



# Tennessee Health Care Innovation Initiative

2019 Episodes of Care Cost and Quality Thresholds

# TennCare Episodes of Care Thresholds

## Scope of the Document

The goal of this document is to provide an overview of the thresholding process and 2019 values used to calculate gain sharing or risk sharing payments for Episode of Care Quarterbacks.

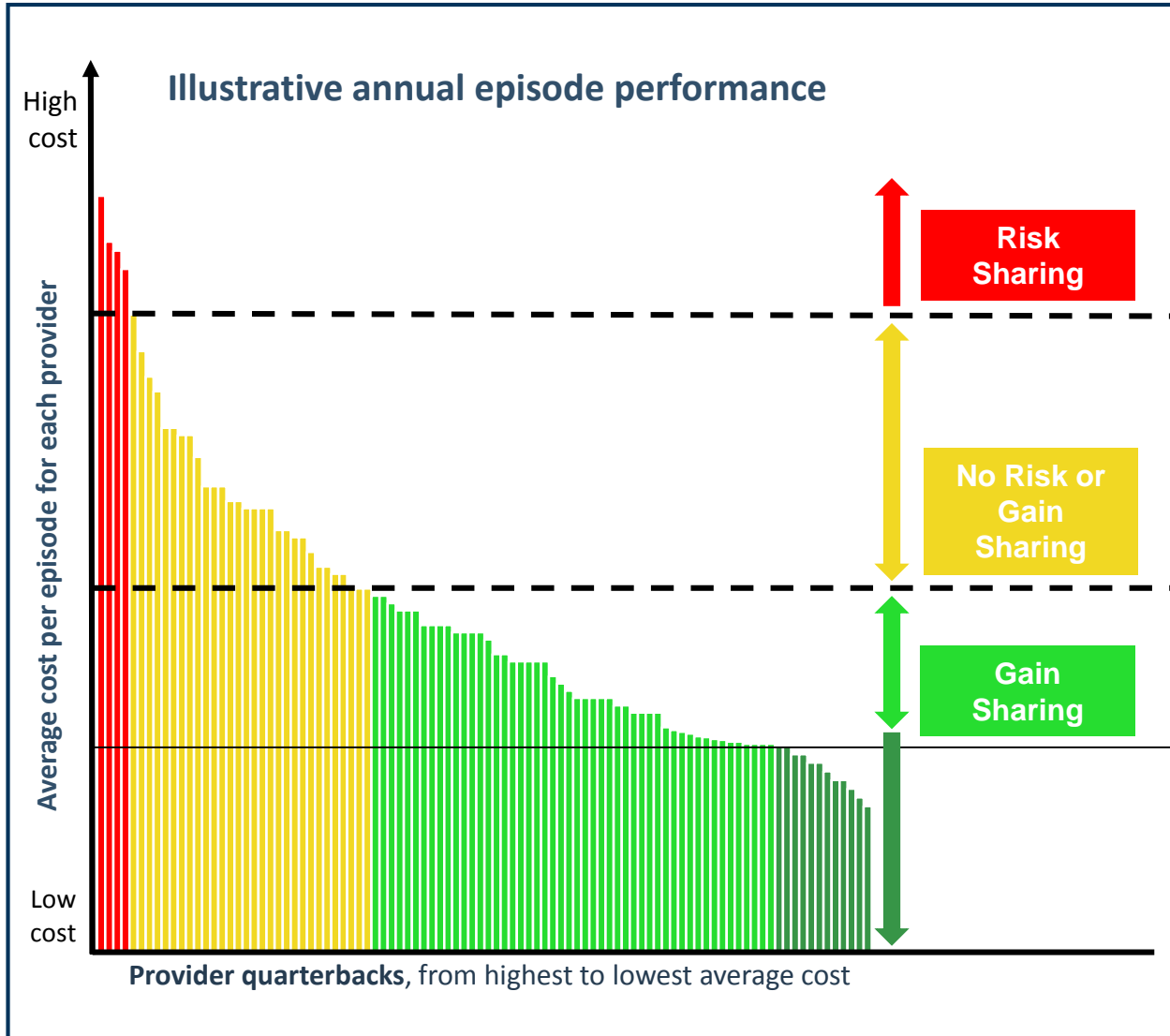
This document will review the following topics:

