	Central Line-Associ Bloodstream Infecti	on	0.608	0.000	N	
	1	MRSA	Methicillin-Resistant Staphylococcus <i>aureus</i>		0.650	0.000		
	Ţ	SSI Colon Surgery		0.735	0.000			
			Abdominal Hystered		0.884	0.000		
	T	SEP-1	Severe Sepsis & Septic Shock		0.618251	0.860833		
Efficiency and Cost Reduction	la:	Baseline Period			Performance Period			
	Jar	n. 1, 2023–Dec. 31, 2 Measure ID	2023 Measure Name		Jan. 1, 2025–Dec. 31, 2025 Achievement Threshold	Ronohmark	.0	
		IVICASUIC ID	wicasure Name		Achievement Threshold	Benchmark Mean of lowest decile	0	
	1	MSPB	Medicare Spending Beneficiary	per	Median MSPB ratio across all hospitals during the performance period	of MSPB ratios across all hospitals during the performance period	25%	
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<sup>♣</sup> Indicates lower values are better for the measure 會 Indicates higher values are better for the measure.

<sup>\*</sup>These baseline periods are impacted by the Extraordinary Circumstances Exception (ECE) granted by CMS on March 22, 2020. Qualifying claims will be excluded from the measure calculations for January 1, 2020–March 31, 2020 (Q1 2020) and April 1, 2020–June 30, 2020 (Q2 2020) from claims-based, complication, and mortality measures. For information, see the FY 2022 Inpatient Prospective Payment System/Long-Term Care Prospective Payment System final rule (pages 45297 through 45299).

<sup>\*\*</sup>For the FY 2027 program year, we would only score on the six dimensions of the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey that would remain unchanged from the current version.