

# Screening and Surveillance Colonoscopy Episode

## Executive Summary

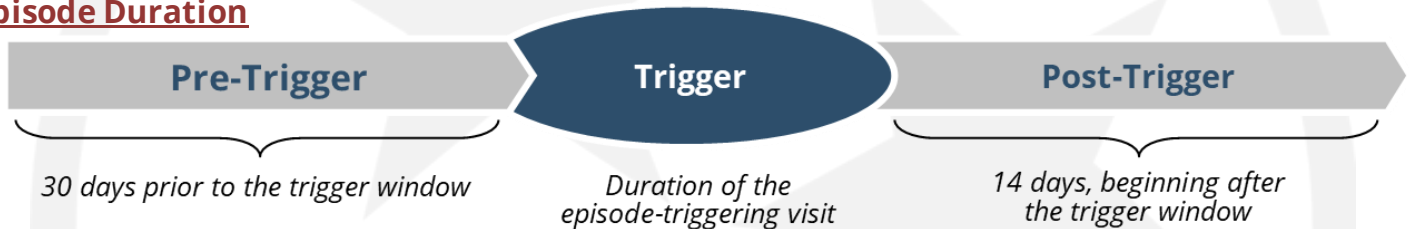
### Episode Design

- **Trigger:** colonoscopy procedure
- **Quarterback type:** professional (physician who performs the colonoscopy)
- **Care included:** all colonoscopy-related care, including anesthesia, imaging and testing, evaluation and management, and medications

### Sources of Value

- Reduction in the frequency of inappropriate interval procedures
- Increase adenoma detection rate
- Appropriate (e.g., split-prep kit) and complete bowel preparation
- Effective use of sedation
- Use of guideline concordant care (e.g., cecal intubation)
- Appropriate site of care
- Appropriate facility accreditation
- Appropriate use of biopsy during procedure
- Reduction of repeat procedures (e.g., repeat colonoscopy)
- Reduction of complications (e.g., intestinal bleeding)

### Episode Duration



### Quality Metrics

#### **Tied to Gain-Sharing**

- None

#### **Informational Only**

- Perforation of colon
- Post-polypectomy/biopsy bleed
- Prior Screening or Surveillance Colonoscopy
- Prior Diagnostic Colonoscopy
- Repeat colonoscopy
- Emergency department visit within the post-trigger window
- Difference in average morphine equivalent dose (MED) per day

### Making Fair Comparisons

#### **Exclusions**

- Business exclusions: inconsistent enrollment, third-party liability, dual eligibility, FQHC/RHC, no PAP ID, incomplete episodes, overlapping episodes
- Clinical exclusions: different care pathway (e.g., COVID-19, colonoscopy through stoma, colonoscopy with stent, coma, cystic fibrosis, end stage renal disease, ileostomy and enterostomy, inflammatory bowel disease, multiple sclerosis, organ transplant, paralysis, Parkinson's, active cancer management, DCS custody)
- Patient exclusions: age (less than 18 or greater than 64 years old), death, left against medical advice
- High-cost outlier: episodes with risk-adjusted spend greater than three standard deviations above the average risk-adjusted episode spend for valid episodes are excluded.

**Risk adjustment** is used to ensure appropriate comparisons between patients.

**To learn more about the episode's design**, please reference the Detailed Business Requirements (DBR) and Configuration File on our website at <https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care/searchable-episodes-table.html>.