1. Overview of Episodes of Care Thresholds
2. Cost and Quality Threshold Values for 2019 Performance Period

## Updates from Previous Thresholds (CY 2018)

- ❑ Acceptable Thresholds have been updated based on the most recent data.
- ❑ Episodes in Waves 7 & 8 have cost and quality thresholds for the first time because CY 2019 is their first performance period. The acute gastroenteritis episode will remain in preview for CY 2019.
- ❑ These thresholds incorporate recent changes to the program which include the overlapping episodes exclusion, low-volume quarterback exclusion, and pharmacy spend adjustment.
- ❑ For four existing episodes, the quality metric thresholds have been revised since 2018.
  - *Perinatal – C-Section*
  - *COPD – Follow-up care within the post-trigger window*
  - *GI Hemorrhage – Follow-up visit in post-trigger window*
  - *Pancreatitis – Follow-up care within 14 days*

# TennCare Episode of Care Cost Thresholds: Definitions



The **Acceptable Threshold** is the dollar amount that delineates Quarterbacks between the risk sharing and neutral zone (i.e. no risk or gain sharing).

**Acceptable**

No Risk or  
Gain  
Sharing

**Commendable**

The **Commendable Threshold** dollar amount that delineates Quarterbacks between the neutral zone (i.e. no risk or gain sharing) and gain sharing.

Gain  
Sharing

**Gain sharing limit**

*If average cost is lower than gain sharing limit, Quarterbacks receive a gain sharing payment, but based on values above the gain sharing limit.*

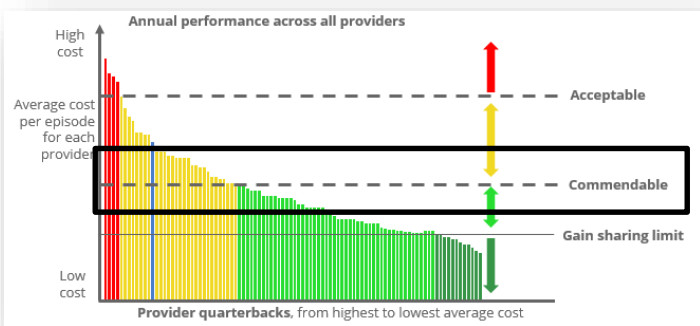
# Calculating Cost Thresholds

## Calculation

Average Cost per Episode Type	Threshold	Calculation
<b>Risk Sharing</b>	Above the Acceptable Threshold	Quarterbacks who owe a risk sharing payment pay 50% of the difference between the Acceptable Threshold and their average risk-adjusted episode spend, multiplied by the Quarterback's number of valid episodes in the reporting period.
<b>No Risk or Gain Sharing</b>	Between the Acceptable and Commendable Threshold	Quarterbacks have no change in payment, neither a gain sharing payment or risk sharing payment.
<b>Gain Sharing</b>	Below the Commendable Threshold	Quarterbacks receive 50% of the difference between the Commendable Threshold and their average risk-adjusted episode, multiplied by the Quarterback's number of valid episodes in the reporting period.

## Example Gain Sharing Calculation

Threshold included in calculation: Commendable



$$\begin{array}{c}
 \text{Commendable Threshold} - \text{Provider Average Cost} \times \text{Number of Valid Episodes} \times \text{Risk Sharing Factor} \\
 \$500 - \$300 \times 5 \times 50\%
 \end{array}$$

**Total Reward Amount:**  
**\$500**

*\*Must reach quality metrics to be eligible for a gain sharing payment*

# Additional Information on Episodes of Care Thresholds

## Key Threshold Information

- All thresholds are set before the performance year begins.
- Thresholds are set based on projections that result in overall budget neutrality (i.e. equivalent total gain sharing and risk sharing payments).
- Commercial payers will set their own thresholds according to their own approaches. Commercial episodes will not have an Acceptable Threshold due to no downside risk.
- CoverKids, administered by Blue Cross Blue Shield of Tennessee (BCBST), has its own Acceptable Thresholds that are separate from the thresholds in this document.
- TennCare Select, also administered by BCBST, will no longer have episodes beginning with the 2019 performance period.

