



# 2024 Episodes of Care Cost and Quality Thresholds

\*Updated June 26,2024

# TennCare Episodes of Care Thresholds

## Scope of the Document

The goal of this document is to provide an overview of the thresholding process and 2023 values used to calculate gain-sharing or risk-sharing payments for Episode of Care quarterbacks.

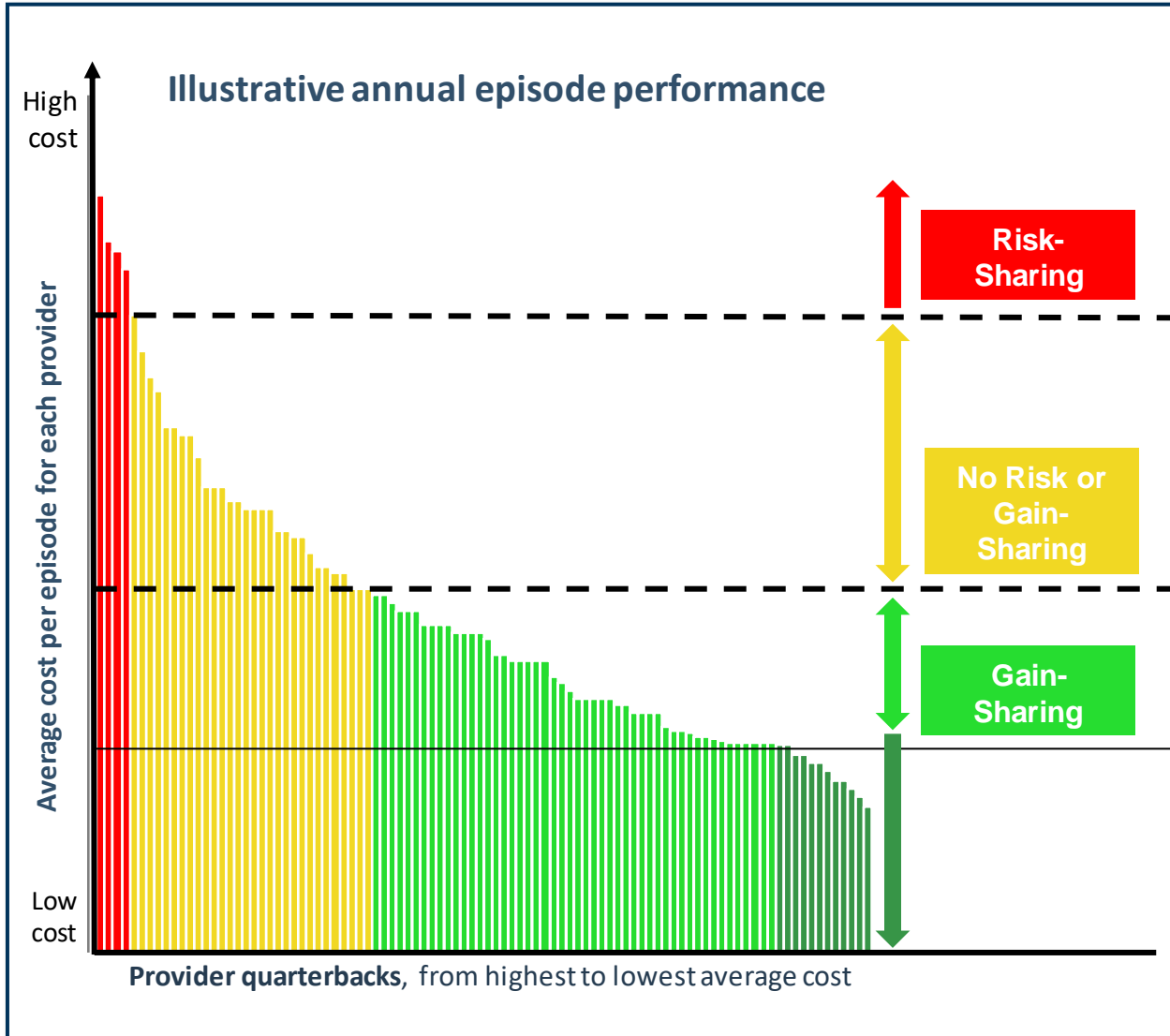
This document will review the following topics:

1. Overview of Episodes of Care thresholds
2. Cost and quality threshold values for 2024 performance period

## Updates from Previous Thresholds (CY 2023)

- Acceptable thresholds have been updated based on the most recent data.
- These thresholds incorporate recent changes to the episode design, which can be referenced in the Memo: 2024 Episodes of Care Changes.
- For Perinatal episodes, the Hepatitis C Screening quality metric is moved from informational only to linked to gain-sharing, with the threshold set at 50%.
- For Asthma episodes, the state will extend the lookback period to two years for the information-only quality metric Follow-up care for newly diagnosed asthma cases.

