

Acute Seizure Episode

Executive Summary

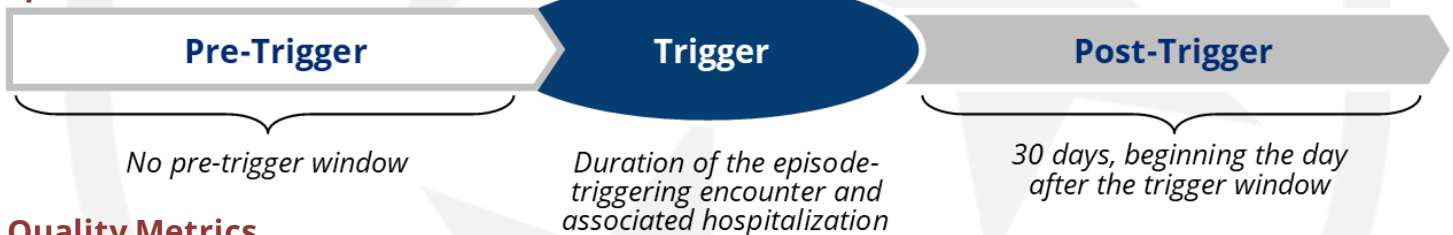
Episode Design

- **Trigger:** visit or stay for acute seizure
- **Quarterback type:** facility (acute seizure treatment site)
- **Care included:** all acute seizure-related care including imaging and testing, medical procedures, and medications

Sources of Value

- Appropriate use of diagnostic testing (e.g., MRI when indicated)
- Timely consultation with a neurologist
- Appropriate use of additional testing (e.g., EEG only when indicated)
- Appropriate prescription of medications
- Appropriate treatment of underlying etiologies vs. medical management
- Appropriate length of stay
- Appropriate use of surgical procedures only when indicated
- Appropriate follow-up care (e.g., a timely follow-up visit with a specialist) and site of post-acute care
- Appropriate prescription of medication
- Appropriate imaging and testing
- Reduced complications and repeat events

Episode Duration



Quality Metrics

Tied to Gain-Sharing

- Brain MRI utilization in focal epilepsy (higher rate is better)
- Prolonged EEG monitoring utilization in newly diagnosed seizure (higher rate is better)

Informational Only

- Brain MRI utilization in newly diagnosed seizure
- Brain MRI utilization in children
- Head CT utilization in adults
- Safety counseling in newly diagnosed seizure
- Related ED visit
- Related admission
- Related follow-up care

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, craniotomy, end stage renal disease, stroke or brain hemorrhage, active cancer management, DCS custody)
- Patient exclusions: age (less than 1 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>.