## Overview of Setting Thresholds: 2019 Performance Period

- **Acceptable threshold:** TennCare sets the Acceptable Threshold so that the Quarterbacks with the highest risk-adjusted average annual cost for all TennCare would owe a risk sharing payment, based on 2017 data.
- **Commendable threshold:** Each MCO sets its own Commendable Thresholds that determines a Quarterbacks' eligibility for a gain sharing payment. For the 2019 performance period, the Commendable Threshold is set such that total reward and penalty dollar amounts would be equal, based on 2017 data. Information on the commendable threshold is available from each MCO.
- **Gain sharing limit threshold:** The Gain Sharing Limit is designed to cap the amount of rewards a Quarterback can receive to prevent incentivizing underutilization and inappropriate care. The MCOs and the state work together to define and set the Gain Sharing Limit.
- **Quality metrics linked to gain-sharing thresholds:** Some quality metrics will be linked to gain sharing, while others will be reported for information only. To be eligible for gain sharing, providers must meet predetermined thresholds for gain sharing linked quality metrics.

**Episodes of Care**  
**Cost and Quality Thresholds**  
**for Performance Period 2019**

# Wave 1 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Perinatal</b>	C-Section rate	38%	\$8,266	Varies by MCO
	Group B streptococcus screening rate	85%		
	HIV screening rate	85%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Gestational diabetes screening rate</li> <li>▪ Asymptomatic bacteriuria screening rate</li> <li>▪ Hepatitis B screening rate</li> <li>▪ Tdap vaccinate rate</li> <li>▪ Primary C-section rate</li> <li>▪ Genetic testing rate</li> <li>▪ MFM referral rate for patients with diabetes</li> </ul>			
<b>Asthma Acute Exacerbation</b>	Follow-up with physician or other practitioner within 30 days of discharge	30%	\$1,185	Varies by MCO
	Patient on appropriate medication (oral corticosteroid and/or injectable corticosteroids)	60%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Repeat acute exacerbation during the post-trigger window</li> <li>▪ Acute exacerbation during the trigger window is treated in an inpatient setting (as percent of all episodes)</li> <li>▪ Smoking cessation counseling for the patient and/or family was offered</li> <li>▪ Education on proper use of medication, trigger avoidance, or asthma action plan was discussed</li> <li>▪ Chest x-ray utilization rate</li> </ul>			
<b>Total Joint Replacement</b>	No quality metrics linked to gain sharing		\$26,667	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Readmission rate</li> <li>▪ Post-op deep venous thrombosis (DVT)/Pulmonary Embolism (PE) within 30 days post-surgery</li> <li>▪ Post-op wound infection rate within 90 days post-surgery</li> <li>▪ Dislocations or fractures within 90 days post-surgery</li> <li>▪ Average inpatient length of stay</li> </ul>			

# Wave 2 – Thresholds

Episode	Quality Metrics Thresholds	Acceptable Threshold	Commendable Threshold
<b>Colonoscopy</b>	No quality metrics linked to gain sharing	\$1,410	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Perforation of colon during the trigger or post-trigger windows</li> <li>▪ Post-polypectomy/biopsy bleeding during the trigger or post-trigger windows</li> <li>▪ Prior screening and surveillance colonoscopy within 1 year of triggering colonoscopy</li> <li>▪ Prior diagnostic colonoscopy within 1 year of triggering colonoscopy</li> <li>▪ Repeat colonoscopy: screening, surveillance, or diagnostic colonoscopy within 60 days after the triggering colonoscopy</li> </ul>		
<b>Outpatient and Non-Acute Cholecystectomy</b>	Hospitalization in the post-trigger window	\$5,630	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Intraoperative cholangiography during the trigger window</li> <li>▪ Endoscopic retrograde cholangiopancreatography (ERCP) within 3 to 30 days after procedure</li> <li>▪ Average length of stay</li> </ul>		
<b>COPD Acute Exacerbation</b>	Percent of episodes where the patient visits a physician or other practitioner during the post-trigger window	\$3,140	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Repeat acute exacerbation during the post-trigger window</li> <li>▪ Acute exacerbation during the trigger window is treated in an inpatient setting (as percent of all episodes)</li> <li>▪ Smoking cessation counseling for the patient and/or family was offered</li> </ul>		