# 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**

**Commendable**

The **commendable threshold** is the dollar amount that delineates quarterbacks between the neutral zone (i.e., no risk- or gain-sharing) and 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.*

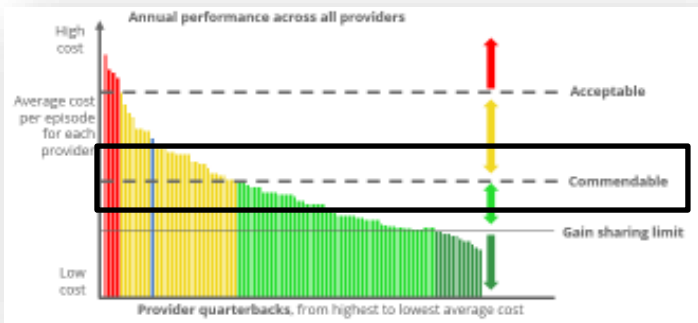
# Calculating Cost Thresholds

## 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



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

**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.

## Overview of Setting Thresholds: 2024 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 2022 data.
- **Commendable threshold:** Each MCO sets its own commendable thresholds that determines a quarterbacks' eligibility for a gain-sharing payment. For the 2024 performance period, the commendable threshold is set such that total gain-sharing payments and risk-sharing payments would be equal, based on 2022 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 2024 Performance Period**

# Wave 1 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Perinatal</b>	HIV screening rate	90%	\$8,689	Varies by MCO
	Group B streptococcus screening rate	90%		
	Primary C-section rate	25%		
	<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>▪ Tdap vaccinate rate</li> <li>▪ C-section rate</li> <li>▪ MFM referral rate for patients with diabetes</li> <li>▪ Hepatitis C screening rate</li> <li>▪ Routine Postpartum Care (one visit)</li> <li>▪ Routine Postpartum Care (two visits)</li> <li>▪ Mental Health Screening</li> </ul>			
<b>Asthma Acute Exacerbation</b>	Follow-up with physician or other practitioner within 30 days of discharge	30%	\$1,255	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> <li>▪ Follow-up care for newly-diagnosed asthma cases</li> </ul>			

# Wave 1 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Total Joint Replacement</b>	Readmission rate	10%	\$13,995	Varies by MCO
	<b>Quality metrics not linked to gain-sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <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> <li>▪ Difference in MED/day</li> </ul>			

MED = Morphine equivalent dose.



# Wave 2 – Thresholds

Episode	Quality Metrics Thresholds	Acceptable Threshold	Commendable Threshold	
<b>Colonoscopy</b>	No quality metrics linked to gain-sharing		\$1,535	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> <li>▪ ED visit within the post-trigger window</li> <li>▪ Difference in average MED/day</li> </ul>			
<b>Outpatient and Non-Acute Cholecystectomy</b>	Hospitalization in the post-trigger window	10%	\$6,878	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> <li>▪ Difference in average MED/day</li> </ul>			
<b>COPD Acute Exacerbation</b>	Percent of episodes where the patient visits a physician or other practitioner during the post-trigger window	45%	\$3,393	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%	\$26,832	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> <li>▪ Difference in average MED/day</li> </ul>			

MED = Morphine equivalent dose.

# Wave 3 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Upper GI Endoscopy (Esophagogastroduodenoscopy (EGD))</b>	ED visit within the post-trigger window	10%	\$1,739	Varies by MCO
	<b>Quality metrics not linked to gain-sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <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> <li>▪ Difference in average MED/day</li> </ul>			
<b>Respiratory Infection</b>	ED visit within the post-trigger window	10%	\$228	Varies by MCO
	<b>Quality metrics not linked to gain-sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <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> <li>▪ Antibiotics utilization</li> </ul>			
<b>Pneumonia</b>	<b>Follow-up care within the post-trigger window</b>	30%	\$2,430	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>▪ ED 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>			

MED = Morphine equivalent dose.

