

# Non-acute Percutaneous Coronary Intervention (PCI) Episode Executive Summary

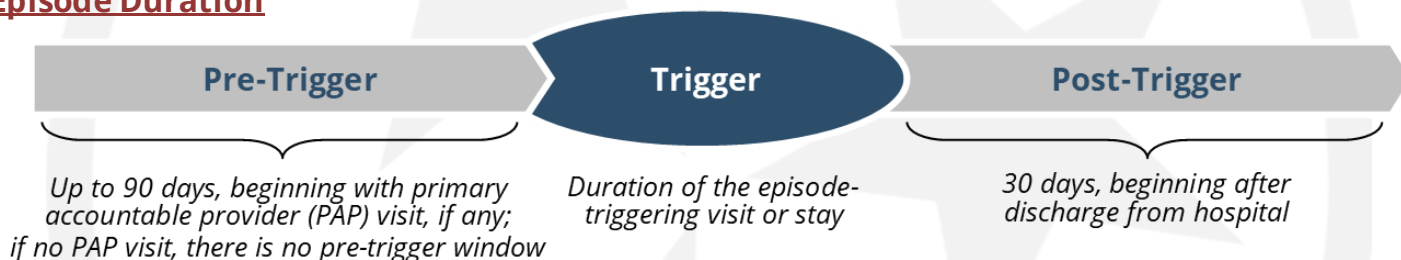
## Episode Design

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

## Sources of Value

- Employ appropriate diagnostic tests to inform selection of interventional procedures
- Appropriateness of procedure
- Choose appropriate site of service, make the most efficient use of patient stay, and minimize waiting for procedures and tests
- Reduce potential for complications due to technical performance (e.g., site of access, type of procedure)
- Employ evidence-based choice of therapies and medications
- Reduce admissions through coordinated discharge care and patient education

## Episode Duration



## Quality Metrics

### Tied to Gain-Sharing

[This section is not applicable to this episode.]

### Informational Only

- Hospital admission in the post-trigger window
- Multiple-vessel PCI
- Staged PCI
- 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, arteritis, cardiogenic shock, circulatory congenital anomalies, conversion to CABG during the trigger window, end stage renal disease, heart valve congenital anomalies, multiple sclerosis, organ transplant, paralysis, Parkinson's, sickle cell anemia, 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>.