# Wave 2 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
PCI – Acute	Hospitalization in the post-trigger window (excluding hospitalizations for repeat PCI)	10%	\$22,715	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Multiple-vessel PCI: professional trigger claim involves multiple vessels (including multiple branches)</li> <li>▪ Staged PCI: repeat PCI in the post-trigger window</li> </ul>			
PCI – Non Acute	Hospitalization in the post-trigger window (excluding hospitalizations for repeat PCI)	10%	\$15,897	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Multiple-vessel PCI: professional trigger claim involves multiple vessels (including multiple branches)</li> <li>▪ Staged PCI: repeat PCI in the post-trigger window</li> </ul>			

# Wave 3 – Thresholds

Episode	Quality Metrics Thresholds	Acceptable Threshold	Commendable Threshold
<b>Upper GI Endoscopy (Esophagogastroduodenoscopy (EGD))</b>	No quality metrics linked to gain sharing	\$1,661	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Emergency department visit within the post-trigger window</li> <li>▪ Admission within the post-trigger window</li> <li>▪ Perforation within upper gastrointestinal tract</li> <li>▪ Biopsy specimens in cases of gastrointestinal ulcers or suspected Barrett's esophagus</li> </ul>		
<b>Respiratory Infection</b>	No quality metrics linked to gain sharing	\$124	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Emergency department visit within the post-trigger window</li> <li>▪ Admission within the post-trigger window</li> <li>▪ Antibiotic injection for Strep A sore throat</li> <li>▪ Steroid injection for Strep A sore throat</li> </ul>		
<b>Pneumonia</b>	Follow-up care within the post-trigger window	\$2,192	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Follow-up care within the first seven days of post-trigger window</li> <li>▪ Emergency department visit within the post-trigger window</li> <li>▪ Admission within the post-trigger window</li> <li>▪ Follow-up visit versus emergency department visit</li> <li>▪ Pseudomembranous colitis within the post-trigger window</li> </ul>		

# Wave 3 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Urinary Tract Infection (UTI)-Outpatient</b>	Admission within the trigger window for ED triggered episodes	5%	\$185	Varies by MCO
	Admission within the trigger window for non-ED triggered episodes	5%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Emergency department visit within the post-trigger window</li> <li>▪ Admission within the post-trigger window</li> <li>▪ Pseudomembranous colitis within the post-trigger window</li> <li>▪ Urinalysis performed in the episode window</li> <li>▪ Urine culture versus urinalysis</li> <li>▪ Renal ultrasound for children under two years old within the post-trigger window</li> </ul>			
<b>Urinary Tract Infection (UTI)-Inpatient</b>	Follow-up care within the post-trigger window	40%	\$5,313	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Follow-up care within the first seven days of post-trigger window</li> <li>▪ Emergency department visit within the post-trigger window</li> <li>▪ Admission within the post-trigger window</li> <li>▪ Follow-up visit versus emergency department visit</li> <li>▪ Pseudomembranous colitis within the post-trigger window</li> </ul>			
<b>Gastrointestinal Hemorrhage (GIH)</b>	Follow-up care within the post-trigger window	45%	\$4,955	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Follow-up care within the first seven days of post-trigger window</li> <li>▪ Emergency department visit within the post-trigger window</li> <li>▪ Admission within the post-trigger window</li> <li>▪ Follow-up visit versus emergency department visit</li> <li>▪ Pseudomembranous colitis within the post-trigger window</li> <li>▪ Mortality within the episode window</li> </ul>			