## 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%	\$171	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>▪ ED 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%	\$10,132	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>▪ ED 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%	\$7,539	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>▪ ED 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%	\$645	Varies by MCO
	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 for members aged 6 to 20</li> <li>▪ Utilization of medication for members aged 4 and 5</li> <li>▪ Utilization of medication for members aged 6 to 20</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%	\$9,631	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>• ED visit within the post-trigger window</li> <li>• Mortality within the episode window</li> <li>• Relevant repeat operation within the post-trigger window</li> <li>• Difference in average MED/day</li> </ul>			

MED = Morphine equivalent dose.

# 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%	\$10,105	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%	\$1,903	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>			

# Wave 5 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
Breast Biopsy	Appropriate diagnostic workup rate	90%	\$2,969	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> <li>• Difference in average MED/day</li> </ul>			
Tonsillectomy	Bleeding up to two days following the procedure	5%	\$3,912	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> <li>• Difference in average MED/day</li> </ul>			
Otitis Media	Otitis media with effusion (OME) episodes without antibiotics filled	25%	\$226	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
<b>Diabetes Acute Exacerbation</b>	Follow-up care in the first 30 days of the post-trigger window	30%	\$7,601	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>Pancreatitis</b>	Follow-up care in the first 30 days of the post-trigger window	35%	\$10,061	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> <li>• Difference in average MED/day</li> </ul>			

MED = Morphine equivalent dose.



# Wave 6 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
SSTI	Bacterial cultures when incision and drainage performed	50%	\$426	Varies by MCO
	SSTI episodes with a first line antibiotic	90%		
	<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>			

# Wave 7 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
Spinal Fusion	Difference in average MED/day	80%	\$39,462	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>			
Spinal Decompression	Difference in average MED/day	80%	\$10,578	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
<p style="text-align: center;"><b>Knee Arthroscopy</b></p>	Difference in average MED/day	80%	\$4,970	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 window</li> <li>• Non-indicated diagnosis</li> <li>• Pre-operative physical therapy</li> <li>• Multiple MRIs</li> <li>• Opioid and benzodiazepine prescriptions</li> </ul>			
<p style="text-align: center;"><b>Back/Neck Pain</b></p>	Difference in average MED/day	80%	\$619	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 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	80%	\$413	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	80%	\$539	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	80%	\$498	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	80%	\$628	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%	\$2,255	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%	\$885	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%	\$1,137	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%	\$1,396	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	5%	\$690	Varies by MCO
	LEEP utilization with low-grade dysplasia	5%		
	<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%	\$8,495	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	25%	\$21,331	Varies by MCO
	Difference in average MED/day	80%		
	<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%	\$7,504	Varies by MCO
	Difference in average MED/day	80%		
	<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
<b>Hernia Repair</b>	Difference in average MED/day	80%	\$5,766	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>• 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>			
<b>Acute Gastroenteritis</b>	Abdominal or pelvic CT or MRI in adults	40%	\$1,028	Varies by MCO
	Abdominal or pelvic CT or MRI in children	30%		
	Antibiotics utilization	30%		
	<b>Quality metrics not linked to gain-sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <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>▪ Complications</li> <li>▪ Related admission</li> <li>▪ Related ED visit</li> <li>▪ Stool culture in adults</li> </ul>			

MED = Morphine equivalent dose.

# Wave 9 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
<b>Cystourethroscopy</b>	Difference in average MED/day	80%	\$2,180	Varies by MCO
	Related ED visit	10%		
	Repeat cystourethroscopy	5%		
	<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 trigger and post-trigger window</li> <li>• Complications</li> <li>• Opioid naïve prescriptions</li> <li>• Related follow-up care:</li> <li>• Related post-trigger admission</li> </ul>			
<b>Acute Kidney and Ureter Stones</b>	Difference in average MED/day	80%	\$1,415	Varies by MCO
	Related ED visit	15%		
	<b>Quality metrics not linked to gain-sharing (i.e., informational only):</b> <ul style="list-style-type: none"> <li>• Average MED/day prior to the trigger window</li> <li>• Average MED/day during the trigger and post-trigger windows:</li> <li>• Complications</li> <li>• Kidney &amp; ureter stone removal procedure</li> <li>• Opioid naïve prescriptions</li> <li>• Related post-trigger admission</li> <li>• Related trigger admission</li> <li>• Repeat CT imaging</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>