# Wave 4 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Attention Deficit and Hyperactivity Disorder (ADHD)</b>	Minimum care requirement (5 visits/claims during the episode window)	70%	\$788	Varies by MCO
	Long-acting stimulants for members aged 6 to 11 years	80%		
	Long-acting stimulants for members aged 12 to 20 years	80%		
	Utilization of therapy for members aged 4 and 5 years	1 visit		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Utilization of E&amp;M and medication management</li> <li>▪ Utilization of therapy</li> <li>▪ Utilization of level I case management</li> <li>▪ Utilization of medication by age group</li> <li>▪ Follow-up within 30-days of the trigger visit</li> </ul>			
<b>Bariatric Surgery</b>	Follow-up care within the post-trigger window	30%	\$12,922	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Appropriate procedural choice</li> <li>• Admission within the post-trigger window</li> <li>• Emergency department visit within the post-trigger window</li> <li>• Mortality within the episode window</li> <li>• Relevant repeat operation within the post-trigger window</li> </ul>			
<b>Coronary Artery Bypass Graft (CABG)</b>	Follow-up care within the post-trigger window	90%	\$49,152	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>▪ Participation in a Qualified Clinical Data Registry</li> <li>▪ Admission within the post-trigger window</li> <li>▪ Major morbidity within the episode window</li> <li>▪ Mortality within the episode window</li> </ul>			

# Wave 4 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Congestive Heart Failure (CHF) Acute Exacerbation</b>	Follow-up care within the post-trigger window	60%	\$7,864	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Follow-up care within the first seven days of post-trigger window</li> <li>• Admission from the emergency department within the post-trigger window</li> <li>• Admission within the post-trigger window</li> <li>• Mortality within the episode window</li> <li>• Utilization of functional status assessment</li> </ul>			
<b>Oppositional Defiant Disorder (ODD)</b>	Minimum care requirement (6 therapy and/or level I case management visits during the episode window)	30%	\$2,685	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Medication with no comorbidity</li> <li>• Prior ODD diagnosis</li> <li>• Utilization (excluding medication)</li> <li>• Utilization of therapy and level I case management</li> </ul>			
<b>Valve Repair and Replacement</b>	Follow-up care within the post-trigger window	90%	\$71,106	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Participation in a Qualified Clinical Data Registry</li> <li>• Admission within the post-trigger window</li> <li>• Major morbidity in the episode window</li> <li>• Mortality within the episode window</li> </ul>			

# Wave 5 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Breast Biopsy</b>	Appropriate diagnostic workup rate	90%	\$2,177	Varies by MCO
	Core needle biopsy rate	85%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Surgical complication rate</li> <li>• Subsequent biopsy/excision rate</li> <li>• Appropriate genetic testing rate</li> </ul>			
<b>Tonsillectomy</b>	Bleeding up to two days following the procedure	10%	\$3,282	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Dexamethasone administration rate</li> <li>• Rate of indicated concurrent tympanostomy</li> <li>• Rate of absence of antibiotics</li> <li>• Post-operative encounter rate</li> <li>• Bleeding rate between the 3<sup>rd</sup> and 14<sup>th</sup> day</li> </ul>			
<b>Otitis Media</b>	Otitis media with effusion (OME) episodes without antibiotics filled	25%	\$263	Varies by MCO
	Non-OME episodes with amoxicillin	60%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• OME episodes without oral corticosteroid filled</li> <li>• Tympanostomy when indicated</li> <li>• Overall tympanostomy</li> <li>• Follow-up encounter during post-trigger window</li> <li>• Non-OME episodes without macrolide filled</li> </ul>			

# Wave 6 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
SSTI	Bacterial cultures when incision and drainage performed	50%	\$458	Varies by MCO
	SSTI episodes with a first line antibiotic	85%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Infection recurrence</li> <li>• Hospitalizations after initial diagnosis</li> <li>• ED visits after initial diagnosis</li> <li>• Ultrasound imaging</li> <li>• Non-ultrasound imaging</li> <li>• Incision and drainage</li> </ul>			
HIV	Periodic anti-retroviral therapy (ART) refill	85%	\$5,377	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Viral status reporting</li> <li>• Infrequent ART refill</li> <li>• New patients</li> <li>• Viral suppression</li> <li>• Preferred drug use</li> <li>• HIV-related hospitalization</li> <li>• HIV-related ED visit</li> <li>• Screening for sexually transmitted infections (STIs)</li> <li>• Screening for hepatitis C</li> </ul>			

# Wave 6 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
Diabetes Acute Exacerbation	Follow-up care in the first 14 days of the post-trigger window	30%	\$6,703	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Follow-up care within the first seven days of post-trigger window</li> <li>• Admission from the emergency department within the post-trigger window</li> <li>• Admission within the post-trigger window</li> <li>• Mortality within the episode window</li> <li>• Utilization of functional status assessment</li> </ul>			
Pancreatitis	Follow-up care in the first 14 days of the post-trigger window	35%	\$14,182	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Nutritional counseling</li> <li>• New narcotics prescription</li> <li>• Multiple narcotics prescription</li> <li>• Relevant readmission in the post-trigger window</li> <li>• ED visit in the post-trigger window</li> <li>• ERCP performed in the post-trigger window</li> <li>• Cholecystectomy performed in the post-trigger window</li> <li>• Relevant laboratory test in the first 14 days of the post-trigger window</li> </ul>			



# Wave 7 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Spinal Fusion</b>	Difference in Average MED/day	8.0	\$40,017	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger opioid window</li> <li>• Related readmission</li> <li>• Cervical procedure complication</li> <li>• Lumbar procedure complication</li> <li>• Related follow-up care</li> <li>• Non-surgical management</li> <li>• Post-discharge physical therapy</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			
<b>Spinal Decompression</b>	Difference in Average MED/day	0.0	\$9,879	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger opioid window</li> <li>• Related readmission</li> <li>• Cervical procedure complication</li> <li>• Lumbar procedure complication</li> <li>• Related follow-up care</li> <li>• Non-surgical management</li> <li>• Post-discharge physical therapy</li> <li>• Opioid and benzodiazepine</li> </ul>			

MED = Morphine equivalent dose-

# Wave 7 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
Femur/Pelvic Fracture	Related Follow-up Care During Post-Trigger Window 1	30%	\$25,720	Varies by MCO
	Difference in Average MED/day	8.0		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger opioid window</li> <li>• Related readmission</li> <li>• ED visit</li> <li>• Complication</li> <li>• Mortality</li> <li>• Opioid and benzodiazepine</li> </ul>			
Knee Arthroscopy	Difference in Average MED/day	0.0	\$4,698	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger window</li> <li>• Non-indicated diagnosis</li> <li>• Pre-operative physical therapy</li> <li>• Multiple MRIs</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			
Back/Neck Pain	Difference in Average MED/day	0.0	\$510	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during 1-60 days prior to the trigger window</li> <li>• Average MED/day during the episode window</li> <li>• Non-surgical management</li> <li>• Absence of spine x-ray imaging</li> <li>• Absence of spine MRI imaging</li> <li>• Non-axial back/neck pain</li> <li>• Drug screen</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			

MED = Morphine equivalent dose.

# Wave 7 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Non-operative Ankle Injury</b>	Difference in Average MED/day	0.0	\$450	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the episode opioid window</li> <li>• X-ray imaging for sprain/strain episodes</li> <li>• Incremental imaging</li> <li>• ED visit after initial diagnosis</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			
<b>Non-operative Wrist Injury</b>	Difference in Average MED/day	0.0	\$529	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the episode opioid window</li> <li>• X-ray imaging for sprain/strain episodes</li> <li>• Incremental imaging</li> <li>• ED visit after initial diagnosis</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			

MED = Morphine equivalent dose.

# Wave 7 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Non-operative Shoulder Injury</b>	Difference in Average MED/day	0.0	\$501	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the episode opioid window</li> <li>• X-ray imaging for sprain/strain episodes</li> <li>• Incremental imaging</li> <li>• ED visit after initial diagnosis</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			
<b>Non-operative Knee Injury</b>	Difference in Average MED/day	0.0	\$622	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the episode opioid window</li> <li>• X-ray imaging for sprain/strain episodes</li> <li>• Incremental imaging</li> <li>• ED visit after initial diagnosis</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			

MED = Morphine equivalent dose.

# Wave 8 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
Acute Seizure	Brain MRI utilization in focal epilepsy	10%	\$2,006	Varies by MCO
	Prolonged EEG monitoring utilization in newly diagnosed seizure	10%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Brain MRI utilization in newly diagnosed seizure</li> <li>• Brain MRI utilization in children</li> <li>• Head CT utilization in adults</li> <li>• Safety counseling in newly diagnosed seizure</li> <li>• Related ED visit</li> <li>• Related admission</li> <li>• Related follow-up care</li> </ul>			
Syncope	Carotid ultrasound imaging in adults	10%	\$931	Varies by MCO
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Related admission during the post-trigger window</li> <li>• Admission during the trigger window</li> <li>• Related ED visit</li> <li>• Related follow-up care</li> <li>• Electrocardiogram (EKG)</li> <li>• Head or neck CT or brain MRI imaging in adults</li> <li>• Echocardiogram</li> </ul>			

# Wave 8 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Bronchiolitis</b>	Related admission during the post-trigger window	10%	\$833	Varies by MCO
	Utilization of bronchodilators	30%		
	Utilization of steroids	50%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Utilization of antibiotics</li> <li>• Admission during the trigger window</li> <li>• Utilization of chest physical therapy (PT)</li> <li>• Utilization of blood or sputum cultures</li> <li>• Utilization of respiratory viral testing</li> <li>• Utilization of chest x-ray</li> </ul>			
<b>Pediatric Pneumonia</b>	Related admission during the post-trigger window	10%	\$1,314	Varies by MCO
	Utilization of macrolides in patients under 6 years old	30%		
	Utilization of narrow spectrum antibiotics	50%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Related admission during the post-trigger window</li> <li>• Admission during the trigger window</li> <li>• Related ED visit</li> <li>• Related follow-up care</li> <li>• Electrocardiogram (EKG)</li> <li>• Head or neck CT or brain MRI imaging in adults</li> <li>• Echocardiogram</li> </ul>			

# Wave 8 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Colposcopy</b>	LEEP utilization under 26 years old with no evidence of high grade dysplasia	10%	\$519	Varies by MCO
	LEEP utilization with low-grade dysplasia	10%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Cervical cancer screening</li> <li>• Diagnostic colposcopy</li> <li>• LEEP utilization, trigger window</li> <li>• LEEP utilization, episode window</li> <li>• Difference in average MED/day</li> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger opioid window</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			
<b>Hysterectomy</b>	Alternative treatments	20%	\$7,250	Varies by MCO
	Related follow-up care	10%		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Abdominal hysterectomy</li> <li>• Complications</li> <li>• Related ED visit</li> <li>• Length of stay</li> <li>• Difference in average MED/day</li> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger opioid window</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			

MED = Morphine equivalent dose.

# Wave 8 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>GI Obstruction</b>	Related follow-up care	20%	\$20,581	Varies by MCO
	Difference in average MED/day	0.0		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Cervical cancer screening</li> <li>• Diagnostic colposcopy</li> <li>• LEEP utilization, trigger window</li> <li>• LEEP utilization, episode window</li> <li>• Difference in average MED/day</li> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger opioid window</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			
<b>Appendectomy</b>	Abdominopelvic CT scans in children	50%	\$6,927	Varies by MCO
	Difference in average MED/day	0.0		
	<b>Quality metrics not linked to gain sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger opioid window</li> <li>• Opioid and benzodiazepine prescriptions</li> <li>• Negative appendectomy</li> <li>• Related follow-up care</li> <li>• Related admission</li> <li>• Related ED visit</li> <li>• Complications</li> </ul>			

MED = Morphine equivalent dose.



# Wave 8 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
Hernia Repair	Difference in average MED/day	0.0	\$5,004	Varies by MCO
	<p><b>Quality metrics not linked to gain sharing (i.e., informational only):</b></p> <ul style="list-style-type: none"> <li>• Average MED/day during the pre-trigger opioid window</li> <li>• Average MED/day during the post-trigger opioid window</li> <li>• Opioid and benzodiazepine prescriptions</li> <li>• Use of mesh</li> <li>• Related follow-up care</li> <li>• Related admission</li> <li>• ED visit for related pain</li> <li>• ED visit for other related reason</li> <li>• Complications</li> </ul>			

MED = Morphine equivalent dose.

# Contact Information

- Questions? Email [payment.reform@tn.gov](mailto:payment.reform@tn.gov)
- More information on Episodes of Care:  
<https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care.html>